



January 21, 2010

Via Electronic Transmission

The Honorable Charles E. Grassley
Ranking Member
Committee on Finance
United States Senate
Washington, DC 20510-6200

Dear Senator Grassley:

I am pleased to respond to your request regarding industry funding, policies for accepting such funding, and disclosure requirements for our top executives and board members. Please note that ASHP's fiscal year begins on June 1 and ends the following May 31. We have provided the enclosed information beginning January 1, 2006, through the end of our 2009 fiscal year.

ASHP represents pharmacists who practice in hospitals and health systems. The Society's 35,000 members include pharmacists and pharmacy technicians who practice in a variety of health-system settings, including inpatient, outpatient, home care, and long-term-care settings, as well as pharmacy students. Pharmacists in hospitals and health systems are experts in medication use who serve on interdisciplinary patient-care teams.

We appreciate the opportunity to be of assistance to you. If you have any questions, please do not hesitate to contact Fern Zappala, General Counsel (fzappala@ashp.org or 301-664-8690) or Brian Meyer, Director, Government Affairs (bmeyer@ashp.org or 301-664-8698).

Sincerely,

A handwritten signature in black ink, appearing to read 'Henri R. Manasse, Jr.', is positioned below the word 'Sincerely,'.

Henri R. Manasse, Jr., Ph.D., Sc.D.
Executive Vice President and Chief Executive Officer

cc: ASHP Board of Directors

TOGETHER WE MAKE A GREAT TEAM

ASHP Industry Funding 2006-2009

ASHP Industry Funding, 2006 - 2009

Year	Company	Amount	Reason
FY06	Allergan	\$ 87,700	Commercial Support for Certified CPE Activity for pharmacists on revenue cycle management in the hospital pharmacy
FY06	Amgen	\$ 79,500	Commercial Support for Certified CPE Activity for pharmacists on oncology care
FY06	Amgen	\$ 50,500	Commercial Support for Certified CPE Activity for pharmacists on oncology care
FY06	Amgen	\$ 9,000	Development of online resource center for pharmacists on Medicare reimbursement changes
FY06	Baxter	\$ 55,000	Certified Continuing Education intended to assist pharmacists in improving patient care
FY06	Baxter	\$ 25,950	Development of article describing research on medication barcoding
FY06	Baxter	\$ 49,500	Commercial Support for Certified CPE Activity for pharmacists on sterile compounding and USP <797> compliance
FY06	Bristol-Myers Squibb	\$ 34,900	Commercial Support for Certified CPE Activity for pharmacists on management of acute coronary syndromes
FY06	CV Therapeutics	\$ 99,550	Commercial Support for Certified CPE Activity for pharmacists on management of angina
FY06	GlaxoSmithKline	\$ 39,400	Commercial Support for Certified CPE Activity for pharmacists on Demonstrating the Value of the Pharmacy Department in Today's Health System
FY06	GlaxoSmithKline	\$ 34,900	Certified Continuing Education intended to assist pharmacists in improving patient care
FY06	Hospira	\$ 99,765	Development of Patient education video program on Medication Safety
FY06	Hospira	\$ 120,350	certified Continuing Education for critical-care nurses at American Association of Critical-Care Nurses National Teaching Institute 2006
FY06	McKesson	\$ 12,810	Purchase of reprints of article from the <i>American Journal of Health-System Pharmacy</i>
FY06	McKesson	\$ 15,900	Purchase of reprints of article from the <i>American Journal of Health-System Pharmacy</i>
FY06	Merck	\$ 110,000	Commercial Support for Certified CPE Activity for pharmacists (publication) on systemic fungal infections, dyslipidemia, antimicrobial resistance, adult immunization, and management of chemotherapy-induced nausea and vomiting
FY06	Merck	\$ 129,050	Commercial Support for Certified CPE Activity for pharmacists (Internet activities) on systemic fungal infections, dyslipidemia, antimicrobial resistance, adult immunization, and management of chemotherapy-induced nausea and vomiting
FY06	Merck	\$ 123,000	Commercial Support for Certified CPE Activities for pharmacists on management of systemic fungal infections
FY06	OrthoBiotech	\$ 180,203	Commercial Support for Certified CPE Activities for pharmacists on Anemia and Chronic Kidney Disease
FY06	Amgen	\$ 75,200	Commercial Support for Certified CPE Activity for pharmacists on changes in Medicare reimbursement
FY06	Allergan	\$ 8,000	Purchase of reprints of article from the <i>American Journal of Health-System Pharmacy</i>
FY06	Roche	\$ 49,500	Commercial Support for Certified CPE Activity for pharmacists on managing cytomegalovirus in transplant patients

Year	Company	Amount	Reason
FY06	Roche	\$ 99,550	Commercial Support for Certified CPE Activity for pharmacists on the management of osteoporosis
FY06	sanofi aventis	\$ 34,500	Commercial Support for Certified CPE Activity for pharmacists on prevention and management of deep-vein thrombosis
FY06	sanofi aventis	\$ 188,948	Commercial Support for Certified CPE Activity for pharmacists on cardiometabolic syndrome
FY06	sanofi aventis	\$ 111,100	Commercial Support for supplement to the <i>American Journal of Health-System Pharmacy</i> (Certified CPE Activity for pharmacists) on managing colorectal cancer
FY06	sanofi aventis	\$ 34,500	Commercial Support for Certified CPE Activity for pharmacists) on managing colorectal cancer
FY06	Scios	\$ 34,500	Commercial Support for Certified CPE Activity for pharmacists on acute decompensated heart failure
FY06	Scios	\$ 360,000	Commercial Support for Certified CPE Activity for pharmacists on acute decompensated heart failure
FY06	Scios	\$ 90,506	Commercial Support for Certified CPE Activity for pharmacists on acute decompensated heart failure
FY06	Sepracor	\$ 111,100	Commercial Support for Certified CPE Activity for pharmacists on asthma management
FY06	Sepracor	\$ 75,800	Commercial Support for Certified CPE Activity for pharmacists on asthma management
FY06	Wyeth	\$ 51,076	Commercial Support for Certified CPE Activity for pharmacists on antimicrobial therapy in hospitals
FY06	Amgen	\$ 50,000	Commercial Support for Oncology Certification Preparatory Course (Certified CPE Activity)
FY06	Amgen	\$ 4,676	Commercial Support for Great Expectations, ASHP's certified CPE conference for new practitioners
FY06	Amgen	\$ 10,000	Meeting Sponsorship - meeting bags for ASHP Summer Meeting
FY06	Amgen	\$ 30,000	Meeting Sponsorship - meeting bags for ASHP Midyear Clinical Meeting
FY06	Amgen	\$ 100,000	Meeting Sponsorship - Shuttle busses
FY06	Astra Zeneca	\$ 30,600	Sponsorship for distribution of ASHP meeting handouts and slides on CD ROM
FY06	Astra Zeneca	\$ 54,000	Support for ASHP State Affiliate Presidential Officers' Training Sessions
FY06	Astra Zeneca	\$ 110,000	Meeting Sponsorship - Internet "café" Internet access and computer terminals
FY06	Baxter	\$ 20,000	Meeting Sponsorship - name badge lanyards for ASHP Midyear Clinical meeting
FY06	Baxter	\$ 23,000	Meeting Sponsorship - Exhibitor map Z-card
FY06	Eli Lilly	\$ 20,000	Meeting Sponsorship - aisle signs for exhibit hall
FY06	Merck	\$ 77,860	Support to conduct and publish ASHP National Survey of Pharmacy Practice in Hospitals
FY06	Ortho McNeil	\$ 90,539	Commercial Support for Psychiatric Pharmacy Certification Preparatory Course (Certified CPE Activity)
FY06	Abbott	\$ 18,291	Commercial support to fund database enhancement for the ASHP Drug Shortages website
FY07	Abbott	\$ 51,821	Advisory meeting of hospital pharmacy directors
FY07	Takeda	\$ 49,150	Advisory meeting of hospital pharmacy directors
FY07	Amgen	\$ 50,000	Commercial Support for ASHP Annual Conference for Leaders in Health-System Pharmacy, a certified CPE activity

Year	Company	Amount	Reason
FY07	Roche	\$ 50,000	Commercial Support for ASHP Annual Conference for Leaders in Health-System Pharmacy, a certified CPE activity
FY07	Lilly	\$ 25,000	Commercial Support for ASHP Annual Conference for Leaders in Health-System Pharmacy, a certified CPE activity
FY07	Wyeth	\$ 25,000	Commercial Support for ASHP Annual Conference for Leaders in Health-System Pharmacy, a certified CPE activity
FY07	Amgen	\$ 80,000	Commercial Support for ASHP Pharmacy Residency Preceptors' Conference, a certified CPE activity
FY07	Baxter	\$ 81,200	Commercial Support for Best Practices in Health-System Pharmacy Practice Awards Program and Poster Session
FY07	Amgen	\$ 134,350	Commercial Support for certified c.e. activity for pharmacists on colorectal cancer
FY07	Amgen	\$ 82,000	Commercial Support for certified c.e. activity for pharmacists on the Medicare Modernization Act
FY07	Berlex	\$ 56,600	Commercial Support for certified C.E. activity for pharmacists, physicians, nurses, and radiologic technologists on safety issues with contrast media agents
FY07	Amgen	\$ 150,000	Commercial Support for certified c.e. activity for pharmacy residents to facilitate transition into practice
FY07	Adolor	\$ 122,679	Commercial Support for certified c.e. activity on post-operative GI management
FY07	Merck	\$ 157,860	Commercial Support for certified C.P.E. activities for pharmacists
FY07	Merck	\$ 807,420	Commercial Support for certified C.P.E. activities for pharmacists at ASHP Midyear Clinical Meeting
FY07	Baxter	\$ 58,000	Commercial Support for certified C.P.E. activities for pharmacists at state affiliate meetings on USP 797 sterile compounding requirements
FY07	Scios	\$ 137,800	Commercial Support for certified C.P.E. activities for pharmacists on acute compensated heart failure
FY07	Sanofi Aventis	\$ 358,315	Commercial Support for certified C.P.E. activities for pharmacists on thromboembolic disorders
FY07	Sanofi Aventis	\$ 115,850	Commercial Support for certified C.P.E. activities for pharmacists on thromboembolic disorders
FY07	Sanofi Aventis	\$ 148,479	Commercial Support for certified C.P.E. activities for pharmacists on thromboembolic disorders
FY07	Sanofi Aventis	\$ 37,500	Commercial Support for certified C.P.E. activities for pharmacists on thromboembolic disorders
FY07	Merck	\$ 134,640	Commercial Support for certified C.P.E. activity (publication) for pharmacists
FY07	Novo Nordisk	\$ 101,663	Commercial Support for certified C.P.E. activity for pharmacists at American Pharmacists Assn. Meeting on diabetes management
FY07	Scios	\$ 132,887	Commercial Support for certified C.P.E. activity for pharmacists on acute compensated heart failure
FY07	Scios	\$ 94,900	Commercial Support for certified C.P.E. activity for pharmacists on acute compensated heart failure
FY07	Bristol-Myers Squibb	\$ 109,869	Commercial Support for certified C.P.E. activity for pharmacists on acute coronary syndromes
FY07	Bristol-Myers Squibb	\$ 98,771	Commercial Support for certified C.P.E. activity for pharmacists on acute coronary syndromes

Year	Company	Amount	Reason
FY07	Bristol-Myers Squibb	\$ 47,518	Commercial Support for certified C.P.E. activity for pharmacists on acute coronary syndromes
FY07	Baxter	\$ 25,700	Commercial Support for certified C.P.E. activity for pharmacists on anesthesia
FY07	Merck	\$ 80,800	Commercial Support for certified C.P.E. activity for pharmacists on changes in Medicare part B reimbursement in hospitals
FY07	Merck	\$ 97,100	Commercial Support for certified C.P.E. activity for pharmacists on diabetes management
FY07	Merck	\$ 98,600	Commercial Support for certified C.P.E. activity for pharmacists on diabetes management
FY07	Merck	\$ 59,500	Commercial Support for certified C.P.E. activity for pharmacists on diabetes management
FY07	Novo Nordisk	\$ 159,176	Commercial Support for certified C.P.E. activity for pharmacists on diabetes management
FY07	Novo Nordisk	\$ 50,000	Commercial Support for certified C.P.E. activity for pharmacists on diabetes management
FY07	Lilly	\$ 56,250	Commercial Support for certified C.P.E. activity for pharmacists on diabetic retinopathy
FY07	Lilly	\$ 59,500	Commercial Support for certified C.P.E. activity for pharmacists on diabetic retinopathy
FY07	Baxter	\$ 74,300	Commercial Support for certified C.P.E. activity for pharmacists on emergency preparedness
FY07	Omniceil	\$ 75,000	Commercial Support for certified C.P.E. activity for pharmacists on improving safety in medication-use through automation
FY07	Lilly	\$ 100,400	Commercial Support for certified C.P.E. activity for pharmacists on inpatient glycemic control
FY07	Lilly	\$ 63,000	Commercial Support for certified C.P.E. activity for pharmacists on inpatient glycemic control
FY07	Baxter	\$ 63,500	Commercial Support for certified C.P.E. activity for pharmacists on intravenous therapy management
FY07	Ortho Biotech	\$ 83,613	Commercial Support for certified C.P.E. activity for pharmacists on management of anemia in chronic kidney disease
FY07	Roche	\$ 128,481	Commercial Support for certified C.P.E. activity for pharmacists on management of anemia in chronic kidney disease
FY07	Merck	\$ 98,600	Commercial Support for certified C.P.E. activity for pharmacists on management of post-operative nausea and vomiting
FY07	Merck	\$ 59,500	Commercial Support for certified C.P.E. activity for pharmacists on management of post-operative nausea and vomiting
FY07	Merck	\$ 125,000	Commercial Support for certified C.P.E. activity for pharmacists on management of post-operative nausea and vomiting
FY07	Amgen	\$ 89,650	Commercial Support for certified C.P.E. activity for pharmacists on Medicare changes
FY07	Amgen	\$ 58,300	Commercial Support for certified C.P.E. activity for pharmacists on Medicare changes
FY07	Diagnostica Stago	\$ 85,600	Commercial Support for certified C.P.E. activity for pharmacists on monitoring of patients on anticoagulation therapy
FY07	Diagnostica Stago	\$ 48,835	Commercial Support for certified C.P.E. activity for pharmacists on monitoring of patients on anticoagulation therapy
FY07	Baxter	\$ 70,800	Commercial Support for certified C.P.E. activity for pharmacists on nutrition Commercial Support
FY07	Baxter	\$ 58,200	Commercial Support for certified C.P.E. activity for pharmacists on pain management
FY07	Merck	\$ 87,700	Commercial Support for certified C.P.E. activity for pharmacists on pain management

Year	Company	Amount	Reason
FY07	GlaxoSmith Kline	\$ 91,400	Commercial Support for certified C.P.E. activity for pharmacists on Preparing the Health System for an Influenza Pandemic
FY07	GlaxoSmith Kline	\$ 89,750	Commercial Support for certified C.P.E. activity for pharmacists on Preparing the Health System for an Influenza Pandemic
FY07	Berlex	\$ 151,081	Commercial Support for certified C.P.E. activity for pharmacists on safety issues with contrast media agents
FY07	Merck	\$ 98,600	Commercial Support for certified C.P.E. activity for pharmacists on systemic antifungal therapy in critically ill patients
FY07	CV Therapeutics	\$ 45,000	Commercial Support for certified C.P.E. activity for pharmacists on the management of angina
FY07	CV Therapeutics	\$ 115,500	Commercial Support for certified C.P.E. activity for pharmacists on the management of angina
FY07	Sepracor	\$ 6,060	Commercial Support for certified C.P.E. activity for pharmacists on the management of asthma
FY07	Sepracor	\$ 73,800	Commercial Support for certified C.P.E. activity for pharmacists on the management of asthma
FY07	Sepracor	\$ 78,750	Commercial Support for certified C.P.E. activity for pharmacists on the management of asthma
FY07	Novo Nordisk	\$ 69,614	Commercial Support for certified C.P.E. activity for pharmacists on the management of hemorrhagic stroke
FY07	Novo Nordisk	\$ 61,300	Commercial Support for certified C.P.E. activity for pharmacists on the management of hemorrhagic stroke
FY07	Berlex	\$ 99,080	Commercial Support for expert panel discussion on compliance with The Joint Commission medication management standards in dealing with contrast media agents
FY07	Amgen	\$ 176,438	Commercial Support for Great Expectations, ASHP's certified CPE conference for new practitioners
FY07	Roche	\$ 294,000	Commercial Support for interdisciplinary certified c.e. activity for pharmacists, physicians, nurses, nurse practitioners, family physicians to improve safety in the use of oral chemotherapy agents
FY07	Amgen	\$ 65,189	Commercial Support for Oncology Certification Preparatory Course (Certified CPE Activity)
FY07	Ortho McNeil Janssen	\$ 35,261	Commercial Support for Psychiatric Pharmacy Certification Preparatory Course (Certified CPE Activity)
FY07	Johnson & Johnson	\$ 23,800	Commercial Support for Psychiatric Pharmacy Certification Preparatory Course (Certified CPE Activity)
FY07	Lilly	\$ 10,000	Commercial Support for Psychiatric Pharmacy Certification Preparatory Course (Certified CPE Activity)
FY07	Lilly	\$ 135,200	Commercial Support for supplement to the American Journal of Health-System Pharmacy on inpatient glycemic control
FY07	Amgen	\$ 121,000	Commercial Support for supplement to the <i>American Journal of Health-System Pharmacy</i> on Medicare changes
FY07	McKesson	\$ 84,310	Commercial Support to convene an expert panel meeting on the topic of the future of pharmacy informatics in hospitals

