



## Disclosure of Conflict of Interest

### Definitions:

**Conflict of interest:** A conflict of interest is a set of conditions in which judgement or decisions concerning a primary interest (example a patients' welfare, the validity of research and/or quality of medical education) is unduly influenced by a secondary interest (personal or organizational benefit including financial gain, academic or career advancement, or other benefits to family, friends, or colleagues).

**Perceived conflict of interest:** A perceived conflict of interest is the appearance of a conflict of interest as judged by outside observers regardless of whether an actual conflict of interest exists.

**Real conflict of interest:** A real conflict of interest is when two or more interests are indisputably in conflict.

### The following describes the processes and requirements for gathering, managing and disclosing conflicts of interest to members:

All members must provide to CLyDRN a written description of all relationships with for-profit and not-for-profit organizations over the previous 2 years including (but not necessarily limited to):

- a) Any direct financial payments including receipt of honoraria;
- b) Membership on advisory boards or speakers' bureaus;
- c) Funded grants or clinical trials;
- d) Patents on a drug, product or device; and
- e) All other investments or relationships that could be seen by a reasonable, well-informed participant as having the potential to influence the content of the educational activity.

- I do not have a relationship with a for-profit and/or a not-for-profit organization to disclose.**
- I have a relationship with a for-profit and/or a not-for-profit organization to disclose.** Please indicate the organization(s) with which you have/had a relationship over the previous two years and briefly describe the nature of that relationship.

| Nature of relationship(s)  | Name of for-profit or not-for-profit organization(s) | Description of relationship(s) |
|--|--|--------------------------------|
| Any direct financial payments including receipt of honoraria   |  |                                |
| Membership on advisory boards or speakers' bureaus   |  |                                |
| Funded grants or clinical trials   |  |                                |
| Patents on a drug, product or device   |  |                                |
| All other investments or relationships that could be seen by a reasonable, well-informed member as having the potential to influence membership with the network |  |                                |

By checking "I agree" you are acknowledging that the above information is accurate.

**I Agree**

Name: Manisha Kulkarni

Signature: 

Date: 30 May 2019