



RELATIONSHIPS WITH OUTSIDE ENTITIES ATTESTATION OF COMPLIANCE WITH INSTITUTIONAL POLICIES

NAME: _____ DEPARTMENT/DIVISION: _____

NAME OF ENTITY: _____

ENTITY TYPE: COMMERCIAL FOUNDATION GOVERNMENT OTHER: _____

ACTIVITY TYPE : CONSULTING ADVISORY BOARD SPEAKING OTHER: _____
 MEDICO-LEGAL EXPERT WITNESS

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, Kenneth.brower@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 [Policy on Financial Relationships with Outside Entities](#) and the [Policy on Speaking Engagements](#), 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 [Annual Report of Relationships with Outside Entities](#) within one week of approval.

II. SIGNATURES

FACULTY SIGNATURE: _____ DATE: _____

CHAIR'S SIGNATURE: _____ DATE: _____

(Dean's signature required for Chairs only. COI Office will obtain Dean's signature)

DEAN'S SIGNATURE: _____ DATE: _____