Year	Company	Amount	Reason
FY07	McKesson	\$ 42,030	Development of article in the <i>American Journal of Health-System Pharmacy</i> on strategies for a high-performance pharmacy department
FY07	Roche	\$ 121,100	Development of article in the <i>American Journal of Health-System Pharmacy</i> on strategies for a high-performance pharmacy department
FY07	Roche	\$ 133,500	Development of article in the <i>American Journal of Health-System Pharmacy</i> on strategies for a high-performance pharmacy department
FY07	Amgen	\$ 18,000	Development of online resources to assist pharmacists with a practice-related issue
FY07	Team Pharmaceuticals	\$ 4,000	Development of web-based resource center on chronic sinusitis
FY07	ImaRx	\$ 34,600	Focus group discussion on issues related to thrombolytic therapy in the hospital setting
FY07	Endo	\$ 13,919	Meeting of expert panel on pain management
FY07	Roche	\$ 50,000	Meeting Sponsorship - aisle signs for exhibit hall
FY07	Roche	\$ 34,475	Meeting Sponsorship - Exhibitor map Z-card
FY07	Amgen	\$ 25,000	Meeting Sponsorship - Hotel key cards
FY07	AstraZeneca	\$ 110,000	Meeting Sponsorship - Internet access and computer terminals
FY07	Adolor	\$ 40,000	Meeting Sponsorship - lead retrieval cards
FY07	Roche	\$ 40,000	Meeting Sponsorship - massage chairs
FY07	Amgen	\$ 35,000	Meeting Sponsorship - meeting bags for ASHP Midyear Clinical Meeting
FY07	Amgen	\$ 10,000	Meeting Sponsorship - meeting bags for ASHP Summer Meeting
FY07	Baxter	\$ 40,000	Meeting Sponsorship - name badge lanyards for ASHP Midyear Clinical meeting
FY07	Baxter	\$ 5,000	Meeting Sponsorship - namebadge lanyards for ASHP Summer Meeting
FY07	Amgen	\$ 100,000	Meeting Sponsorship - Shuttle busses
FY07	Ortho Biotech	\$ 111,198	Publication of Supplement in the <i>American Journal of Health-System Pharmacy</i> on management of anemia in chronic kidney disease
FY07	Amgen	\$ 53,956	Sponsorship for development and distribution of video on pharmacy residency training
FY07	AstraZeneca	\$ 55,400	Sponsorship for distribution of ASHP meeting handouts and slides on CD ROM
FY07	Wyeth	\$ 5,000	Sponsorship of ASHP Presidential Award
FY07	Roche	\$ 85,000	Sponsorship of daily electronic News broadcast from national meeting
FY07	Amgen	\$ 33,000	Sponsorship of digital meeting guide for national meeting
FY07	Amgen	\$ 30,000	Sponsorship of digital meeting guide for national meeting
FY07	AstraZeneca	\$ 54,000	Support for ASHP State Affiliate Presidential Officers' Training Sessions
FY07	Merck	\$ 77,860	Support to conduct and publish ASHP National Survey of Pharmacy Practice in Hospitals
FY08	Merck	\$ 766,860	Commercial Support for certified c.e. activities for pharmacists on dyslipidemia, diabetes, immunizations, and antimicrobial stewardship
FY08	Sanofi Aventis	\$ 357,800	Commercial Support for certified C.P.E. activities for pharmacists on thromboembolic disorders
FY08	Sanofi Aventis	\$ 200,000	Commercial Support for initiative (tools, resources, expert panel meeting) to train pharmacists and motivate them to take a leadership role in patient-care quality improvement activities based on national guidelines and performance measures (http://www.ashp.org/qii)

Year	Company	Amount	Reason
FY08	Sanofi Aventis	\$ 166,900	Commercial Support for certified C.P.E. activities for pharmacists on thromboembolic disorders
FY08	Amgen	\$ 149,680	Commercial Support for certified C.P.E. activities for pharmacists on change in Medicare reimbursement
FY08	Amgen	\$ 188,914	Commercial Support for certified C.P.E. activities for pharmacists on febrile neutropenia in cancer patients
FY08	Novo Nordisk	\$ 179,138	Commercial Support for certified C.E. activities for pharmacists, physicians, and nurses on transfusion therapy
FY08	Novo Nordisk	\$ 174,182	Commercial Support for certified C.P.E. activity for pharmacists on diabetes management
FY08	Sanofi Aventis	\$ 169,530	Commercial Support for certified C.P.E. activities for pharmacists on thromboembolic disorders
FY08	Bayer	\$ 169,913	Commercial Support for certified C.P.E. activity for pharmacists on safety in the use of contrast media
FY08	Amgen	\$ 111,100	Commercial Support for supplement to the <i>American Journal of Health-System Pharmacy</i> (certified C.P.E. activity for pharmacists) on Medicare reimbursement changes
FY08	Adolor	\$ 118,370	Commercial Support for supplement to the <i>American Journal of Health-System Pharmacy</i> (certified C.P.E. activity for pharmacists) on postoperative ileus
FY08	Roche	\$ 113,097	Commercial Support for supplement to the <i>American Journal of Health-System Pharmacy</i> (certified C.P.E. activity for pharmacists) on anemia in chronic kidney disease
FY08	Amgen	\$ 156,300	Commercial Support for certified c.e. activity for pharmacy residents to facilitate transition into practice
FY08	Adolor	\$ 153,717	Commercial Support for certified C.P.E. activity for pharmacists on postoperative bowel dysfunction
FY08	Adolor	\$ 245,989	Commercial Support for certified C.M.E. activities for physicians at American College of Surgeons Annual Meeting on postoperative bowel dysfunction
FY08	Sanofi Aventis	\$ 95,000	Commercial Support for initiative (resources, information, training) for pharmacists to enable them to engage in quality improvement activities focused on improving patient care (www.ashp.org/qii)
FY08	Amgen	\$ 119,425	Commercial Support for supplement to the <i>American Journal of Health-System Pharmacy</i> (certified C.P.E. activity for pharmacists) on changes in Medicare reimbursement
FY08	Amgen	\$ 47,514	Commercial Support for ASHP Annual Conference for Leaders in Health-System Pharmacy, a certified CPE activity
FY08	Lilly	\$ 47,514	Commercial Support for ASHP Annual Conference for Leaders in Health-System Pharmacy, a certified CPE activity
FY08	Roche	\$ 47,514	Commercial Support for ASHP Annual Conference for Leaders in Health-System Pharmacy, a certified CPE activity
FY08	Wyeth	\$ 47,514	Commercial Support for ASHP Annual Conference for Leaders in Health-System Pharmacy, a certified CPE activity

Year	Company	Amount	Reason
FY08	Scios	\$ 149,604	Commercial Support for certified C.P.E. activity for pharmacists on acute decompensated heart failure
FY08	Lilly	\$ 111,100	Commercial Support for supplement to the American Journal of Health-System Pharmacy (certified C.P.E. activity for pharmacists) on diabetic retinopathy
FY08	Allergan	\$ 177,600	Commercial Support for certified C.P.E. activity for pharmacists on regulatory and clinical considerations with biosimilars
FY08	Sanofi Aventis	\$ 111,589	Commercial Support for supplement to the American Journal of Health-System Pharmacy (certified C.P.E. activity for pharmacists) on prevention and management of deep vein thrombosis
FY08	Wyeth	\$ 102,630	Commercial Support for publication on particulate matter contamination in sterile compounding
FY08	Bristol-Myers Squibb/Sanofi	\$ 144,950	Commercial Support for certified C.P.E. activity for pharmacists on acute coronary syndromes
FY08	Merck	\$ 120,900	Commercial Support for certified c.e. activities for pharmacists on dyslipidemia, diabetes, immunizations, and antimicrobial stewardship
FY08	Merck	\$ 96,000	Commercial Support for certified c.e. activities for pharmacists on dyslipidemia, diabetes, immunizations, and antimicrobial stewardship
FY08	Sepracor	\$ 102,833	Commercial Support for certified C.P.E. activity for pharmacists on chronic obstructive pulmonary disease
FY08	Merck	\$ 102,050	Commercial Support for certified C.P.E. activity for pharmacists on systemic fungal infections
FY08	Bristol-Myers Squibb/ Sanofi Aventis Partnership	\$ 121,817	Commercial Support for certified C.P.E. activity for pharmacists on acute coronary syndromes
FY08	Vestara Web	\$ 100,000	Commercial Support for certified C.P.E. activity for pharmacists on regulations in pharmaceutical waste management
FY08	Sanofi Aventis	\$ 109,000	Commercial Support for certified C.P.E. activity for pharmacists on acute coronary syndromes
FY08	Roche	\$ 100,469	Commercial Support for certified C.P.E. activity for pharmacists on anemia in chronic kidney disease
FY08	Merck	\$ 107,150	Commercial Support for certified C.P.E. activity for pharmacists on HIV therapy
FY08	Bayer	\$ 99,080	Commercial Support for expert panel meeting on safety issues with contrast media
FY08	Novo Nordisk	\$ 80,515	Commercial Support for certified C.P.E. activity for pharmacists on transfusion medicine
FY08	Merck	\$ 107,150	Commercial Support for certified C.P.E. activity for pharmacists on diabetes management
FY08	Merck	\$ 84,975	Commercial Support for certified C.P.E. activity for pharmacists on diabetes management
FY08	Baxter	\$ 117,500	Commercial Support for Best Practices in Health-System Pharmacy Practice Awards Program and Poster Session
FY08	Baxter	\$ 77,910	Commercial Support for certified C.P.E. activity for pharmacists on prevention of medication errors with high-alert medications
FY08	OrthoBiotech	\$ 95,230	Commercial Support for certified C.P.E. activity for pharmacists on anemia management

Year	Company	Amount	Reason
FY08	Sepracor	\$ 81,250	Commercial Support for certified C.P.E. activity for pharmacists on chronic obstructive pulmonary disease
FY08	GlaxoSmithKline	\$ 96,250	Commercial Support for certified C.P.E. activity for pharmacists on antimicrobial resistance in hospitals
FY08	Wyeth	\$ 102,560	Commercial Support for certified C.P.E. activity for pharmacists on particulate matter contamination in sterile compounding
FY08	Baxter	\$ 86,365	Commercial Support for certified C.P.E. activity for pharmacists on malnutrition in hospitalized patients
FY08	Amgen	\$ 84,400	Commercial Support for certified C.P.E. activity for pharmacists on Medicare reimbursement
FY08	Baxter	\$ 76,605	Commercial Support for certified C.P.E. activity for pharmacists on medication safety
FY08	Bristol-Myers Squibb	\$ 90,504	Commercial Support for certified C.E. activity for pharmacists for case managers on acute coronary syndromes
FY08	Baxter	\$ 65,000	Commercial Support for certified C.P.E. activity for pharmacists on nutrition support
FY08	Roche	\$ 61,662	Commercial Support for certified C.P.E. activity for pharmacists on anemia in chronic kidney disease
FY08	Bayer	\$ 75,500	Commercial Support for certified C.P.E. activity for pharmacists on safety in the use of contrast media
FY08	Scios	\$ 75,500	Commercial Support for certified C.P.E. activity for pharmacists on acute decompensated heart failure
FY08	Bristol-Myers Squibb/ Sanofi Aventis Partnership	\$ 69,500	Commercial Support for certified C.P.E. activity for pharmacists on acute coronary syndromes
FY08	Berlex	\$ 64,000	Commercial Support for certified C.P.E. activities for pharmacists on safety in the use of contrast media
FY08	Baxter	\$ 57,500	Commercial Support for certified C.P.E. activity for pharmacists on medication safety
FY08	Roche	\$ 89,000	Sponsorship of daily electronic News broadcast from national meeting
FY08	OrthoBiotech	\$ 62,500	Commercial Support for certified C.P.E. activity for pharmacists on anemia in chronic kidney disease
FY08	Adolor	\$ 65,500	Commercial Support for certified C.P.E. activity for pharmacists on postoperative bowel dysfunction
FY08	Bristol-Myers Squibb	\$ 90,080	Commercial Support for certified C.P.E. activity at American College of Clinical Pharmacy national meeting on acute coronary syndromes
FY08	Novo Nordisk	\$ 73,441	Commercial Support for certified C.P.E. activity for pharmacists on transfusion medicine
FY08	Hospira	\$ 39,500	Commercial Support for certified C.P.E. activity for pharmacists on USP <797> requirements in sterile product compounding
FY08	Novo Nordisk	\$ 46,594	Commercial Support for certified C.P.E. activity for pharmacists on diabetes management

Year	Company	Amount	Reason
FY08	Hospira	\$ 54,436	Commercial Support for certified C.P.E. activity for pharmacists on USP <797> requirements in sterile product compounding
FY08	Novo Nordisk	\$ 114,051	Commercial Support for certified C.P.E. activity for managed care pharmacists on diabetes management
FY08	Sepracor	\$ 49,338	Support for advisory meeting
FY08	Allergan	\$ 71,825	Commercial Support for certified C.P.E. activity for pharmacists on neurotoxin therapy+D95
FY08	Novo Nordisk	\$ 40,000	Commercial Support for certified C.P.E. activity for pharmacists on diabetes management
FY08	Novo Nordisk	\$ 44,500	Commercial Support for certified C.P.E. activity for pharmacists on diabetes management
FY08	Amgen	\$ 30,000	Sponsorship of digital meeting guide for national meeting
FY08	Wyeth	\$ 56,980	Support for expert panel meeting on particulate matter in compounded i.v. admixtures
FY08	Baxter	\$ 22,630	Development of article in the <i>American Journal of Health-System Pharmacy</i>
FY08	Baxter	\$ 20,000	Commercial Support for development and publication of discussion guide on USP <797> requirements for sterile compounding
FY08	Amgen	\$ 10,000	Commercial Support for certified C.P.E. activity for pharmacists on Medicare reimbursement
FY08	Takeda	\$ 50,000	Commercial Support for interdisciplinary certified C.E. conference for physicians, pharmacists, and nurses on health care disparities in minority populations
FY08	Amgen	\$ 32,000	Commercial Support for interdisciplinary certified C.E. conference for physicians, pharmacists, and nurses on health care disparities in minority populations
FY08	Bristol-Myers Squibb	\$ 32,000	Commercial Support for interdisciplinary certified C.E. conference for physicians, pharmacists, and nurses on health care disparities in minority populations
FY08	AstraZeneca	\$ 25,000	Commercial Support for interdisciplinary certified C.E. conference for physicians, pharmacists, and nurses on health care disparities in minority populations
FY08	Pfizer	\$ 15,000	Commercial Support for interdisciplinary certified C.E. conference for physicians, pharmacists, and nurses on health care disparities in minority populations
FY08	Lilly	\$ 62,950	Commercial Support for interdisciplinary certified C.E. conference for physicians, pharmacists, and nurses on health care disparities in minority populations
FY08	Merck	\$ 10,000	Commercial Support for interdisciplinary certified C.E. conference for physicians, pharmacists, and nurses on health care disparities in minority populations
FY08	Amgen	\$ 133,684	Commercial Support for Great Expectations, ASHP's certified CPE conference for new practitioners
FY08	Merck	\$ 104,898	Support to conduct and publish ASHP National Survey of Pharmacy Practice in Hospitals
FY08	Amgen	\$ 1,517	Commercial Support for ASHP Residency Preceptors Conference, a certified C.P.E. activity
FY08	Wyeth	\$ 9,167	Sponsorship of ASHP Presidential Award
FY08	Amgen	\$ 9,044	Sponsorship for development and distribution of video on pharmacy residency training
FY08	Astra Zeneca	\$ 54,000	Support for ASHP State Affiliate Presidential Officers' Training Sessions
FY08	Roche	\$ 15,000	Meeting Sponsorship - aisle signs for exhibit hall
FY08	Amgen	\$ 10,000	Meeting Sponsorship - meeting bags for ASHP Summer Meeting

Year	Company	Amount	Reason
FY08	Roche	\$ 20,000	Meeting Sponsorship - Internet access and computer terminals
FY08	Takeda	\$ 15,000	Meeting Sponsorship of Luncheon at ASHP Summer Meeting
FY08	Amgen	\$ 40,000	Meeting Sponsorship - meeting bags for ASHP Midyear Clinical Meeting
FY08	Astra Zeneca/Abraxis	\$ 110,000	Meeting Sponsorship - Internet access and computer terminals
FY08	Amgen	\$ 40,000	Meeting Sponsorship - Hotel key cards
FY08	Baxter	\$ 44,000	Meeting Sponsorship - name badge lanyards for ASHP Midyear Clinical meeting
FY08	Ortho McNeil	\$ 44,000	Meeting Sponsorship - lead retrieval cards
FY08	Teva	\$ 5,000	Meeting Sponsorship - Meeting Planner
FY08	Roche	\$ 27,500	Meeting Sponsorship - Exhibitor map Z-card
FY09	Amgen	\$ 46,667	Commercial Support for ASHP Annual Conference for Leaders in Health-System Pharmacy, a certified CPE activity
FY09	Lilly	\$ 46,667	Commercial Support for ASHP Annual Conference for Leaders in Health-System Pharmacy, a certified CPE activity
FY09	Otsuka	\$ 50,000	Commercial Support for ASHP Annual Conference for Leaders in Health-System Pharmacy, a certified CPE activity
FY09	Roche	\$ 46,667	Commercial Support for ASHP Annual Conference for Leaders in Health-System Pharmacy, a certified CPE activity
FY09	Amgen	\$ 92,383	Commercial Support for ASHP Residency Preceptors Conference, a certified C.P.E. activity
FY09	Amgen	\$ 98,550	Commercial Support for Best Practices in Health-System Pharmacy Practice Awards Program and Poster Session
FY09	Bristol-Myers Squibb	\$ 109,900	Commercial Support for certified C.E. activity for case managers on acute coronary syndromes at Case Management Society of America Annual Meeting
FY09	Amgen	\$ 155,934	Commercial Support for certified c.e. activity for pharmacy residents to facilitate transition into practice
FY09	Merck	\$ 622,722	Commercial Support for certified C.P.E. activities for pharmacists on dyslipidemia, diabetes, and antimicrobial stewardship
FY09	Merck	\$ 97,248	Commercial Support for certified C.P.E. activities for pharmacists on dyslipidemia, diabetes, and antimicrobial stewardship
FY09	Sanofi Aventis	\$ 197,335	Commercial Support for certified C.P.E. activities for pharmacists on management of osteoporosis
FY09	Sanofi Aventis	\$ 1,145,280	Commercial Support for certified C.P.E. activities for pharmacists on thromboembolic disorders
FY09	Sanofi Aventis	\$ 443,550	Commercial Support for certified C.P.E. activities for pharmacists on thromboembolic disorders
FY09	Sanofi Aventis	\$ 130,000	Commercial Support for certified C.P.E. activity at American College of Clinical Pharmacy for pharmacists on acute coronary syndromes
FY09	Bristol-Myers Squibb/ Sanofi Partnership	\$ 108,453	Commercial Support for certified C.P.E. activity for managed care pharmacists on acute coronary syndromes

