

RELATIONSHIPS WITH OUTSIDE ENTITIES ATTESTATION OF COMPLIANCE WITH INSTITUTIONAL POLICIES (Version For Use by Dept. of Medicine ONLY)

NAME:	DEPARTMENT/DIVISION:				
NAME OF ENTITY:					
ENTITY TYPE:	COMMERCIAL	FOUNDATION	GOVERNMENT	OTHER:	
ACTIVITY TYPE :	CONSULTING MEDICO-LEGAL	ADVISORY BOARD EXPERT WITNESS	SPEAKING	OTHER:	
TERM OF AGREEMENT (start/end dates):			TIME COMMITMENT (days per year):		

I. COMPLIANCE WITH INSTITUTIONAL POLICIES

Along with this Attestation Form, I have submitted a written agreement for the proposed activity to the COI Office, David.Atteratta@mssm.edu.

I have not submitted a written agreement because I am not required to do so for speaking engagements at other academic institutions, CME presentations, or medico-legal consulting.

I am familiar with relevant policies posted in the Faculty Handbook, including the <u>Policy on Financial Relationships with</u> <u>Outside Entities</u> and the <u>Policy on Speaking Engagements</u>, and attest that I am in compliance with requirements for participation in outside paid engagements, including but not limited to:

- The maximum time I can spend on such activities cannot, in the aggregate, exceed 52 days/year.
- My outside engagements cannot take precedence over or conflict with any of my responsibilities as an ISMMS faculty member.
- My Chair's (or designee's) prior approval is required for all outside activities I wish to pursue.
- Except for use of Mount Sinai's library resources and the de minimis use of my office and personal computer, I may not use any School facilities or personnel in the performance of the outside activity.
- I am not permitted to function as a private individual in any of the following capacities: practitioner of medicine; employee of a third party; Principal Investigator of a research project; director of a research effort of the third party.
- I can never engage in activities involving product or company endorsements or that are marketing or promotional in nature.
- If I agree to speaking engagements, I must retain full control of the content of my presentations, will prepare my own materials, and will not use company-prepared slide decks.
- My compensation for outside activities must be within fair market value, i.e., the payment must be reasonable in relation to the services I provide, and must resemble what others with similar expertise might be paid for a similar work effort.
- As Mount Sinai is not a party to this agreement, only my personal address may be used in the contract (not a MS address).

I agree that, if this proposed activity is approved, I will disclose it on my on-line <u>Annual Report of Relationships with Outside Entities</u> within one week of approval.

II. SIGNATURES

FACULTY SIGNATURE:	DATE:				
DIV CHIEF SIGATURE:	DATE:				
(Dean's signature required for Dept Chairs. Use standard (non-DOM) attestation form for Dean's approval.					

CHAIR SIGNATURE:

DATE:

Questions? Contact our Helpline at Ext. 40845 or (212) 241-0845 Email completed form to David Atteratta (David.Atteratta@mssm.edu)

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