



LETTER OF AGREEMENT Regarding Terms, Conditions and Purposes of Educational Support for

"2024 NeuroCardio CME"  
between

St. Dominic-Jackson Memorial Hospital (Tax ID # 64-0303091) and

\_\_\_\_\_  
Company (Please type or print legibly)

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Onsite Representative(s) \_\_\_\_\_

Best Phone# to reach you: ( ) \_\_\_\_\_ email \_\_\_\_\_

The above company wishes to provide support for the above-named activity by means of:

Unrestricted educational grant for support of the CME/CE activity \_\_\_\_\_

Restricted grant to reimburse expenses for: \_\_\_\_\_

Support for catering functions (specify \$ \_\_\_\_\_)

Other (e.g., exhibitor, brochure distribution, etc.) \_\_\_\_\_

You may pay by check or credit card. We accept MasterCard, VISA, American Express and Discover. Make check payable to St. Dominic Hospital NeuroCardio CME and send payment together with this Letter of Agreement, to: St. Dominic Hospital, CME Program, 969 Lakeland Drive, Jackson, MS 39216. If paying by credit card, please complete the information below and email the form to [charlotte.vayda@fmlhs.org](mailto:charlotte.vayda@fmlhs.org). If you prefer, you may give your credit card information over the phone by calling Charlotte Vayda at 601-862-8803.

\_\_\_\_\_  
Credit Card Number

\_\_\_\_\_  
Expiration Date

\_\_\_\_\_  
Credit card Billing Zip Code

\_\_\_\_\_  
Security Code

(Over)

# Commercial Support/Exhibitor Letter of Agreement

1. **Statement of Purpose:** Program is for scientific and educational purposes only and will not promote the company's products, directly or indirectly.
2. **Control of Content & Selection of Presenters & Moderators:** Mississippi State Medical Association and St. Dominic's is ultimately responsible for control, content and selection of presenters and moderators.
3. **Disclosure of Financial Relationships:** Mississippi State Medical Association and St. Dominic's will ensure disclosure to the audience of (a) company funding and (b) any relevant financial relationship between the sponsor and the company (e.g., grant recipient) or between individual speakers or moderators and the company.
4. **Involvement in Content:** There will be no "scripting", emphasis, or influence on content by the company or its agents.
5. **Ancillary Promotional Activities:** No promotional activities will be permitted in the same room or adjacent path as the educational activity. No product advertisements will be permitted in the program room.
6. **Objectivity & Balance:** Mississippi State Medical Association and St. Dominic's will make every effort to ensure that data regarding the company's products (or competing products) are objectively selected and presented, with favorable and unfavorable information and balanced discussion of prevailing information on the product(s) and/or alternative treatments.
7. **Limitations of Data:** Mississippi State Medical Association and St. Dominic's will ensure, to the extent possible, disclosure of limitations of data, e.g. ongoing research, interim analyses, preliminary data, or unsupported opinion.
8. **Discussion of Unapproved Uses:** Mississippi State Medical Association and St. Dominic's will require that presenters disclose when a product is not approved in the United States for the use under discussion.

## 10. Independence of Mississippi State Medical Association and St. Dominic's in the use of Contributed Funds:

- a. funds paid by check should be made payable to **St. Dominic Hospital**
- b. funds paid by credit card will be maybe payable to **Mississippi State Medical Association** for the use of the educational activity by St. Dominic..
- b. all other support associated with this CME/CE activity must be given with full knowledge and approval of Mississippi State medical Association and St. Dominic's.
- c. no other funds from the commercial company will be paid to the program director, planning committee, teachers or authors or any others involved with the CME/CE activity (additional honoraria, extra social events, etc.)

The Commercial Supporter agrees to abide by all requirements of the ACCME *Standards for Commercial Support*.

St. Dominic's agrees to: (1) abide by the ACCME *Standards for Commercial Support*; (2) acknowledge educational support from the commercial company in the program brochures, syllabi, and other program materials, and (3) upon request, furnish the commercial supporter a report concerning the expenditure of the funds provided.

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Company Representative

Date

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CME Designee

Date