Year	Company	Amount	Reason
FY09	Sanofi Aventis	\$ 36,300	Support for practice tools and resources to engage pharmacists in quality improvement activities regarding guidelines and patient care performance measures
FY09	Sanofi Aventis	\$ 68,250	Commercial Support for certified C.P.E. activity for pharmacists on venous thromboembolism
FY09	Bristol-Myers Squibb/ Sanofi Partnership	\$ 56,119	Commercial Support for certified C.P.E. activity for pharmacists on acute coronary syndromes
FY09	Sanofi Aventis	\$ 127,100	Commercial Support for certified C.P.E. activity for pharmacists on acute coronary syndromes
FY09	Sanofi Aventis	\$ 38,050	Commercial Support for certified C.P.E. activity for pharmacists on acute coronary syndromes
FY09	OrhtoBiotech	\$ 69,500	Commercial Support for certified C.P.E. activity for pharmacists on anemia management
FY09	OrhtoBiotech	\$ 106,400	Commercial Support for certified C.P.E. activity for pharmacists on anemia management
FY09	Ortho McNeil	\$ 155,280	Commercial Support for certified C.P.E. activity for pharmacists on anticoagulation therapy
FY09	Ortho McNeil	\$ 58,800	Commercial Support for certified C.P.E. activity for pharmacists on anticoagulation therapy
FY09	Sanofi Aventis	\$ 119,350	Commercial Support for certified C.P.E. activity for pharmacists on anticoagulation therapy in elderly patients
FY09	Sepracor	\$ 1,177	Commercial Support for certified C.P.E. activity for pharmacists on chronic obstructive pulmonary disease
FY09	Amgen	\$ 18,000	Commercial Support for certified C.P.E. activity for pharmacists on colorectal cancer
FY09	Amgen	\$ 111,100	Commercial Support for certified C.P.E. activity for pharmacists on colorectal cancer
FY10	Bristol-Myers Squibb	\$ 18,000	Commercial Support for certified C.P.E. activity for pharmacists on colorectal cancer
FY09	Bayer	\$ 40,500	Commercial Support for certified C.P.E. activity for pharmacists on contrast media use
FY09	Bristol-Myers Squibb/Sanofi	\$ 239,688	Commercial Support for certified C.P.E. activity for pharmacists on deep vein thrombosis and acute coronary syndromes
FY09	Novo Nordisk	\$ 195,006	Commercial Support for certified C.P.E. activity for pharmacists on diabetes management
FY09	Novo Nordisk	\$ 72,500	Commercial Support for certified C.P.E. activity for pharmacists on diabetes management
FY09	Allergan	\$ 78,511	Commercial Support for certified C.P.E. activity for pharmacists on emerging uses and safety issues with neurotoxins
FY09	Allergan	\$ 195,400	Commercial Support for certified C.P.E. activity for pharmacists on emerging uses and safety issues with neurotoxins
FY09	Hospira	\$ 44,000	Commercial Support for certified C.P.E. activity for pharmacists on ensuring safety with high-alert medications
FY09	Novo Nordisk	\$ 105,258	Commercial Support for certified C.P.E. activity for pharmacists on management of critical bleeding
FY09	Lilly	\$ 36,000	Commercial Support for certified C.P.E. activity for pharmacists on managing depression
FY09	Hospira	\$ 90,800	Commercial Support for certified C.P.E. activity for pharmacists on medication safety
FY09	Baxter	\$ 97,975	Commercial Support for certified C.P.E. activity for pharmacists on nutrition support in hospitalized patients
FY09	Baxter	\$ 70,000	Commercial Support for certified C.P.E. activity for pharmacists on nutrition support in hospitalized patients

Year	Company	Amount	Reason
FY09	GlaxoSmithKline	\$ 159,067	Commercial Support for certified C.P.E. activity for pharmacists on postoperative bowel dysfunction
FY09	GlaxoSmithKline	\$ 69,220	Commercial Support for certified C.P.E. activity for pharmacists on postoperative bowel dysfunction
FY09	Roche	\$ 102,000	Commercial Support for certified C.P.E. activity for pharmacists on rheumatoid arthritis
FY09	Roche	\$ 75,500	Commercial Support for certified C.P.E. activity for pharmacists on rheumatoid arthritis
FY09	Allergan	\$ 149,933	Commercial Support for certified C.P.E. activity for pharmacists on safety considerations with biosimilar agents
FY09	Bayer	\$ 89,773	Commercial Support for certified C.P.E. activity for pharmacists on safety in use of contrast media
FY09	Amgen	\$ 26,718	Commercial Support for certified C.P.E. activity for pharmacists on supportive care for cancer patients
FY09	Amgen	\$ 26,718	Commercial Support for certified C.P.E. activity for pharmacists on supportive care for cancer patients
FY09	Eisai	\$ 30,298	Commercial Support for certified C.P.E. activity for pharmacists on supportive care for cancer patients
FY09	Eisai	\$ 30,298	Commercial Support for certified C.P.E. activity for pharmacists on supportive care for cancer patients
FY09	Sanofi Aventis	\$ 30,298	Commercial Support for certified C.P.E. activity for pharmacists on supportive care for cancer patients
FY09	Sanofi Aventis	\$ 30,298	Commercial Support for certified C.P.E. activity for pharmacists on supportive care for cancer patients
FY09	Novo Nordisk	\$ 66,117	Commercial Support for certified C.P.E. activity for pharmacists on thromboembolic disorders
FY09	Novo Nordisk	\$ 16,581	Commercial Support for certified C.P.E. activity for pharmacists on transfusion medicine
FY09	Sanofi Aventis	\$ 317,000	Commercial Support for certified C.P.E. activity for pharmacists on tumor lysis syndrome in cancer patients
FY09	Amgen	\$ 136,163	Commercial Support for Great Expectations, ASHP's certified CPE conference for new practitioners
FY09	Sanofi Aventis	\$ 157,250	Commercial Support for initiative (resources, information, training) for pharmacists to enable them to engage in quality improvement activities focused on improving patient care (www.ashp.org/qii)
FY09	Baxter	\$ 60,000	Commercial Support for interdisciplinary conference on improving safety with intravenous medication use in hospitals
FY09	Hospira	\$ 15,000	Commercial Support for interdisciplinary conference on improving safety with intravenous medication use in hospitals
FY09	Amgen	\$ 25,000	Commercial Support for Oncology Certification Preparatory Course (Certified CPE Activity)

Year	Company	Amount	Reason
FY09	Berlex	\$ 119,450	Commercial Support for practice tools and resources for pharmacists on ensuring safety in use of contrast media in hospitals
FY09	Sanofi Aventis	\$ 229,910	Commercial Support for supplement to Journal of Managed Care Pharmacy (certified C.P.E. activity for pharmacists) on deep vein thrombosis and acute coronary syndromes
FY09	Sanofi Aventis	\$ 149,933	Commercial Support for supplement to the American Journal for Health-System Pharmacy (certified C.P.E. activity for pharmacists) on deep vein thrombosis and acute coronary syndromes
FY09	Roche	\$ 55,000	Meeting Sponsorship - aisle signs for exhibit hall ASHP Midyear Clinical Meeting
FY09	Amgen	\$ 15,000	Meeting Sponsorship - aisle signs for exhibit hall ASHP Summer Meeting
FY09	Roche	\$ 30,000	Meeting Sponsorship - Exhibitor map Z-card
FY09	Amgen	\$ 40,000	Meeting Sponsorship - Hotel key cards
FY09	Hospira	\$ 10,000	Meeting Sponsorship - Hotel key cards
FY09	Amgen	\$ 55,000	Meeting Sponsorship - Internet access and computer terminals
FY09	Amgen	\$ 20,000	Meeting Sponsorship - meeting bags for ASHP Summer Meeting
FY09	Amgen	\$ 105,000	Meeting Sponsorship - meeting bags for ASHP Summer Meeting
FY09	Lilly	\$ 46,000	Meeting Sponsorship - Meeting lead cards
FY09	Baxter	\$ 44,000	Meeting Sponsorship - name badge lanyards for ASHP Midyear Clinical meeting
FY09	Sagent	\$ 15,000	Meeting Sponsorship - name badge lanyards for ASHP Summer meeting
FY09	Amgen	\$ 23,737	Meeting Sponsorship - Reception at Midyear Clinical Meeting
FY09	Wyeth	\$ 5,833	Sponsorship of ASHP Presidential Award
FY09	Roche	\$ 93,000	Sponsorship of daily electronic News broadcast from national meeting
FY09	McKesson	\$ 50,000	Support to conduct and publish ASHP National Survey of hospital pharmacy informatics
FY09	Merck	\$ 63,900	Support to conduct and publish ASHP National Survey of Pharmacy Practice in Hospitals

*FY06 data cover the period from January 1, 2006, through May 31, 2006

C.P.E. activity: An educational event or intervention that is certified for continuing pharmacy education credit

C.M.E. activity: An educational event or intervention that is certified for continuing medical education credit for physicians

ASHP Policies for Accepting Industry Funding and Disclosure Requirements for Top Executive and the Board of Directors

- 1. Please describe the policies for accepting industry funding and whether or not ASHP allows companies to place restrictions or provide guidance on how funding will be spent.**

ASHP's policy on acceptance of commercial support and avoidance of conflicts of interest is attached in the supporting exhibits. This policy has been posted on ASHP's website since its approval by the ASHP Board of Directors in 2008. The policy specifies activities for which ASHP solicits and accepts commercial support and those for which commercial support is not accepted. As stated in the policy's guiding principles, any activity for which corporate support is accepted must be under ASHP's complete control. Therefore, ASHP does not allow companies to place restrictions or conditions on or provide guidance on how funding is spent, beyond specifying that the funding will be used by ASHP in accordance with all applicable regulations and guidelines.

ASHP is a major provider of continuing quality education for hospital and health system pharmacists. In order to enhance its educational efforts ASHP accepts corporate support from the pharmaceutical industry and other for-profit corporations based on established principles and guidelines. ASHP has developed constructive relationships with for-profit businesses while maintaining a high standard for independence and integrity. ASHP is an accredited provider by the Accreditation Council for Pharmacy Education (ACPE) and Accreditation Council for Continuing Medical Education (ACCME). Both of these accrediting bodies are external independent organizations, and recognized by the Department of Education. Further, ASHP is in full compliance with all Food and Drug Administration guidelines and regulations for commercial support.

For continuing education supported by external funding, ASHP follows strictly the detailed standards established by ACPE and ACCME, and their standards require that ASHP maintain full control over all educational content, and does not allow companies to impose any restrictions or provide any direction on how funding will be spent or presented. Funding sources are publically displayed (print and electronic) in conjunction with any program, materials or activity which is supported by outside sources. These sources of educational support are also posted on the ASHP web site (www.ashp.org.) At its annual conventions ASHP does make space available for the pharmaceutical

industry and other related companies to conduct promotional activities, but ASHP does not engage in this type of activity on industry's behalf.

It should be noted that ASHP does not accept industry funding for AHFS Drug Information, core educational sessions at the ASHP Midyear Clinical Meeting or the Summer Meeting, or any activity related to governance, strategic planning, policy development (including pharmacy practice standards), or advocacy activities.

Supporting Exhibits:

- a) ASHP Policies on Acceptance of Commercial Support and Avoiding Conflicts of Interest
 - b) ASHP Policies for Continuing Pharmacy Education
 - c) ASHP Policies for ACCME
 - d) ACPE Letter of Accreditation
 - e) ACCME Certificate of Accreditation
- 2. If ASHP allows companies to place restrictions on industry funding, then please explain all restriction and/or guidance for each transfer of value from industry. For every transfer of value with a restriction, please provide the following information: year of transfer, name of company, and restriction placed on funding.**

As stated in the policy's guiding principles, any activity for which corporate support is accepted must be under ASHP's complete control. Therefore, ASHP does not allow companies to place restrictions or conditions on or provide guidance on how funding is spent, beyond specifying that the funding will be used by ASHP in accordance with all applicable regulations and guidelines.

- 3. Please explain what policies, if any that ASHP plans to adopt to ensure transparency of funding in order to provide a greater public trust in the independence of your organization.**

ASHP continually evaluates its existing policies and during its history has revised its policies in order to maintain its reputation as an independent and trusted provider of drug information and as the voice of health-system pharmacists relating to pharmacy

practice and medication use. Changes in guidelines and regulations governing industry funding (e.g., ACCME revised Standards for Commercial Support, Office of the Inspector General Compliance Program Guidance for Pharmaceutical Manufacturers) also prompt ASHP to regularly examine its existing policies and revise them as necessary to ensure continuous compliance. ASHP strongly believes that its current policies and practices ensure transparency of funding and public trust in the independence of our organization. ASHP's policies on acceptance of industry support, conflict of interest and disclosure are posted on the ASHP website.

ASHP policies and practices will continue to evolve based on current and future needs in order to stay true to its purposes and mission as a nonprofit professional and scientific association. For example, ASHP has made changes to its policies based on the new design and informational requirements of the IRS Form 990. Similarly, there is an updated policy on conflict of interest and disclosure for *AHFS: Drug Information* published by ASHP involving oncology off-label use determination process. This policy complies with the Medicare law (42 USC 1395x(t)(2)(B)) and CMS regulations (42 CFR 414.930) for transparency and conflict of interest which were effective 1/1/2010. Further, for many years ASHP maintained a professional guidance document on the pharmacist's relationships with the pharmaceutical industry in ASHP's publication *Best Practices for Hospital and Health System Pharmacy*. This document is undergoing substantial revision based on the recent Institute of Medicine recommendations on conflict of interest as well as other changes in this sector.

Our organization is closely monitoring the requirements under the "Physician Payment Sunshine" provisions which is contained in a current health care reform proposal which would require pharmaceutical and device manufacturers to report payments made to other health care organizations or providers.

Supporting Exhibits:

f) AHFS Drug Information: Conflict of Interest and Disclosure Policy

4. Please explain your policies on disclosure of outside income by your top executives and board members.

Since the 1980s ASHP has required Board members to annually complete a disclosure report form which describes any outside business or professionally related outside income. These disclosures are then reviewed and discussed by the full Board of Directors in order to determine if any activities may bias or influence their roles and

responsibilities as Board director. In certain circumstances as outlined in policy, a Board member may be required to stop completely an activity for the duration of his or her term on the ASHP Board. In other situations, a Board member is not allowed to participate in selected Board discussions and votes on actions before the Board where potential bias or conflict of interest may exist. A record of such instances is maintained by the Executive Vice President of ASHP in Board minutes.

External activities and potential conflicts of interest of any staff person employed by ASHP, including those at our top management levels, are managed by several mechanisms which begin during the employment application process and are further codified in the *ASHP Conditions of Employment* which is signed by every employee. ASHP staff is not permitted to engage in other employment or activities related to ASHP's mission and purpose while employed by ASHP. These requirements are outlined in the *ASHP Personnel Handbook*. For staff that are involved in the development and publishing of *AHFS Drug Information* there is a separate policy on the *Editorial Independence of AHFS Drug Information*. These policies are posted on the ASHP web site.

Further, on an annual basis and as part of the external financial audit of ASHP finances the senior management team completes a written disclosure form. The results of these written disclosures are compiled for the Board of Directors as part of the final audit report supplied by the external auditor.

Supporting Exhibits:

- g) ASHP Policies on Conflict of Interest, Disclosure and External Business/Professional Activities
- h) ASHP Personnel Handbook
- i) ASHP Conditions of Employment
- j) ASHP Policy on Editorial Independence of AHFS Drug Information

5. Please provide the disclosures of outside income filed with your organization by your top executives and board members.

Supporting Exhibits:

- k) Annual Disclosures from Tate and Tryon by ASHP senior management: 2006 -2009
- l) Disclosure Report Forms from the ASHP Board of Directors: 2006 - 2009

Exhibit A

ASHP Policies on Acceptance of Commercial Support and Avoiding COI

ASHP Policy on Accepting Corporate Support and Avoiding Conflicts of Interest

Approved by the ASHP Board of Directors, November 10, 2008

Introduction

This document states ASHP's philosophy and guiding principles with respect to corporate support* from pharmaceutical companies and other for-profit corporations** and for avoiding conflicts of interest in pursuing its work as a nonprofit professional and scientific association. These principles have evolved over many years, during which ASHP developed constructive relationships with for-profit businesses while maintaining a high standard for independence and integrity. Corporate support has permitted ASHP to initiate and enhance programs that help it achieve its purposes and fulfill its mission (Appendix A).

One of ASHP's most valuable assets is its reputation for independence and integrity in expressing the voice of health-system pharmacists on matters relating to pharmacy practice, drug information, and medication use. ASHP is vigilant in ensuring that its relationships with business entities never compromise this asset and that its volunteer leaders and staff do not have conflicts of interest.

* "Corporate support," for purposes of this document, encompasses the full range of relationships between ASHP and for-profit corporations, including the purchase of services (such as advertising and exhibit space), grants for educational programs, and sponsorship of activities.

**This document reflects the perspective of ASHP as a nonprofit professional and scientific association; other considerations apply to the ASHP Research and Education Foundation, a separate charitable, philanthropic organization.

Guiding Principles

1. Any corporate support must help advance ASHP's mission and purpose.
2. Any activity for which corporate support is accepted must be under ASHP's complete control.
3. ASHP does not permit corporate support to compromise its independence and integrity.
4. ASHP is transparent in its acceptance of any corporate support; the identity of the corporate supporter is noted prominently with the activity that is being supported.
5. ASHP does not accept corporate support for AHFS Drug Information, core educational sessions at the Midyear Clinical Meeting or the Summer Meeting, or any activity related to governance, strategic planning, policy development (including practice standards), or advocacy.

6. ASHP acceptance of corporate support does not imply ASHP endorsement of the supporting entity or any of its activities.
7. ASHP follows standard business practices in facilitating corporate access to its members through advertising in its publications and exhibiting at its conferences.
8. ASHP accepts grants to conduct independent educational programs (including the publication of educational supplements in the *American Journal of Health-System Pharmacy*) in compliance with the accreditation standards of the Accreditation Council for Pharmacy Education or the Accreditation Council for Continuing Medical Education.
9. ASHP accepts grants to conduct activities that foster the advancement of health-system pharmacy practice (such as a Web resource center or survey).
10. ASHP accepts sponsorship for social functions and other selected meeting services and activities for conference attendees; ASHP retains complete control over such functions, services, and activities.
11. ASHP requires members of the Board of Directors to disclose annually any potential conflicts of interest, including financial relationships that they have with any entity that supports ASHP activities, provides services to ASHP, is seeking ASHP business, or that may have an interest in influencing ASHP programs or policies. Disclosures by Board members are reviewed by the entire Board, and a Board member will recuse himself or herself from issues or activities for which he or she has a conflict of interest.
12. ASHP requires members of councils and committees that make recommendations to the Board of Directors to disclose annually any potential conflicts of interest, including financial relationships they have with any entity that supports ASHP activities, provides services to ASHP, is seeking ASHP business, or that may have an interest in influencing ASHP programs or policies. ASHP maintains a process for determining, based on committee-member disclosure, if a conflict of interest exists and for ensuring that no committee member is involved in decisions for which he or she has a conflict of interest.
13. ASHP requires all corporate officers and selected professional staff members to disclose annually any potential conflicts of interest, including financial relationships they have with any entity that supports ASHP activities, provides services to ASHP, is seeking ASHP business, or that may have an interest in influencing ASHP programs or policies. ASHP maintains a process for determining, based on staff-member disclosure, if a conflict of interest exists and for ensuring that no staff member is engaged in an ASHP program for which he or she has a conflict of interest.

14. ASHP prohibits any elected official or staff member from accepting substantial gifts or amenities from any entity that supports ASHP activities, provides services to ASHP, is seeking ASHP business, or that may have an interest in influencing ASHP programs or policies.
15. ASHP publishes the ASHP Policy on Accepting Corporate Support and Avoiding Conflicts of Interest on its Web site and invites anyone to bring to the attention of the ASHP Executive Vice President/Chief Executive Officer or the ASHP President any related questions about any ASHP activity.
16. The ASHP Executive Vice President/Chief Executive Officer is responsible for implementing procedures to ensure compliance with the ASHP Policy on Accepting Corporate Support and Avoiding Conflicts of Interest.
17. The ASHP Board of Directors reviews the ASHP Policy on Accepting Corporate Support and Avoiding Conflicts of Interest at least every two years and reaffirms or revises the policy as may be indicated.

Background and Interpretation

Contemporary Legal and Public Affairs Context

For more than a decade there has been growing pressure by federal and state governments as well as the public for greater disclosure, transparency, and accountability by corporations about the sources and uses of their funds. This pressure escalated as inappropriate and unethical conduct as well as criminal behavior has been well documented in for-profit and nonprofit corporations.

Given this environment, there has been close scrutiny of the pharmaceutical and related industries and their spending practices. One specific area that has been investigated is the level of corporate support these companies provide to health professionals and professional associations for a variety of educational activities and other programs, and whether these activities influence health professionals about drug decisions. These same issues have been widely discussed by the Senate Finance Committee, the Office of the Inspector General for Health and Human Services, the Food and Drug Administration, and the Internal Revenue Service. Professional and trade groups such as Pharmaceutical Research and Manufacturers, American Medical Association, Association of American Medical Colleges, and American College of Chest Physicians have issued reports and recommended changes about these practices. ASHP has also developed guidelines for pharmacists on relationships with industry and activities with vendors' representatives. Now, Congress is considering legislation, the *Physician Payment Sunshine Act (S. 2029)*, which would establish a federal reporting program for drug and device companies to disclose gifts to physicians. Several pharmaceutical companies are already posting on their corporate Web sites a list of grant recipients and the dollar amounts.

ASHP receives corporate/commercial support from the pharmaceutical, medical device, and other related industries for its activities and programs in the form of educational grants, sponsorship programs, journal advertising, meeting exhibits, personnel placement, etc. This corporate support enables ASHP to conduct educational programs and other professional activities on a wide range of professional practice issues for its members. At the same time, this corporate support may raise concerns about potential influence or monetary dependence that may occur for ASHP as a result of receiving this type of support. However, ASHP takes appropriate measures to ensure that corporate support does not influence ASHP activities, policies, or decisions.

It is against this backdrop that the adoption of an ASHP policy on acceptance of corporate support for ASHP educational, professional, and business activities is a necessary step in order to protect the integrity and reputation of the organization and of ASHP as the professional society of health-system pharmacists.

Distinctions among Grants, Sponsorship, and Purchase of Association Services*

ASHP receives corporate support from the pharmaceutical and related industries for selected activities and programs. Some of this corporate support is for professional development and educational programs, and some of it consists of the purchase of standard business services that associations like ASHP provide.

Professional Practice and Educational Activities

ASHP solicits and obtains educational grants from commercial interests for selected professional and educational activities. These activities include, but are not limited to, professional development (i.e., practice surveys, awards), journal supplements, continuing education programs, and other ASHP-initiated professional projects and symposia (i.e., specialty educational conferences). In recent years the health care industry has changed its policies and procedures for the distribution and accountability of educational grants. There is now a strict separation between monies used for marketing/promotional activities and funds given for professional/educational programs. This separation is primarily in response to the concerns about corporate influence and bias. These educational grants no longer originate from the promotional/marketing side of the corporation, and all companies that distribute educational grants do so from a separate division of the company. For continuing professional education activities, the use of these grants must comply with the requirements of the Accreditation Council for Pharmacy Education or the Accreditation Council for Continuing Medical Education. For example, the grantor is not permitted to have a role in program development or delivery or in the selection of speakers and may be recognized only through acknowledgement of the grant support. The recipient of the grant must adhere to the proposed budget for the educational activity and provide a detailed reconciliation of expenditures at the conclusion of the educational program to the grantor.

Sponsorship

ASHP receives corporate support as sponsorship of non-educational activities such as bussing expenses during a convention, meeting attendee bags, name-badge lanyards, and selected social events. The sponsoring company pays ASHP a fixed dollar amount in exchange for the sponsoring company's name and logo being acknowledged in conjunction with the activity. The promotion of specific drug names or product lines is prohibited in the context of sponsorship.

Standard Business Activities of Associations

Another area of corporate support involves the purchase of exhibit space at the ASHP Summer Meeting and Midyear Clinical Meeting. The purchase of exhibit space allows the exhibiting company to educate ASHP members about the products and services of the specific company. ASHP has specific published guidelines (Appendix B) for the type of company that may exhibit at its meetings and the information that may be presented. Information presented in exhibits must also comply with FDA regulations. Solicitation of business, order taking, and selling activity are prohibited on the exhibit floor.

Another revenue source for ASHP is commercial advertising in the *American Journal of Health-System Pharmacy (AJHP)*. ASHP has had a statement of advertising policy (Appendix C) since 1972, and it addresses the type of advertising content that will be accepted. While this activity can be viewed as educational for ASHP members, advertising is considered a "commercial" or business activity by the Internal Revenue Service. Likewise, participation in ASHP's career placement service by the pharmaceutical industry is considered a business service.

Trends

Regardless of the type of professional or business support received by ASHP, more public disclosures about these types of corporate support are occurring from the pharmaceutical industry as well as from ASHP as the recipient. There is a pattern emerging among pharmaceutical companies to voluntarily and publicly disclose grants, donations, sponsorships, and other interactions with health professionals. Likewise, tax-exempt organizations such as ASHP are being required to increase disclosures on their IRS Form 990 about their activities and programs, how they are funded, and the source of funding. Starting in 2009, the IRS Form 990 will be publicly available on the IRS web site.

*These categories of support can be further distinguished by their varied tax treatment under the Internal Revenue Service code. Educational grants are exempt from taxation as long as they are directly related to the exempt purpose of the organization. Sponsorship activities are exempt from taxation as long as they comply with IRS criteria for sponsored activity. Advertising and career placement services are taxable revenue. Exhibit income is non taxable if held in conjunction with an annual convention.

Principles in Seeking and Accepting Educational Grants and Sponsorship

Educational Grants

ASHP seeks and accepts educational grants from corporations. In doing so, ASHP strictly adheres to all applicable policies, regulations, and standards, including ASHP policies, the Accreditation Council for Continuing Medical Education (ACCME) Essential Areas and Standards, FDA Guidelines for Industry-Supported Scientific and Educational Activities, the Accreditation Council for Pharmacy Education (ACPE) Accreditation Standards for Continuing Pharmacy Education, and the Pharmaceutical Research and Manufacturers of America (PhRMA) Code on Interactions with Healthcare Professionals. Interactions are guided by the following principles:

1. ASHP maintains written policies governing its acceptance and administration of commercial support for educational activities.
2. All interactions with commercial supporters are transparent.
3. All interactions are conducted in an open and honest manner and within the applicable laws and regulations.
4. ASHP maintains control over all aspects of its educational activities, including content, subject matter, faculty selection, and delivery.
5. ASHP maintains ownership of all rights associated with its educational materials, including copyright.
6. Activities supported through educational grants must benefit ASHP members or the delivery of health care.
7. Activities supported through educational grants must preserve ASHP's independence and integrity.
8. Educational grants are used for scientific and educational purposes only and not for the purpose of promoting a product or service. Funding of a program with an educational grant does not imply endorsement of the grantor or its policies.
9. An educational grant must not include any type of influence by the grantor over ASHP.
10. Multiple commercial supporters for a specific project will be sought whenever feasible.
11. ASHP does not accept commercial support for AHFS Drug Information, core educational sessions at the Midyear Clinical Meeting or the Summer Meeting, or any activity related to governance, strategic planning, policy development (including practice standards), or advocacy.
12. ASHP discloses to faculty and participants any external funding received for an educational activity or product.
13. ASHP requires a signed letter of agreement for all educational grants stipulating the independence of the educational activity, ASHP's control over all aspects of the educational content, and the commercial supporter's agreement to comply with all applicable standards and regulations.
14. ASHP maintains an internal separation or "firewall" to ensure that staff members involved in developing educational content do not engage in discussions regarding a company's marketing or promotional strategies.

Sponsorship

ASHP seeks and accepts commercial sponsorship for selected activities. In doing so, ASHP strictly adheres to all applicable policies, regulations, and standards, including ASHP policies, the Pharmaceutical Research and Manufacturers of America (PhRMA) Code on Interactions with Healthcare Professionals, and governmental regulations. Commercial support from industry makes possible added member services. Interactions with sponsors are guided by the following principles:

1. ASHP maintains written policies governing its acceptance and administration of commercial sponsorship.
2. All interactions with industry sponsors are transparent.
3. All interactions are conducted in an open and honest manner and within the applicable laws and regulations.
4. ASHP maintains control over content, copyright, and the use of the ASHP logo related to any sponsored activity.
5. ASHP maintains ownership of all rights associated with the sponsored activity.
6. Sponsorship of an ASHP activity does not imply ASHP endorsement of the sponsor or its products or policies.
7. The sponsor must not exert any type of influence over ASHP.
8. The sponsorship must maintain ASHP's independence and integrity.
9. Multiple sponsors for a specific activity will be sought whenever feasible.
10. ASHP does not accept sponsorship for AHFS Drug Information, core educational sessions at the Midyear Clinical Meeting or the Summer Meeting, or any activity related to governance, strategic planning, policy development (including practice standards), or advocacy.
11. ASHP discloses any external sponsorship of its activities.
12. ASHP requires a signed letter of agreement with sponsors stipulating ASHP control over all aspects of the activity, including content, publicity, venue, and the sponsor's promise to comply with all applicable standards and regulations.
13. ASHP maintains an internal separation or "firewall" to ensure that staff members involved in developing the sponsored activity do not engage in discussions regarding a company's marketing or promotional strategies.

Multiple-Company Support of Educational Activities

The traditional model for commercial support of educational activities involves a single commercial supporter providing grant support for a single educational activity. While this model continues to be appropriate, support from multiple sources for a single educational activity ("multi-supported" education) is sometimes a preferred model.

A number of benefits to multi-supported education have been suggested, including a reduction of cost to the individual commercial supporter, allowing broader funding of educational projects; added assurance of independence of the educational activity; elevated perception of the quality and integrity of the educational activity among

participants and faculty; and preference among commercial supporters associated with a potential reduction in their legal risk.

ASHP considers the appropriateness and feasibility of seeking support from more than one source, particularly when the project for which support is being sought will include discussion of health care treatments, products, or services used by patients; when more than one potential source of funding can be identified; and when there is potential for participants to perceive bias or commercial influence.

Avoidance of Conflicts of Interest (COI) by the ASHP Board of Directors

For many years the ASHP Board of Directors has maintained a formal board policy on conflict of interest, disclosure and external business/professional activities by members of the Board as a component of their fiduciary duties (Duty of Care and Loyalty). This policy has been updated on several occasions. One aspect of the Duty of Loyalty which is relevant to a discussion concerning external corporate support at ASHP involves disclosure of outside activities by Board members. As part of the Duty of Loyalty a Board member has a continuing and annual obligation to provide written disclosure to ASHP of outside interests, because these outside activities may give rise to serious concerns or perceptions that the outside activity will:

- “1) bias or influence the individual’s decision making regarding a program, policy or activity under consideration by ASHP, or
- 2) create an unfair competitive advantage for any individual person or outside organization ...”

[ASHP Policies on Conflict of Interest, Disclosure, and External Business/Professional Activities, 2007]

It is not unusual for a pharmacist elected to the ASHP Board to have other concurrent professional and business interests. Many of these other interests involve the pharmaceutical/medical device industry or other related corporations. Some of these other professional interests may involve potential or perceived conflicts of interest. ASHP and the Board are proactive in managing these potential conflicts of interests. In certain instances, a Board member may stop completely an activity for the duration of his or her term on the ASHP Board. In other situations, a Board member may decide not to participate in discussions and votes on actions before the Board where a potential COI or bias exists.

Consistent with current trends for more transparency and accountability by corporations and their Board of Directors, the protective measures taken by the Board have become more specific. For example,

1. Members of the Board avoid acceptance of honoraria or other remunerations from related industries, and when offered, an honorarium is directed to the ASHP Foundation.

2. Members of the Board avoid direct participation in ASHP or external business or educational programs in order to avoid concerns or perceptions that these outside activities are competing with or influencing ASHP products, services, or other membership activities.
3. Members of the Board avoid the receipt of remuneration, gifts, gratuities, or other favors from entities or organizations outside of ASHP that could influence (or be perceived to influence) an individual Board member's judgment or decision making at ASHP.
4. Members of the Board postpone professional consulting arrangements and participation on advisory panels with related industries while a member of the ASHP Board unless they are unrelated to ASHP activities, programs, or professional policies.

The Board policy on COI and external business activities has evolved over many years, and it is expected that it will continue to be revised on a regular basis as the legal, ethical, and professional environment dictates.

Avoidance of Conflicts of Interest (COI) by ASHP Committee Members

ASHP, for many years, had COI policies and procedures for members of executive committees of sections and forums and for the Council on Therapeutics. These policies and procedures have now been expanded to cover all ASHP councils and committees that make recommendations to the Board of Directors.

Avoidance of Conflicts of Interest (COI) by ASHP Staff

Disclosure of potential COI by ASHP staff, for many years occurred through separate mechanisms beginning with the employment application process, provisions in the Conditions of Employment (which is signed by every employee when they are hired), the ASHP Personnel Handbook, and the internal ASHP Policies and Procedures. These documents describe behaviors that are expected of ASHP staff. In addition, there is a Board approved policy on the Editorial Independence of AHFS Drug Information (Appendix D), which outlines principles of conduct for the AHFS staff. On a yearly basis, the auditor of ASHP financial records requires a separate disclosure of external activities and interests by the corporate group, the Controller, and Assistant Controller. ASHP has now implemented additional policies and procedures to ensure that no staff member is engaged in an ASHP program for which he or she has a conflict of interest.

Accrediting bodies for continuing education (Accreditation Council for Pharmacy Education and the Accreditation Council for Continuing Medical Education), governmental agencies (Food and Drug Administration, Office of Inspector General), industry voluntary standards (such as by the Pharmaceutical Research and Manufacturers of America), and others have policies, regulations, and guidelines that must be followed to be in conformance with the ASHP Policy on Accepting Corporate Support and Avoiding Conflicts of Interest.

ASHP Purposes

Excerpted from the ASHP Charter.

The purposes for which ASHP is formed are as follows:

1. To advance public health by promoting the professional interests of pharmacists practicing in hospitals and other organized health care settings through:
 - a. Fostering pharmaceutical services aimed at drug-use control and rational drug therapy.
 - b. Developing professional standards for pharmaceutical services.
 - c. Fostering an adequate supply of well-trained, competent pharmacists and associated personnel.
 - d. Developing and conducting programs for maintaining and improving the competence of pharmacists and associated personnel.
 - e. Disseminating information about pharmaceutical services and rational drug use.
 - f. Improving communication among pharmacists, other members of the health care industry, and the public.
 - g. Promoting research in the health and pharmaceutical sciences and in pharmaceutical services.
 - h. Promoting the economic welfare of pharmacists and associated personnel.
2. To foster rational drug use in society such as through advocating appropriate public policies toward that end.
3. To pursue any other lawful activity that may be authorized by ASHP's Board of Directors.

ASHP Mission

Approved by the ASHP House of Delegates, June 4, 2001.

ASHP believes that the **mission of pharmacists** is to help people make the best use of medications.

The **mission of ASHP** is to advance and support the professional practice of pharmacists in hospitals and health systems and serve as their collective voice on issues related to medication use and public health.

ASHP Policies Governing Exhibits: Eligibility, Content, Staffing, Booth, Sales and Other Activities

Excerpted from the ASHP Rules and Regulations Governing Exhibits, 2008 Midyear Clinical Meeting, Orlando, Florida, December 2008. A complete copy of this document is available upon request or on the ASHP Web site.

Eligibility for Exhibiting

The following qualifications are required of all exhibitors at the 2008 ASHP Midyear Clinical Meeting to be held at the Orange County Convention Center:

1. Products or services displayed must further the educational purpose of the Midyear Clinical Meeting and Exhibit Program to provide an atmosphere conducive to exchanging information and views about pharmacy practice and health care in a professional manner.
2. Products or services must be related to the practice of pharmacy in hospitals and health systems or other related facilities.
3. Exhibitors will not be allowed to conduct other types of business appointments, meetings or social activities either in the Orange County Convention Center or in ASHP designated hotels unless the exhibiting company and exhibitor are registered to exhibit at the meeting. Pharmacists attending these activities must be registered for the meeting as well.

No Sales Policy

Because of the educational nature of the exhibit program, solicitation of business, all order taking, selling activity, conferences in the interest of business and similar activity on the exhibit floor is expressly prohibited and will be strictly and actively enforced.

Activity within the Exhibit

Any activity within the exhibits, including, without limitation, distribution (free of charge or otherwise) of any literature, product, or any other item must conform to the educational and professional nature and character of the meeting. ASHP reserves the right to prohibit and require immediate cessation of any activity or distribution that, in ASHP's sole discretion, is determined not to conform to the educational nature of the exhibits. ASHP will provide advance approval of activities and items upon request of an exhibitor. The Society's decision to prohibit and require cessation of any activity will be at the sole and exclusive discretion of ASHP and will be final.

Contests, lotteries, raffles, or games of chance are strictly prohibited unless approved by ASHP. The rights and benefits hereunder are personal to exhibitors and may not be assigned without the express written consent of ASHP. All exhibits must conform strictly to the Rules and Regulations. ASHP reserves the right to restrict any exhibit that might be considered undesirable. This restriction includes, but is not limited to, specific items, conduct, dress of personnel, printed matter, or anything objectionable to the exhibit or exhibit program as a whole.

Staffing of Exhibits

Exhibit booths must be staffed during all exhibit hours by qualified personnel of the exhibiting company who must be able to explain or demonstrate the products or services on display. Exhibitor assumes all responsibility for its exhibit personnel, employees, contractors, servants, agents, and for all persons admitted to the exhibit area using its Exhibitor's badge. All exhibitors are responsible for informing their own personnel and authorized representatives of these rules and regulations.

Use of ASHP Logo

Exhibitors will not use the ASHP logo, the name of ASHP, or in any manner associate any exhibit or any activity during the Midyear Clinical Meeting with ASHP without the express written and personal consent of its exhibit manager.

Other Rules and Regulations

Exhibitors will not discriminate against any person on account of race, creed, color, sex, religion, national origin, or physical or mental disability.

ASHP Policy on Acceptance of Advertising

Am J Health-Syst Pharm. 2007; 64:996.

Approved by the ASHP of Directors, November 20, 1991. Supersedes the document entitled "Statement of Advertising Policy of the American Society of Hospital Pharmacists," which was approved March 2, 1972. The policy is republished periodically for the information of AJHP readers.

The American Society of Hospital Pharmacists seeks to promote and elevate the professional practice of pharmacy and to improve pharmaceutical care to patients served by hospitals and health-care systems. In pursuit of these objectives, ASHP strives to increase the dissemination of pharmaceutical and related knowledge by providing for the interchange of information through its publications.

Recognizing that advertising is an important medium of information, ASHP, in keeping with its objectives, strives to ensure the accuracy, comprehensiveness, timeliness, and relevancy of the advertisements it accepts in its publications.

The following general principles are criteria that will be followed in the acceptance of advertising. ASHP reserves the right to modify these principles in the light of developments in the profession, the industry, or government regulations. The editor, with advice and assistance from the Committee on Publications when he or she deems necessary, makes the final decisions regarding the eligibility of all products and services to be advertised in ASHP publications.

Acceptance of advertisements by ASHP does not constitute endorsement, nor does it warrant in any way the safety, effectiveness, or quality of the products or services advertised.

The American Society of Hospital Pharmacists reserves the right to refuse advertising from any source or to reject any proposed advertisement.

Guiding Principles for Acceptance of Advertising

1. Advertising will be accepted, subject to editorial approval, for drug products as well as for pharmaceutical and other equipment, books, and other items or services used in hospitals and health-care systems.
2. Advertisers, by submitting advertising copy for publications, certify that it is in accord with applicable government regulations (for example, regulations covering new-drug applications and prescription drug advertising).
3. Advertisements that tend to limit the effectiveness of ASHP programs, or that promote concepts or practices that are contrary to an official policy of ASHP, will not be accepted.
4. Alcoholic beverages and tobacco products are not eligible for advertising.
5. Advertisements will not be accepted if they
 - a. Violate the principles of pharmaceutical ethics;
 - b. Are, in the opinion of ASHP, inappropriate, indecent, offensive, or reflect poor taste in text or illustration;
 - c. Contain attacks of a personal, racial, or religious character, or are libelous or otherwise contrary to law; or
 - d. Contain claims found by any court or federal or state agency to be invalid or in violation of law.
6. Sweeping superlatives, extravagantly worded copy, unfair comparisons, or the blatant and

- unwarranted disparagement of a competitor's product or service will not be allowed.
7. Advertisements that suggest a profit or personal benefit accruing to the pharmacist by the sale or recommendation of a product will not be permitted.
 8. Advertisements that offer free goods or premiums of any kind, and that clearly state that the availability of such premiums is contingent upon the purchase of products, will not be accepted.
 9. Advertisements should not be deceptive or misleading. Layout, artwork, and format should be such as to avoid confusion with editorial content.
 - a. ASHP reserves the right to place the word advertisement over advertising matter that simulates editorial content and is not clearly identified as advertising.
 10. The advertiser may be required to submit data in support of the usefulness or safety of its product or service and the validity of its claim.
 11. ASHP reserves the right to conduct an onsite review of a prospective advertiser's facilities.
 - a. No reference to such a review of facilities shall be permitted in advertisements, catalogues, promotional brochures, or other printed material.

ASHP Policy on Editorial Independence of AHFS Drug Information

Approved by the ASHP Board of Directors 2004.

The mission of *AHFS Drug Information (AHFS DI)* is to provide an evidence-based foundation for safe and effective drug therapy. Information included in *AHFS DI* shapes treatment decisions made by clinicians and influences public and private health care policy and decisions. As a result, it is important that the information be authoritative, objective, and free of undue influence from pharmaceutical manufacturers, health insurers, pharmacy benefits managers, and other third parties who may seek to use the compendium to promote their own vested interests. Editorial decisions are evidence-based and made independent of such third parties; final decisions are made solely by the AHFS editorial staff, taking into account the advice of expert reviewers. Widely trusted for its established record in refuting unfounded efficacy claims, its rigorous science-based editorial process, and its independence from the influence of pharmaceutical manufacturers, *AHFS DI* has remained true to its mission for almost 50 years.

AHFS DI is the only remaining official drug compendium published by a non-commercial entity (i.e., by a tax-exempt ["nonprofit"] professional association). The American Society of Health-System Pharmacists (ASHP) is an IRS 501(c)(6) tax exempt entity. ASHP is the national professional association that represents pharmacists who practice in inpatient, outpatient, home-care, and long-term-care settings. ASHP has a long history of fostering evidence-based medication use as well as patient medication safety—efforts designed to help pharmacists improve their delivery of pharmaceutical care.

AHFS DI is published by ASHP under the authority of its elected Board of Directors. As such, the Board exercises oversight through its ongoing Society considerations as well as through its Committee on Publications. This oversight by the Board also involves review and approval of relevant recommendations originating from its appointed Commission on Therapeutics and the advisory and best practices developments of its Councils, House of Delegates, and other policy-recommending bodies.

In addition, hundreds of experts, principally physicians but also other clinicians, leading medical scientists, pharmacists, pharmacologists, and other professionally qualified individuals, participate in an ongoing extramural review process for *AHFS DI*. Participation is solicited but voluntary, and no honorarium nor other benefit (e.g., complimentary subscription) is provided. These experts must provide full disclosure of interest, including any affiliation with or financial involvement in the manufacturer of the drug(s) under consideration and directly competitive products.

ASHP considers it essential that interactions between AHFS and pharmaceutical manufacturers be limited to the legitimate exchange of the scientific and medical information needed to fulfill the mission of *AHFS DI*. To maintain independence from the undue influence of the promotional interests of pharmaceutical manufacturers, communications are directed to the scientific and medical information areas within the companies; contact with marketing areas is avoided.

ASHP holds in high regard the responsibilities attendant to the public and private trust placed in the evidence-based editorial deliberations of AHFS. As such, ASHP also considers it essential to protect the integrity and independence of the editorial decisions of AHFS staff by separating the Society's business activities with pharmaceutical manufacturers (e.g., exhibits at educational meetings, journal advertising) from the editorial activities of its drug compendium. AHFS staff

apply the following principles of editorial independence in weighing the propriety of their conduct:

1. AHFS staff should avoid participating in business discussions with pharmaceutical manufacturers and other ASHP staff should avoid engaging AHFS staff in such discussions.
2. AHFS staff must disclose any potential financial conflicts of interest or other external activities that may affect their editorial decisions on specific drugs. AHFS staff should not hold financial interests that conflict or may influence the conscientious performance of their editorial duty.
3. AHFS staff may not solicit or accept any gift or other item of monetary value from any individual or entity seeking official action or influence from the compendium nor from those whose interests may be substantially affected by the performance or nonperformance of the staff's editorial duties.
4. AHFS staff have an obligation to act impartially and not give preferential treatment to any interested individual or organization that might influence their editorial decisions.
5. AHFS staff should avoid actions that might create the appearance that they are violating these principles of ethical conduct and editorial independence. Any such behavior shall be judged from the perspective of a reasonable individual in a similar situation with knowledge of the relevant facts. When necessary, the expert advice of other staff (e.g., professional practice, corporate counsel) should be sought.
6. On occasion, ASHP may determine that the Society's interest in the staff's participation in a particular activity or discussion outweighs any concern that a reasonable individual might question the integrity of the activity.
7. AHFS staff members with questions about their activities that are not addressed by these principles on editorial independence shall refer their questions to the Vice President of Publishing and Editor of AHFS.

Q:\evp\BOARD OF DIRECTORS\Accepting Corporate Support and Avoiding Conflicts of Interest\Policy.doc

Exhibit B

ASHP Policies for Continuing Pharmacy Education



ASHP CONTINUING PHARMACY EDUCATION POLICY AND PROCEDURE MANUAL



ASHP is accredited by the Accreditation Council for Pharmacy Education as a provider of Continuing Pharmacy Education (CPE)

Douglas Scheckelhoff, CPE Administrator
Louise Maitland
Naomi Schultheis
Leticia Salam
Susan Cantrell

Updated: August 18, 2009



ASHP CONTINUING PHARMACY EDUCATION POLICY AND PROCEDURE MANUAL



ASHP is accredited by the Accreditation Council for Pharmacy Education as a provider of Continuing Pharmacy Education (CPE)

Douglas Scheckelhoff, CPE Administrator
Louise Maitland
Naomi Schultheis
Leticia Salam
Susan Cantrell

Updated: August 18, 2009

ASHP Policy & Procedures for Continuing Pharmacy Education (CPE) Activities Manual

Finalized: August 18, 2009

Table of Contents

SECTION 1 – MISSION AND ADMINISTRATION.....	3
1.01 Goal and Mission of ASHP’s CPE Program	3
1.02 Continuing Pharmacy Education (CPE) Administrator.....	4
• Administrative Change	5
1.03 Cosponsorship	6
1.04 CPE Activity Announcements	7
• Multi-day Conference Announcements	8
• “Save-the-Date” Cards	9
1.05 Continuing Education (CE) Credit.....	9
• Credit Hours Calculations (Live, Home Study, Partial)	9
SECTION II – OPERATIONS & MANAGEMENT	11
2.01 Recordkeeping	11
2.02 Statements of Credit.....	12
2.03 Financial Resources	13
2.04 Provider Web Tool.....	14
• Activity Description Forms (ADF)	14
• Universal Activity (Program) Numbers (UANs)	14
• Annual Activity Update	16
2.05 Provider Fees	16
2.06 Organization Name Change or Merger	16
SECTION III – CONTENT DEVELOPMENT	17
3.01 Educational Needs Assessment.....	17
3.02 Continuing Pharmacy Education Activities	19
3.03 CPE Activity Objectives	21
3.04 Standards for Commercial Support (SCS)	23
• 3.04-1 Independence in Planning and Delivery of CPE Activities.....	23
• 3.04-2 Educational Content and Format without Commercial Bias	24
• 3.04-3 Letter of Agreement for Commercial Support	25
• 3.04-4 Faculty Disclosure for Continuing Education Activities.....	28
• 3.04-5 Resolution of Personal Conflicts of Interest	31
• 3.04-6 Disclosure of Commercial Support	33
• 3.04-7 Disclosure of Relevant Financial Relationships to Participants ..	34
• 3.04-8 Appropriate Use of Commercial Support	35
• 3.04-9 Speaker Honoraria.....	37
• 3.04-10 Reimbursement of Out-of-Pocket Expenses.....	39
• 3.04-11 Expenditures for Learners.....	41
• 3.04-12 Policy on Social Events	42
• 3.04-13 Management of Associated Commercial Promotion.....	43
• 3.04-14 Policy on the Role of Commercial Interest Representatives	45
• 3.04-15 Distribution of CPE Activities by a Commercial Interest.....	47
• 3.04-16 Policy on Advertising.....	48

**ASHP Policy & Procedures for Continuing Pharmacy Education
(CPE) Activities Manual**

Finalized: August 18, 2009

SECTION IV – DELIVERY OF CPE ACTIVITIES	50
4.01 Faculty for CPE Activities	50
4.02 Teaching and Learning Methods.....	52
4.03 Educational Materials.....	53
SECTION V – ASSESSMENT	54
5.01 Assessment of Learning	54
5.01 Assessment Feedback.....	55
SECTION VI – PROGRAM EVALUATION	56
6.01 Evaluation of CPE Activity.....	56
6.02 Achievement and Impact of Mission and Goals	58
• Evaluation of Program Effectiveness	60

SECTION 1 – MISSION AND ADMINISTRATION

1.01 Goal and Mission of ASHP's CPE Program

Goal: The goal of ASHP's CPE program is to provide exemplary continuing education that meets the professional development needs of pharmacists, pharmacy technicians, and related healthcare professionals. ASHP's educational programs improve competencies of the target audiences to enable them to optimize the safety, effectiveness, and leadership of medication use.

Mission: To provide education for pharmacists, pharmacy technicians and related healthcare professionals that is contemporary and based on the best available evidence and reflects best practices.

ASHP Policy & Procedures for Continuing Pharmacy Education (CPE) Activities Manual

Finalized: August 18, 2009

1.02 Continuing Pharmacy Education (CPE) Administrator

Policy

The Continuing Pharmacy Education (CPE) Administrator is charged with the administration of ASHP continuing pharmacy education program. The CPE administrator has the authority, responsibility, and accountability for assuring and demonstrating compliance with ACPE Standards. The CPE administrator must coordinate with appropriate ASHP staff to manage the planning, implementation, and administration of CPE activities with the goal of achieving the overall mission of ASHP's CPE Program.

Procedure:

- The CPE administrator must hold a full time position with the American Society of Health-System Pharmacists (ASHP) and is qualified by virtue of his or her background, education, training, and experience.
- The CPE administrator must have experience in the development and delivery of continuing professional education programs.
- The CPE administrator shall have a working knowledge of continuing education program planning and development, and an understanding of the basic principles of adult learning.
- The CPE administrator shall identify and collaborate with key partners and stakeholders in accomplishing ASHP's CPE mission and goals.
- The CPE administrator will provide leadership for the CPE program that emphasizes continuous improvement, professionalism, and appropriate ethical practice.
- The CPE administrator shall continually assess individual and organizational performance and make improvements as needed.
- The CPE administrator will use appropriate data to assess both the educational and administrative performance of ASHP's CPE program.

ASHP Policy & Procedures for Continuing Pharmacy Education (CPE) Activities Manual

Finalized: August 18, 2009

Continuing Pharmacy Education Administrator's Continuing Professional Development

Policy:

The CPE Administrator and other ASHP staff involved in CPE activity planning and administration shall maintain and seek to improve their knowledge, skills, and experience in CPE planning, administration, and compliance. ASHP will support this continuing professional development by allowing time to reflect, assess needs, and participate in professional development activities.

Procedure:

The CPE Administrator shall seek out educational training, programs, seminars, and literature that would enhance their:

- 1) Planning and development of continuing education programs
- 2) Knowledge in the area of contemporary pharmacy practice and current trends and issues in pharmacy education.
- 3) Comprehension of evidence-based adult and organizational learning principles to improve performance and outcomes of the learner and the organization in which they work.

Administrative Change

Policy:

In the event of a change in the CPE administrator, there shall be a smooth and orderly transition of administrative responsibilities from the outgoing Continuing Pharmacy Education Administrator to the new administrator. The new CPE Administrator shall become familiar with all areas of policy and operations for ASHP's CPE Program.

Procedure:

- Formal notification of any change shall be forwarded to the ACPE headquarters as soon as any change is imminent.
- ASHP Educational Services Division staff will use the online Provider Verification Form via the ACPE Web Tool to update the new CPE Administrator and contact information for ASHP.
- The new CPE Administrator shall become familiar with the ACPE Standards, including the Standards for Commercial Support, and all ACPE policies and procedures.
- The new CPE Administrator shall become familiar with ASHP's Continuing Pharmacy Education Policies and Procedures.

ASHP Policy & Procedures for Continuing Pharmacy Education (CPE) Activities Manual

Finalized: August 18, 2009

1.03 Cosponsorship

At its discretion, ASHP may collaborate on CPE content development and delivery with accredited or non-accredited organizations under a cosponsorship arrangement. When doing so, ASHP assumes responsibility for ensuring these CPE activities are in full compliance with the *Accreditation Standards for Continuing Pharmacy Education*.

Policy:

ASHP cosponsorship is not a mechanism for approval of CPE activities. Rather, ASHP collaborates with the cosponsor on all aspects of the development of the CPE activity, including planning, development, promotion, delivery, evaluation, and revision. A cosponsorship agreement, documenting the working relationship between the parties and the role of the accredited provider in ensuring compliance with the ACPE standards, must be signed by all parties. ASHP does not permit a commercial interest to serve as an activity cosponsor.

Procedure:

Upon receipt of an inquiry regarding ASHP working with another organization on a CPE activity, ASHP provides written correspondence to the requestor, requesting information about the proposed activity.

- The CPE Administrator reviews the information provided on the proposed activity to determine if it meets the criteria for a CPE activity and if sufficient documentation of educational need exists.
- The CPE Administrator also ensures that the organization requesting cosponsorship is not a commercial interest as defined by ACPE.
- If ASHP agrees to cosponsor, a letter of agreement that details specific responsibilities, due dates, and checklists is submitted to the appropriate parties for signature. The signed letter of agreement is kept in the activity file.
- ASHP works collaboratively with the cosponsoring organization throughout the planning process to ensure compliance with ACPE Standards and ASHP's policies and procedures for CPE activities.
- An appropriate individual within the cosponsoring organization shall be identified and designated as the liaison to ASHP. The CPE Administrator or other designated ASHP staff will work closely with the liaison to assure the cosponsoring organization is adhering to the agreed upon tasks and deadlines.
- When ASHP cosponsors a CPE activity with another ACPE-accredited provider, the responsibility for assurance of compliance with ACPE Standards is shared by both accredited providers. Early in the planning process, ASHP and the cosponsoring provider will decide on and document the respective responsibilities of each provider. Each accredited provider will have full access to all activity-related information.

ASHP Policy & Procedures for Continuing Pharmacy Education (CPE) Activities Manual

Finalized: August 18, 2009

1.04 CPE Activity Announcements

Policy:

ASHP uses a variety of methods to advertise and promote the availability of its CPE activities to prospective learners, including direct mail, display advertising, emails, and the ASHP website. Activity promotional materials are intended to provide adequate and advance information to the prospective learners to enable them to be well-informed regarding ASHP CPE activities.

Procedure:

CPE activity promotional materials may include brochures, advertisements, memoranda, letters of invitation, emails, or other announcements that offer the opportunity to participate, purchase, or register for ASHP CPE activities. The following items must be included:

- Learning objectives
- Type of activity (knowledge-, application-, or practice-based)
- Target audience(s)
- Faculty members, name, degree, and title/position
- Fees for the activity
- Schedule of educational activities
- Amount of CPE credits specified in contact hours or CEUs
- Official ACPE logo and accreditation statement identifying ASHP as the accredited provider according to the exact language as follows:



The American Society of Health-System Pharmacists is accredited by the Accreditation Council for Pharmacy Education as a provider of continuing pharmacy education.

- ACPE Universal Activity (Program) Number assigned to the activity
- Appropriate target audience designation (“P” or “T”)
- Full description of all requirements established by ASHP for successful completion of the CPE activity and subsequent awarding of credit (e.g., passing a test or post-test at a specified proficiency level, completing an activity evaluation form, participation all sessions or certain combination of sessions which have been designed as a program package)
- Acknowledgement of any organization(s) providing financial support for any component of the educational activity
- For home study activities, the initial release and expiration dates

In addition to the above, Internet-based CPE activities should specify the following:

- Hardware requirements: minimum hardware requirements, including minimum memory, storage, processor speed, and multimedia component required

ASHP Policy & Procedures for Continuing Pharmacy Education (CPE) Activities Manual

Finalized: August 18, 2009

- Software requirements: minimum software requirements, including, appropriate internet browser(s) and minimum versions along with any browser “plug-ins” that may be required.
- Internet: internet connectivity and minimum connection speed the learner must have
- ASHP contact information, in the event there are questions about the internet CPE activity.
- ASHP Policy on Privacy and Confidentiality: ASHP must have, adhere to, and inform learners about its policy on privacy and confidentiality that relates to CPE activities provided on the internet.

Multi-day Conference Announcements

ASHP offers several multi-day CPE activities, including the Summer Meeting and Midyear Clinical Meeting. Complete conference information is posted on the ASHP website. Activity announcements may also be mailed or emailed to prospective learners.

Procedures

Activity announcements for multi-day conferences must include the following:

- Learning objectives of the overall conference
- Target audience(s)
- Fees
- Schedule of educational activities
- Amount of CPE credits specified in contact hours or CEUs
- Official ACPE logo and accreditation statement identifying ASHP as the accredited provider sponsoring according to the exact language as follows:



The American Society of Health-System Pharmacists is accredited by the Accreditation Council for Pharmacy Education as a provider of continuing pharmacy education.

- ACPE Universal Activity (Program) Number assigned to the activities
- Appropriate target audience designation (“P” or “T”)
- Full description of all requirements established by ASHP for successful completion of the CPE activity within the conference and subsequent awarding of credit (e.g., passing a post-test at a specified proficiency level, completing an activity evaluation form, participating in all sessions or certain combination of sessions which have been designed as a program package)
- Acknowledgement of any organization(s) providing financial support for any component of the educational activity

ASHP Policy & Procedures for Continuing Pharmacy Education (CPE) Activities Manual

Finalized: August 18, 2009

“Save-the-Date” Cards

Activity promotional materials such as a “teasers”, save-the-date cards, advertisements, and postcards intended to alert learners of a date of an activity, are not required to contain all elements required for activity announcements. However, ASHP may use the ACPE logo and accreditation statement as indicated above.

It is not permitted to list any language alluding to or indicating that ACPE credit has been applied for; however, these promotional materials may include the following statement:

“This activity is eligible for ACPE credit; see final CPE activity announcement for specific details.”

1.05 Continuing Education (CE) Credit

Credit Hours Calculations (Live, Home Study, Partial)

Policy:

In advance of the delivery of a CPE activity, ASHP determines the number of contact hours or CEUs to be awarded for participation and successful completion of the activity in compliance with the requirements set forth for each type of CPE activity.

Live CPE activities

ASHP organizes, awards, and reports all live CPE activities on the basis of real time (i.e., 60 minutes = one (1) contact hour or 0.1 CEU). The actual presentation time of the faculty member along with any required laboratory experiences are included in the contact time for a CPE activity. Time is dedicated to the activity learning evaluation and included in the official contact hour determination.

Procedure:

- In the program planning stages, faculty members are given preliminary time guidelines for the presentation of activity content
- Each presenter submits a preliminary content outline and time estimate to the staff member coordinating the CPE activity
- The proposal is reviewed prior to formalizing the program schedule and determining the educational credit value for the entire activity.
- All promotional materials, session materials, records, and CE statements clearly identify the actual contact hour value for live educational activity.

ASHP Policy & Procedures for Continuing Pharmacy Education (CPE) Activities Manual

Finalized: August 18, 2009

Home study CPE activities

ASHP organizes, awards, and reports all self-study CPE activities on the basis of the amount of time required for successful completion of the activity. The actual time required to complete a self-study educational activity and the subsequent credit value awarded is determined by a field-testing process.

Procedure:

- A draft of the activity is distributed to a sample of potential participants within the target audience (usually less than 10) to seek feedback regarding the accuracy and relevance of content, ease and length of time for completion of the activity and post-test, and level of difficulty.
- After feedback is secured, the staff member coordinating the activity, reviews the actual times for completion of the activity and assigns a reasonable contact hour value to the educational activity. This contact hour value is incorporated in all subsequent activity advertising and related materials.

Partial credit

ASHP assigns individual Universal Activity (Program) Numbers to each activity (e.g., each session in a day-long or multi-day conference) to

- accurately reflect different CPE activities;
- ensure accuracy of topic designator selection; and
- simplify the process for issuing statement of credit to participants

If and when ASHP uses one Universal Activity (Program) Number for a multi-hour activity, the policy and requirements for awarding partial credit are clearly stated in advance of the activity (e.g., on activity announcements).

SECTION II – OPERATIONS & MANAGEMENT

2.01 Recordkeeping

Policy:

ASHP maintains appropriate records as required by ACPE for all CPE activities for a period of six years. Records of credit statements issued are stored in ASHP's Association Management Software (AMS) database. CPE activity files are stored electronically on ASHP's servers. Learners' transcript records and statements of credit are accessible via the online ASHP Learning Center for a period of six years following the completion of the activity.

Procedure:

- Live CPE activities are set up in ASHP's AMS meeting module to facilitate online registration.
- All CPE activities are set up in ASHP's AMS transcript module to allow for processing credit and printing CE statements.
- CPE participants follow stated requirements to obtain statements of credit via the online ASHP Learning Center.
- ASHP's AMS and online Learning Center allow staff to generate reports for all CPE activities.
- ASHP's IT Department maintains appropriate backup records of all CPE records according to the organization's disaster preparedness procedures.
- CPE activity files are stored in the active file system for a period of two years, after which they are stored electronically in ASHP archives for a period of six years. The stored materials are retrievable immediately if needed. Backup data is stored on tapes off-site.

CPE Activity Files (paper records)

Each CPE file must include the following information

- Documentation of planning process, including emails/conversation notes discussing activity content and needs assessment data.
- Copies of faculty confirmation/agreements and disclosures, including documentation of resolution of conflict of interest (if any identified).
- Recording agreements, signed agreements for commercial support or joint sponsorship agreements (if applicable).
- At least two copies of printed activity materials (e.g. announcements, brochures, handout materials, syllabi and any other content related materials).
- Activity evaluation summary
- Verification of disclosure made to learners prior to the start of the activity
- When commercial support is accepted for an activity, a copy of the signed letter of agreement for commercial support is included in the activity file and a record of

ASHP Policy & Procedures for Continuing Pharmacy Education (CPE) Activities Manual

Finalized: August 18, 2009

all income and expenditures associated with the activity must be maintained for a period of six years. This information is maintained by ASHP's Financial Management Division and is readily retrieved by ASHP staff upon request.

2.02 Statements of Credit

Policy:

ASHP creates and provides official verification of participation and credit for each participant in every CPE activity in a timely manner. Completed and signed Statements of Continuing Pharmacy Education credit are distributed following the completion of the activity, based on the requirements and within the time frame stated in the activity promotional materials. CE Statements are printed based on the user defined demographics (e.g. pharmacy and/or pharmacy technicians.)

Procedures

ASHP statements of credit include the following informational items:

- Name of learner
- Title and date(s) of activity
- Type of activity (knowledge, application, practice)
- Appropriate target audience designation ("P" or "T")
 - Separate statements of credit are issued to pharmacists and pharmacy technicians when the activity is targeted to both pharmacists and technicians
 - Non-pharmacists or pharmacy technician participants who attend the activity can get a statement of credit with a "P" designation.
- ASHP's information as the accredited provider sponsoring or cosponsoring the activity
- Official ACPE logo
- Amount of credit awarded
- Assigned ACPE Universal Activity (Program) Number
- Date the CPE administrator signed the original statement of credit (electronically generated)

Procedure for large meetings (e.g., Midyear Clinical and/or Summer)

- Registrant requests credit by completing an online CE Request form. (in some instances a paper request form is also provided).
- The online request form and the paper form identifies each session, with its corresponding credit value and ACPE Universal Activity (Program) Number.
- Participants must enter the unique CE Session Code, which is only announced during the educational session. Each session has a different CE session code. Session codes are not printed in the meeting materials. If the incorrect CE Session Code is entered online, the system will not complete the submission and therefore the participant would not be able to print their CE statement.

ASHP Policy & Procedures for Continuing Pharmacy Education (CPE) Activities Manual

Finalized: August 18, 2009

- When processing CE for the meeting, participants can exit and save their submission to complete at a later date.
- Participants who request a paper CE request form must write in the CE session code for each session for which they are requesting credit. Participants submit the completed form before they leave the meeting. ASHP brings the completed forms back to the office after the meeting and processes the CE statements but only after validating the participant registration for the meeting and verifying the CE Session Code. An official ASHP Statement of CE Credit is sent to the participant within 4-6 weeks after the meeting.

Procedures for workshops, seminars, and conferences:

- Registration for the event is validated before CE is processed online or using the paper form.
- For cosponsored programs, ASHP requires the attendance roster, program evaluation, and completed CE request forms in order to process CE credit.
- Forms are validated onsite by the program administrator and returned to ASHP Educational Services to process and mail CE statements.
- The information is entered into the ASHP Association Management Software System to award CPE credit and issue an official ASHP CE statement.
- CE Statements are sent within 4-6 weeks after the meeting.

Procedure for Home Study programs

- CE requests are processed online via ASHP Learning Center. Participants must exceed the passing grade, usually 70% (may vary depending on the content) and complete the online evaluation before CE credit is awarded.
- Participants who fail the CE test can retake the test once.
- Participants can print their CE statement immediately.

2.03 Financial Resources

With a total annual budget of over \$40 million, ASHP has sufficient financial resources to support and expand its CPE program. In addition, ASHP has a substantial infrastructure that supports its CPE program.

Procedure:

- Financial resources to support ASHP's CPE Program are allocated through the annual budget preparation process.
- The budgeting process takes into account all requirements of sustaining the CPE Program, including recordkeeping, infrastructure, activity planning and delivery, staff training and development, and meeting planning.
- ASHP's fiscal year begins June 1 and ends May 31 of the following year. An annual audit of ASHP's financial records is conducted. Results are reported to the Committee on Finance and Audit and the ASHP Board of Directors.

ASHP Policy & Procedures for Continuing Pharmacy Education (CPE) Activities Manual

Finalized: August 18, 2009

2.04 Provider Web Tool

Policy

ASHP uses the ACPE Provider Web Tool to submit and update Activity Description Forms, update contact information using the Provider Verification Form, and submit activity information using the Annual Activity update Form

Procedures:

Change in Administrator

If there is a change in the CPE administrator, ASHP Educational Services Staff will update the Provider Verification Form with the name, address, and contact information for the new CPE Administrator prior to the change taking place or as soon as the change happens.

Activity Description Forms (ADF)

ASHP submits Activity Description Forms via the online Provider Web Tool at least 30 days prior to the initial release date of each CPE activity. Items relevant to the activity include:

- Release year
- Sequence number
- Learner designation (Pharmacists = P or Pharmacy Technicians = T)
- Title of activity
- Learning objectives
- Topic designator
 - 01 disease state management/drug therapy
 - 02 AIDS therapy
 - 03 Law (relating to pharmacy practice)
 - 04 General pharmacy practice
 - 05 Patient safety
- Contact hours or CEUs
- Release and expiration dates
- Cosponsorship information
- Live dates/location for live activities
- Format
- Home study format (web, monographs, print, journal, etc.)
- Receipt of grant support

Universal Activity (Program) Numbers (UANs)

ACPE is making the transition to Universal Activity Number (UAN from Universal Program Number (UPN).

Policy

ASHP assigns a unique Universal Activity (Program) Number (UAN) for each CPE activity based on the ASHP provider ID (204), the cosponsor designation

ASHP Policy & Procedures for Continuing Pharmacy Education (CPE) Activities Manual

Finalized: August 18, 2009

number (000 for no cosponsor or 999 for all cosponsors), the year of the CPE activity development (e.g. 09), the sequential number of the CPE activity from among the new CPE activities developed during that year (e.g. 001), and the topic and format designators.

Procedure

ASHP assigns a unique UAN to its CPE activities. The UAN is made up of a series of six groups of numbers and letters, consisting of the accredited provider's identification number, cosponsor designator, a 2-digit code for the year of the activity, the activity format designator, topic designator, and target audience designator. A description follows.

ASHP's Provider Identification Number: **204**

Cosponsor Designators:

000 - no cosponsoring organization

999 - cosponsoring with another organization

Unique 3-digit code, assigned by ASHP

Format Designators:

L - Live activities

H - Home study and other enduring activities

C - Activities that contain both live and home study and enduring components

Topic Designators - activities are related to:

01 - Disease State Management/Drug therapy

02 - AIDS therapy

03 - Law (related to pharmacy practice)

04 - General Pharmacy

05 - Patient Safety

Target audience designator

P - Pharmacist

T - Pharmacy Technician

Note: If the CPE activity is intended for both pharmacists and pharmacy technicians, the activity will have the same UAN followed by the appropriate target audience designator, either a "P" or "T."

Example: an ASHP-sponsored live activity (with no cosponsor) conducted in 2009 for both pharmacists and technicians on the topic of medication safety would have the following UPNs:

204-000-09-001-L05-P (program number to be used for pharmacists)

204-000-09-001-L05-T (program number to be used for pharmacy technicians)

ASHP Policy & Procedures for Continuing Pharmacy Education (CPE) Activities Manual

Finalized: August 18, 2009

Annual Activity Update

Policy

The CPE Administrator is responsible for submitting ASHP's Annual Activity Update (AAU) online using the ACPE online Web tool. This report includes the number of activities conducted, the number of CEUs offered, and the number of individuals who received ACPE statement of Credit. [CEUs Awarded x Number of Learners who Received a CE Statement of Credit = Educational Service Units (ESUs)].

Procedures:

- The appropriate ESD staff member generates reports from ASHP's Association Management System (AMS) for all CE successfully completed within the required timeframe.
- The appropriate ESD staff member enters the data into the ACPE Web Tool
- Click the button to submit the final report to ACPE before the stated deadline

2.05 Provider Fees

Policy

ASHP is responsible for payment of provider accreditation fees based on the posted schedule of fees on the ACPE's website. This provider's annual fee is assessed on the basis of the number of activities ASHP offered, the number of CEUS allocated to each activity, and the number of learners.

2.06 Organization Name Change or Merger

Policy

If ASHP undergoes a name change or merger, ASHP must submit to ACPE legal documentation of that change in the form of articles of incorporation or another type of legal document. ACPE will update its record accordingly.

SECTION III – CONTENT DEVELOPMENT

3.01 Educational Needs Assessment

Policy

Topics for ASHP's CPE activities are selected based on identified needs of pharmacists and pharmacy technicians. To ensure accuracy and completeness of information on which to base selection of topics for CPE activities, ASHP uses a variety of methods and sources when collecting and analyzing educational needs assessment data. Needs assessment data is completed before planning a specific CPE activity to guide content development and delivery. ASHP ensures that needs assessment data are carefully analyzed and considered when planning CPE activities.

Procedure

- ASHP staff gathers educational needs assessment data from a variety of sources, including:
 - Current literature and news
 - Recent policies, accreditation, regulations, practice standards
 - Prospective audiences for the CPE activities
 - Experts in the field
 - Member sub-groups, governing bodies, policy recommendation groups that are representative of the general composition of the ASHP membership with regard to age, sex, area of practice, type of institution, and geographic distribution.

- Needs assessment data are gathered by ASHP using several methods, including:
 - Staff review of literature
 - Monitoring trends in the field, general news and release of new or revised policies, regulations and practice standards
 - Formal and informal surveys of members of the target audience and experts
 - Activity evaluation feedback regarding needs for future CPE programming
 - Audits of professional practice (e.g., input from Accreditation Services Division staff from site surveys)
 - Meetings of ASHP committees, councils, and other official groups
 - Review of discussion on member discussion boards

- Educational needs and gaps are assessed and prioritized by staff based on the information gathered as described above.

- Educational objectives are:
 - Designed to be appropriate for the target audience for the CPE activity.
 - Drafted by ASHP staff to close the identified gaps. Objectives may be

ASHP Policy & Procedures for Continuing Pharmacy Education (CPE) Activities Manual

Finalized: August 18, 2009

- revised in consultation with activity faculty.
- Alternatively, submitted objectives are reviewed and revised as needed by ASHP staff in collaboration with appropriate experts.

In reference to:

ACPE Standard 2: Educational Needs Assessment

The provider must develop CPE activities based on a multifaceted process where educational needs are prospectively identified.

3.02 Continuing Pharmacy Education Activities

Policy

ASHP structures each CPE activity to meet the educational needs of pharmacists and/or pharmacy technicians based on evidence as accepted in the literature by health care professions. Activities are identified as knowledge-based, application-based, or practice-based. Topics must be relevant to the contemporary practice of pharmacy and content is designed to be balanced and presented using the best evidence available.

Procedures

CPE activity types are determined by ASHP Staff responsible for planning, developing and/or coordination of CPE activities (Educational Services Division staff, Educational Program Directors, ASHP Advantage staff or other selected ASHP staff who are trained based on ESD stated guidance.) The following guidelines are used to determine the CPE activity types:

Knowledge-based CPE activities (K)

- Purpose and structure of the activity is to transmit knowledge based on the evidence as accepted in the literature of health care professions.
- Purpose is to impart factual information to the learner
- Focus of learning assessment is recall of facts based on the content
- Minimum credit is 0.25 contact hour

Application-based CPE activities (A)

- Purpose and structure is to apply information and skills learned in the timeframe allotted.
- Objectives involve the teaching and practice of skills based on evidence as accepted in the literature by the health care profession.
- Focus of the learning activities and assessment is application via case studies, or other activities requiring application of principles
- Design evaluation to include participation, satisfaction, learning, and performance—as demonstrated during the activity
- Minimum credit is 60 minutes or 1.0 contact hour

Practice-based CPE activities (P)

- Purpose and structure is to instill knowledge, develop skills, and enhance practice competencies through systematic achievement of specific knowledge, skills, attitudes, and performance behaviors.
- Content must be based on evidence as accepted in the literature by health care profession.
- Objectives require participants to plan, design, measure, prepare, or develop projects to be completed in the participant's practice site
- Format should include didactic and practice experience components.

ASHP Policy & Procedures for Continuing Pharmacy Education (CPE) Activities Manual

Finalized: August 18, 2009

- Instructional design should be sequenced, and supportive of achievement of stated professional competencies.
- Focus of the learning assessment is formative and summative assessments with application in practice.
- Design evaluation to include participation, satisfaction, learning, and performance as demonstrated during the activity and applied in practice.
 - Include post-activity evaluation to gather data on the impact of the effectiveness of the activity on pharmacy practice
- Minimum credit is 15 contact hours

Evidence-based Content for all CPE

ASHP CPE activities are designed using the best available evidence whenever possible. In cases where definitive evidence does not exist, other reputable sources of information may be used. In these cases, the source of the information is identified so that the audience can make a judgment regarding the weight to give the information. For example, expert opinion may be used. In this case, the qualifications of the expert giving the opinion are identified. Another example is use of case examples. In this instance, information about the circumstances in which the case took place and its limitations are made available to the participants.

CPE activity content is developed and/or reviewed by ASHP staff and other experts as deemed appropriate. We retain a rigorous process to ensure that our CPE activity content is evidence-based whenever possible as well as applicable to the contemporary practice of pharmacy.

CPE activities focus on a variety of topics, such as the appropriate use of pharmacotherapeutic agents, disease state management, medication safety, methods or reducing medication errors and adverse drug events, use of technology to improve medication safety, and other related content areas based on practice gaps identified by ASHP.

ASHP ensures that CPE activities are applicable to the contemporary practice of pharmacy by constantly monitoring changes in the health care environment, specifically as they relate to the practice of pharmacy. The ASHP Educational Programming Committee is a staff committee comprised of pharmacists who work closely with members in target areas (e.g., inpatient care, ambulatory care, health policy). This staff committee serves as the review and selection panel for all proposed educational sessions at the ASHP Midyear Clinical Meeting.

In reference to:

ACPE Standard 3 Continuing Pharmacy Education (CPE) Activities

The provider must structure each CPE activity to meet the knowledge-, application and/or practice-based educational needs of pharmacists and technicians.

3.03 CPE Activity Objectives

Policy

Learning objectives are developed for each CPE activity based on identified educational needs of the audience to which the activity is targeted. The learning objectives serve as a basis for selection of content, teaching and learning methods, and evaluation of the effectiveness of the CPE activity.

Procedure:

- CPE learning objectives are developed based on an assessment of the educational needs of the target audience.
- CPE objectives are planned and designed to meet specific practice gaps of the target audience.
- Depending on the scope of the CPE activity, learning objectives are developed by ASHP staff in collaboration with faculty, content matter experts working with the planning teams (i.e. staff committees, program planning teams).
 - Goals and learning objectives are reviewed and modified by ASHP staff responsible for developing and/or coordination of CPE activities to ensure they are
 - appropriate for the activity-type selected (knowledge, practice or application based)
 - specific and measurable to meet the defined intent of the activity
 - designed to specifically address the identified educational need
 - addressed by an active learning strategy
 - covered by the learning assessment (correlate between objectives and learning assessment),
- Faculty for both live and home study CPE activities can develop their own learning objectives and submit these to ASHP for review as specified by the CPE planning form.
- ASHP provides guidance on how to develop learning objectives for faculty as well as potential faculty for CPE activities in several formats, such as
 - Requests for proposals (RFP) for educational program form
 - Meeting Planning Associates (MPA) handbook
 - Faculty/speaker handbook
 - Online Self Study Activity *“Developing Educational Objectives: How to Develop and Deliver Quality CPE Programs”* designed to assist faculty to design, deliver CPE activities and how to avoid the most common errors when writing educational objectives. (Available at www.ashp.org)
 - AJHP article *“Writing Cognitive Educational Objectives and Multiple-Choice Test Questions”*
 - Live workshops conducted at the ASHP Midyear Clinical Meeting

ASHP Policy & Procedures for Continuing Pharmacy Education (CPE) Activities Manual

Finalized: August 18, 2009

- Learning assessment questions are developed based on the stated objectives of the CPE activity to meet the identifiable needs assessment.
- The CPE evaluation includes questions intended to determine whether learners met the stated learning objectives and why learning objectives may not have been met. Results of activity evaluations are shared with faculty after the CPE activity to serve as guidance for improving their future presentations.

ASHP educates CPE faculty on ACPE's requirement to develop learning objectives and provides training on how to meet the requirement. Training may be provided via live in-person sessions, webinars, and online self-study materials.

In reference to:

ACPE Standard 4: CPE Activity Objectives

The provider must develop objectives for each CPE activity that define what the pharmacists and technicians should be able to do at the completion of each CPE activity.

3.04 Standards for Commercial Support (SCS)

3.04-1 Independence in Planning and Delivery of CPE Activities

Policy

In order to ensure that ASHP CPE activities are objective, balanced, and free from commercial bias, ASHP maintains responsibility for and control over all aspects associated with content development and faculty selection. All CPE activities are designed, planned, and developed by ASHP staff, working collaboratively with planners and faculty/authors selected by ASHP. All decisions regarding the content and faculty selection for the CPE activity are made independently without the influence or control of commercial interests.*

Procedure:

- ASHP maintains responsibility for and control over all aspects associated with educational planning, preparation of educational materials, and marketing of CE activities, including:
 - Identification of CPE needs;
 - Determination of educational objectives;
 - Selection and presentation of content;
 - Selection of all persons and organizations that will be in a position to control the content of the CPE;
 - Selection of educational methods;
 - Evaluation of the activity;

ASHP requires that commercial supporters for its CPE activities sign a letter of agreement documenting the terms, conditions, and purposes of the commercial support. This letter of agreement further stipulates the independence of the CPE activity, ASHP's control over all aspects of the educational content, and the commercial supporter's agreement to comply with the ACCME Standards for Commercial Support and the ACPE Guidelines for Standards for Commercial Support.

In accordance with ACCME and ACPE standards, ASHP does not request or accept advice or services concerning teachers, authors, participants, or other education matters, including content, from a commercial interest.

- ASHP does not permit commercial interests to assume the role of a non-accredited partner in a co-sponsorship relationship.

* A commercial interest, defined as any entity producing, marketing, re-selling, or distributing health care goods or services consumed by or used on patients, cannot take the role of non-accredited provider in a co-sponsorship relationship. **Exemptions include non-profit or government organizations and non-health care related companies.**

ASHP Policy & Procedures for Continuing Pharmacy Education (CPE) Activities Manual

Finalized: August 18, 2009

3.04-2 Educational Content and Format without Commercial Bias

Policy

ASHP maintains responsibility for and control over all aspects associated with content development and faculty selection for its CPE activities. ASHP CPE activities are based on identified educational needs.

The development of a CPE activity is based on a needs assessment process in **Section 3.01** Content Development and the availability of published scientific evidence. Valid studies must be available through published literature to support materials presented during the activity.

Procedure:

- All CPE activities are designed, planned, and developed by ASHP staff, working collaboratively with planners and faculty/authors selected by ASHP.
- At the time that faculty are confirmed to participate in a CPE activity, they are instructed that content must be evidence-based, when available. In cases where definitive evidence does not exist, other reputable sources of information may be used. In these cases, the source of the information is identified so that the audience can make a judgment regarding the weight to give the information. Faculty members are also instructed that content they present should be objective and free from commercial bias. In addition, it must promote improvements or quality in healthcare and not a specific proprietary business interest of a commercial interest. This instruction is included in the Faculty Confirmation Letter and in the Speaker Handbook.
- Faculty members are instructed to give a balanced view of therapeutic options and are instructed to use generic names throughout their presentations. The use of trade names in CPE content is only appropriate when listing complete information regarding multiple products (e.g., a chart listing product information such as trade name, generic name, dosing information) or when referencing FDA-approved manufacturers' labeling. In cases where a new treatment modality will be discussed for a disease in which there is no existing pharmacological treatment, activity content must present a balanced perspective by discussing existing therapies or interventions used to manage the disease (e.g., surgical procedures, lifestyle modifications).
- Presentation materials submitted by activity faculty are reviewed by staff and the MPA or course director to ensure that they meet the presentation objectives, are objective and free from commercial bias, and present a balanced view of therapeutic alternatives. For publications, manuscripts submitted by authors undergo the same review process. If the materials are deemed to be commercially biased or if there is evidence of a lack of balance, the staff member or MPA will address this with the faculty member and make appropriate modifications to the content prior to the activity.

ASHP Policy & Procedures for Continuing Pharmacy Education (CPE) Activities Manual

Finalized: August 18, 2009

- Non-clinical CPE activities must address best practices and may not promote a product.

3.04-3 Letter of Agreement for Commercial Support

Policy

ASHP requires that commercial supporters for its CPE activities sign a letter of agreement stipulating the independence of the CPE activity, ASHP's control over all aspects of the educational content, and the commercial supporter's agreement to comply with the ACCME Standards for Commercial Support and the ACPE Guidelines for Standards for Commercial Support

Procedure:

- ASHP, the commercial supporter, and any other provider or educational partner involved in planning or implementing the activity will sign a Letter of Agreement outlining the terms, conditions, purposes, and dollar amount of the grant.
- The originating source of the funds shall be considered the commercial supporter for purposes of signing the agreement and acknowledgment.
- The Letter of Agreement for Commercial Support must contain the following elements:
 - Name of commercial supporter and co-sponsor (if applicable)
 - Dollar amount of grant
 - Description of CPE activity
 - Control of content, quality, and integrity of all educational activities by ASHP
 - Disclosure requirements
 - Commercial supporter's agreement to abide by ASHP policies
 - Agreement by all parties to abide by ACCME Standards for Commercial Support and the ACPE Guidelines for Standards for Commercial Support
 - Stipulation that no additional funds may be provided by the commercial supporter
- Electronic/digital signature of the letter of agreement is acceptable.
- The signed Letter of Agreement must be kept in the activity file for a period of six years.

ASHP Policy & Procedures for Continuing Pharmacy Education (CPE) Activities Manual

Finalized: August 18, 2009

Appendix 3.04-A

SAMPLE

Agreement for Commercial Support



1. Statement of Purpose:

_____ (***Name of Commercial Supporter***) agrees to provide an educational grant in the amount of \$_____ to support the creation of a certified CPE activity further outlined in this document and agrees not to provide any additional funds to the director of the activity, faculty or others involved with the activity beyond the amounts stipulated in the activity budget. The parties to this agreement declare their intent to abide by the Accreditation Council for Continuing Medical Education's Standards for Commercial Support and the Accreditation Council for Pharmacy Education's Guidelines for Standards for Commercial Support

By accepting this grant the American Society of Health-System Pharmacists (ASHP) and ***<name of joint sponsor, if applicable>*** agree to acknowledge the educational support from ***<name of the commercial supporter>*** in activity announcements such as brochures, syllabi, and other education materials, and, if requested, to provide a full financial report of income and expenses related to this activity within sixty days after the conclusion of this activity.

As the accredited provider, ASHP will retain responsibility for the administration, content, quality, and integrity of all educational activities.

2. Control of Content and Selection of Presenters and Moderators

<Name of commercial supporter> agrees that ASHP will control the planning and implementation of the CPE activity, including all of the following:

- a. Identification of CPE needs
- b. Determination of educational objectives
- c. Selection and presentation of content
- d. Selection of all persons and organizations that will be in a position to control the content of the CPE
- e. Selection of education methods
- f. Evaluation of the activity.

3. Disclosure of Financial Relationships

ASHP agrees to ensure that everyone who is in a position to control the content of the activity (all planning committee members, teachers, or authors of a CPE activity) will disclose all relevant financial relations with any commercial interest within the past 12 months. Any

**ASHP Policy & Procedures for Continuing Pharmacy Education
(CPE) Activities Manual**

Finalized: August 18, 2009

individual who refuses to disclose relevant financial relationships will be disqualified from being involved in this CPE activity.

4. Promotional Activities

<Name of commercial supporter> agrees not to conduct any promotional or sales activities, including, but not limited to, presentations by sales representatives or exhibits, in the same room as the educational activity. **<Commercial supporter>** also agrees to comply with ASHP's "Policy on the Role of Commercial Interest Representatives" and "Policy on Advertising" (both attached).

5. Content

ASHP and **<name of commercial support>** agree to comply with ASHP's "Policy on Educational Content and Format without Commercial Bias.

6. Objectivity and Balance

ASHP will ensure that the data will be objectively selected and presented, that both favorable and unfavorable information about any products will be fairly represented, and that there will be balanced discussion of the prevailing body of scientific product information and alternative treatment options.

7. CPE Activity Description

ASHP, as the recipient of the educational grant, agrees to develop the following:

<activity type>
<topic of activity>
<tentative date(s) of activity>

8. Signatures

For ASHP

Print Name and Title:

For **<commercial supporter>**

Print Name and Title:

ASHP Policy & Procedures for Continuing Pharmacy Education (CPE) Activities Manual

Finalized: August 18, 2009

3.04-4 Faculty Disclosure for Continuing Education Activities

Policy

In an ongoing effort to ensure that CPE activities are scientifically based, objective, and free from commercial bias, ASHP requires full disclosure by all faculty, planning committee members, and others in a position to control content of the CPE activity (e.g., scientific staff, writers, editors) of all relevant financial relationships with commercial interests for all CPE activities. The intent of this policy is to

- (1) assist ASHP staff and planning committee members in making informed judgments about potential faculty members and their participation in an educational activity
- (2) to inform participants/learners about the existence of relevant financial relationships so that they may form their own judgments about the presentation or educational activity, and (3) to allow ASHP to identify and resolve all conflicts of interest before presentation of an activity.

ASHP requires that all prospective program faculty, planning committee members, and others in a position to control content for continuing education activities disclose all relevant financial relationships with the activity's commercial supporter or with other commercial entities whose products will be discussed during the program. ASHP staff must review the completed disclosures and assess whether or not an actual conflict of interest exists. Prospective faculty members who refuse or fail to disclose their information in a timely manner will be disqualified from participation in the CPE activity.

Program participants/learners will be informed, in advance of their participation in the activity, of all relevant financial relationships. In cases where faculty members report no relevant financial relationships, program participants/learners will be informed that no relevant financial relationships exist. All original disclosure information will be retained on file for six years.

A "relevant financial relationship" between a faculty member or planning committee member and a commercial interest exists if the faculty or committee member or his or her spouse or partner is a shareholder in the organization, serves as a speaker or consultant to the organization, or receives research support from the organization. Speakers must disclose all such relationships that have existed within the twelve months preceding the faculty members' participation in the program.

Procedure

- ASHP will obtain disclosure information from all prospective faculty members, planning committee members, and others involved in the development of content for educational activities such as meeting programming associates (MPAs), speakers, roundtable leaders, educational planning committee members, authors, and presenters of contributed papers. Prospective faculty or planning committee members who refuse or fail to disclose information in a timely manner may be disqualified from participation in the CPE activity.

ASHP Policy & Procedures for Continuing Pharmacy Education (CPE) Activities Manual

Finalized: August 18, 2009

- ASHP staff must review the disclosure information and assess whether or not a conflict of interest exists. A conflict of interest exists when the individual has both a financial relationship with a commercial interest and the opportunity to affect the content of CPE about the products or services of that commercial interest. In such cases, steps outlined in the ASHP Policy on Resolution of Personal Conflicts of Interests will be used to resolve conflicts of interest.
- Affiliations disclosed by those in a position to control the content will be made available to meeting participants prior to the beginning of the activity. Possible methods of disclosure include printing in the meeting program, on an opening slide, or given orally at the beginning of a presentation. For poster presentations, disclosure information for all authors will be displayed on the poster.
- If additional relationships are disclosed by faculty after printed materials are completed, this additional information must be disclosed to participants/learners orally prior to the faculty member's presentation. Documentation of this oral disclosure may include:
 - Site Managers' form
 - Session evaluation form
 - Staff Monitor Form
 - Moderator scripts, etc.
- All original disclosures will be retained on in the activity file for six years.

ASHP Policy & Procedures for Continuing Pharmacy Education (CPE) Activities Manual

Finalized: August 18, 2009

SAMPLE

ASHP Disclosure Form



In accordance with the Accreditation Council for Continuing Medical Education's Standards for Commercial Support and the Accreditation Council for Pharmacy Education's Guidelines for Standards for Commercial Support, all planners, teachers, and authors involved in the development of educational content are required to disclose to the accredited provider their *relevant financial relationships*. An individual has a relevant financial relationship if the individual or his or her spouse/partner has a financial relationship in any amount occurring in the last 12 months with a commercial interest whose products or services are discussed in the educational activity content over which the individual has control. Relevant financial relationships will be disclosed to the activity audience.

Refusal or failure to provide disclosure information in a timely manner will result in the disqualification from participation in the activity.

Title of Activity: _____

Name of Planner/Teacher/Author: _____

1. Does the educational content over which you have control contain information about healthcare products or services? **Circle one:**
 Yes **No**

If Yes, please move to Question 2. If No, please sign and return this form.

2. Regarding the health care products or services that will be discussed in the educational content over which you have control, have you or your spouse/partner had a financial relationship in any amount in the last 12 months with the manufacturers of the products or providers of the services? **Circle one:**
 Yes **No**

If Yes, please complete the chart below. If No, please sign and return this form.

Manufacturer or Service Provider	Nature of Relationship (e.g., employee, consultant, research grant recipient, speakers bureau, stockholder, etc.)	Does this relationship still exist? Circle
		YES NO

Signature: _____ **Date:** _____

Please sign and return this form to ASHP. This information will be retained on file with the Educational Services Division for six years and will be printed in meeting program.

ASHP Policy & Procedures for Continuing Pharmacy Education (CPE) Activities Manual

Finalized: August 18, 2009

3.04-5 Resolution of Personal Conflicts of Interest

Policy

ASHP will identify all conflicts of interest for individuals in a position to control the content of an educational activity and resolve those conflicts prior to the activity being delivered to learners. A conflict of interest exists when the individual has both a financial relationship with a commercial interest and the opportunity to affect the content of CPE about the products or services of that commercial interest.

Procedure

The following steps are used to resolve conflicts of interest:

- Staff will review and analyze the submitted disclosure information to determine if a conflict of interest exists.
- If the individual submitted the information indicate the educational content over which they have control DOES NOT contains information about healthcare products or services, then no apparent conflict exists and the individual may participate in the CPE activity with no restrictions. The absence of relevant relationships for this individual will be disclosed to learners.
- If the individual submitting the information indicate the educational content DOES contains information about healthcare products or services, AND if they or their spouse DOES NOT had a financial relationship in any amount in the last 12 months with the manufacturers of the products or provider of the services then no apparent conflict exists and the individual may participate in the CPE activity with no restrictions. The absence of relevant relationships for this individual will be disclosed to learners.
- If the individual submitting the information indicate the educational content DOES contains information about healthcare products or services. AND if they or their spouse DOES have a financial relationship in any amount in the last 12 months with the manufacturers of the products or providers of services, then the individual must outline the relevant financial relationships that exist. Staff must then review and analyze the information to determine if an irresolvable conflict of interest exists.
 - ASHP considers an irresolvable conflict of interest to exist if a prospective faculty member who would be presenting current treatment recommendations is an employee of a commercial interest whose products will be discussed during the presentation. In this situation, the faculty member should be disqualified from participation in the activity.

**ASHP Policy & Procedures for Continuing Pharmacy Education
(CPE) Activities Manual**

Finalized: August 18, 2009

- If a conflict of interest exists but is not deemed to be irresolvable, the following steps must be taken to resolve the conflict of interest:
 - The role of the faculty member or planner may be altered so as to remove the opportunity for bias to be introduced. For example, the role of the prospective faculty member may be limited to the portion of the content that has no bearing on the conflict of interest (e.g., presentation on pathophysiology and epidemiology of a disease state).
 - External validation of the content to ensure that there is no commercial bias. ASHP staff may institute a peer-review process whereby the content of the educational activity would be reviewed by an independent expert or panel of experts to ensure that there is no commercial bias.

ASHP Policy & Procedures for Continuing Pharmacy Education (CPE) Activities Manual

Finalized: August 18, 2009

3.04-6 Disclosure of Commercial Support

Policy

ASHP will disclose to faculty and learners the source of any commercial support received for the activity prior to their participation in the activity. Product names or product logos will not be included in the acknowledgment of commercial support.

Procedure

- Commercial support for the activity will be disclosed to faculty in the faculty confirmation letter.
- Disclosure of commercial support for the activity must be printed on all printed activity materials, including invitations, flyers, promo cards, syllabi, and program handouts.
- For live educational activities, disclosure of commercial support for the activity must be printed on all activity materials and verbally disclosed prior to the start of the activity.
- For enduring materials, the following methods of disclosure will apply:
 - Publications: Acknowledgment of commercial support must be printed prominently in the front (before educational content) of the publication.
 - Multimedia Enduring Activities (e.g., CDs, Web activities): Acknowledgment of commercial support is included in the flash introduction of the activity and printed in an area that is prominent and easily accessible.
 - Videotapes: Acknowledgment of commercial support must be printed in a printed piece accompanying (packaged with) the videotape and must be disclosed orally at the beginning of the activity.
 - Activity Promotional Materials: Acknowledgment of commercial support must be printed on all activity promotional materials for both live and enduring CPE activities.

ASHP Policy & Procedures for Continuing Pharmacy Education (CPE) Activities Manual

Finalized: August 18, 2009

3.04-7 Disclosure of Relevant Financial Relationships to Participants

Policy

ASHP will disclose to learners prior to the start of CPE activity information on relevant financial relationships that exist between planners, faculty, authors, and others in a position to control content of the CPE activity and commercial interests. This disclosure will include name of the individual, name of the commercial interest(s), and nature of the relationship with each commercial interest. Learners will also be informed if an individual has no relevant financial relationship(s) with a commercial interest.

Procedure

Affiliations disclosed by faculty, authors, planning committee members, and others in a position to control content of the CPE activity will be disclosed to the participants/learners in the following manner:

- For live educational activities, disclosures (whether existing or non-existing) may be printed in the program handout materials, in the meeting program, on the opening presentation slides, or given orally at the beginning of the presentation. If any changes occur immediately prior to the live activity and cannot be printed in the handout materials, the new information must be disclosed orally immediately prior to the activity. Documentation of this oral disclosure, including the content of the disclosure must be provided on the Site Managers' Evaluation Form/ASHP Staff Monitor Form, and this form must be retained on file in the activity file for six years.
- For enduring materials, the following methods of disclosure will apply:
 - Publications: All disclosures must be printed prominently in the front (before educational content) of the publication.
 - Multimedia Activities (e.g., CDs, Internet activities): The disclosure information must be printed in an area that is prominent and easily accessible.
 - Videotapes: Disclosure information must be provided in a printed piece accompanying (packaged with) the videotape and must be disclosed orally at the beginning of the activity.
- The disclosure will include the name of the individual, name of the commercial interest(s), and nature of the relationship that the person has with the commercial interest. If an individual reports no relevant financial relationships with a commercial interest, this fact will also be included in the disclosure information.
- Disclosure information will not include product trade names.

ASHP Policy & Procedures for Continuing Pharmacy Education (CPE) Activities Manual

Finalized: August 18, 2009

3.04-8 Appropriate Use of Commercial Support

Policy

ASHP maintains control and responsibility over all aspects regarding the disposition and disbursement of commercial support funds for an educational activity. If ASHP enters into a co-sponsor relationship with a non-accredited entity for a CPE activity for which there is commercial support, ASHP will maintain financial responsibility and oversight for the distribution and disbursement of all funds associated with the activity.

Procedure

- ASHP maintains sole responsibility for the disposition and disbursement of commercial support funds for its CPE activities.
- When requesting commercial support for an educational activity, ASHP will base the amount of the educational grant request on an estimated budget that outlines all estimated expenses and other revenue (e.g., registration fees) associated with the activity. This budget will be shared with the commercial supporter.
- ASHP, the commercial supporter, and any other provider or educational partner involved in planning or implementing the activity will sign a Letter of Agreement outlining the terms, purposes, conditions, and dollar amount of the grant. (Note: The originating source of the funds shall be considered the commercial interest for purposes of signing the agreement and acknowledgment.)
- ASHP's independence and control over decision-making regarding the content of the CPE activity may in no way be compromised by the acceptance of commercial support for the activity. ASHP will not accept funding from commercial interests if the funding is in any way conditioned upon the acceptance of advice from the commercial interest regarding the activity content, faculty/authors, or planners.
- All commercial support associated with a CPE activity must be given with the full knowledge and approval of ASHP. No additional funds or in-kind support will be provided to the planners, teachers, or authors beyond those defined in the ASHP activity budget.
- ASHP will, through its Financial Management Division, maintain a detailed record of all out-of-pocket expenditures associated with the educational activity. To facilitate tracking of expenses, ASHP assigns a ledger account code and "activity name" to each activity for which commercial support is obtained. Upon request, ASHP will provide a reconciliation of these expenses along with documentation (e.g., invoices, faculty expense forms) to the commercial supporter.

ASHP Policy & Procedures for Continuing Pharmacy Education (CPE) Activities Manual

Finalized: August 18, 2009

- When disbursing the funds associated with the activity, ASHP will strictly adhere to applicable policies regarding honorarium, reimbursement for expenses, and allowable activity expenses.
- If budgeted expenses are exceeded, ASHP may request additional funds from the commercial supporter. In this case, a budget addendum and supplemental request for additional funds will be sent to the commercial supporter. Any additional funds will be documented in an addendum to the Letter of Agreement.
- ASHP will disclose to all activity faculty, authors, planners, participants, and learners the source of any commercial support received for the activity. This information will be disclosed to faculty, authors, and planners in writing in confirmation letters.
- When entering into a co-sponsorship relationship ASHP will ask the cosponsor to:
 - Provide a preliminary budget for review and approval by ASHP.
 - Obtain approval from ASHP prior to making changes from the preliminary budget.
 - Provide a final reconciliation report to ASHP detailing the receipt and expenditure of commercial support.

ASHP Policy & Procedures for Continuing Pharmacy Education (CPE) Activities Manual

Finalized: August 18, 2009

3.04-9 Speaker Honoraria

Policy

When establishing honorarium amounts for faculty, planners, or authors of CPE activities, ASHP seeks to provide honoraria that are appropriate to the qualifications and required responsibilities of the individual and that will allow ASHP to secure highly qualified program faculty, authors, and planners while maintaining expenses within the budgeted amounts. Honoraria should be equitable and in keeping with the fair market value for the service provided.

Procedure

The following procedure should be adhered to:

- Honoraria are to be paid only for the teacher's or author's work in the educational activity. Honoraria may not be provided to learners or other non-faculty/non-author participants.
- ASHP will provide honoraria to speakers, authors, and activity planners that are equitable and are commensurate with the fair market value for the qualifications of the individual and the services being provided. Some may choose not to receive an honorarium.
- As a general rule, the usual and customary honorarium is as follows:
 - \$500-\$2,000 for a presentation of up to 90 minutes in duration provided by a pharmacist, physician, nurse, or other health care professional. Additional honoraria may be paid for added responsibilities such as serving as program chair, reviewing and revising overall program content, and serving as program moderator.
 - \$500-\$1500 for serving as an author or guest editor when the draft of the publication is developed by ASHP. This honorarium is intended to compensate the author for their time in reviewing and providing comments on the draft, developing the initial content basis, researching the subject matter, and approving the final draft.
- Activity planners, faculty, and authors may not accept any additional payment from the commercial supporter related to their participation in the CPE activity.
- These guidelines are general. Additional factors that may be included in the determination of faculty honoraria include the unique qualifications of the faculty member related to the content area and the faculty member's time that will be required to fulfill the required role (e.g., amount of time to develop presentation, time away from work).

ASHP Policy & Procedures for Continuing Pharmacy Education (CPE) Activities Manual

Finalized: August 18, 2009

- ASHP recognizes that experts sometimes require an honorarium that falls outside of these usual ranges. In these situations, staff should consider the following in determining whether the additional honorarium is acceptable:
 - Impact on overall activity budget. If overall honorarium budget for the activity will be exceeded, the appropriate division director must approve this excess amount.
 - Speaker's or author's unique qualifications in the respective subject area.
 - Other rationale to support the use of the speaker, planner, or author, e.g., no other expert available, prior experience with ASHP, name recognition/prominence.
- A check request for speaker or author honoraria should be submitted by the ASHP staff member to ASHP Financial Management Division along with the following:
 - Completed and signed W-9 form (if payable to an individual)
 - Name of payee, address, amount of honorarium, and account code for the expense
 - If payee is a business, the tax identification number for the business

This documentation is kept on file in the ASHP Financial Management Division for six years.

- An honorarium may only be issued to the individual providing the service or to a business organization. An honorarium may not be paid to an individual for services provided by another individual.

ASHP Policy & Procedures for Continuing Pharmacy Education (CPE) Activities Manual

Finalized: August 18, 2009

3.04-10 Reimbursement of Out-of-Pocket Expenses for CPE Activities

Policy

ASHP provides reimbursement for travel and other related out-of-pocket expenses associated with the participation in a CPE activity by planners, faculty, and authors, subject to predetermined limits. ASHP does not provide reimbursement for non-faculty participants' travel expenses or any other expenses associated with their participation in a CPE activity. Activity planners, faculty, and authors may not accept any reimbursement or payment from the commercial supporter related to their participation in the CPE activity.

Procedure

The following procedure will be adhered to:

- ASHP will provide reimbursement for travel and other related out-of-pocket expenses associated with the participation in a CPE activity by planners, faculty, and authors, subject to predetermined budgetary limits.
- Allowable expenses will be outlined in the Confirmation Letter mailed to faculty, planners, and authors.
- When providing reimbursement for travel expenses for faculty, planner, and authors, the following will be adhered to:
 - Reimbursement is limited to only those expenses associated with the individual's participation in the ASHP educational activity. If activity faculty or planners participate in other aspects of a meeting or educational event as a learner, only those expenses associated with the individual's participation as a faculty member, planner, or author in the ASHP educational activity will be reimbursed.
 - In cases where an ASHP educational activity takes place during a national meeting or other educational event and faculty members for the educational activity are required to be registered for the meeting or educational event, ASHP may, at its discretion, reimburse the faculty member for registration or provide complimentary registration to the faculty member.
 - Reimbursement for airfare is limited to coach class airfare. ASHP will not reimburse for first-class or business-class airfare.
 - As a general rule, reimbursement for meals is limited to \$60 per day unless otherwise approved.
 - Allowable expenses for activity planners, faculty, or authors include coach airfare or rail travel, ground transportation, meals, lodging, telephone expenses, business center expenses associated with the CPE activity, mailing or postage expenses, parking, and gratuity. Expenses associated

ASHP Policy & Procedures for Continuing Pharmacy Education (CPE) Activities Manual

Finalized: August 18, 2009

with in-room movies or visits to a health club during travel will not be reimbursed.

- Only those allowable expenses incurred by the activity faculty member, planner, or author will be reimbursed. Expenses for guests or spouses will not be reimbursed.
- ASHP may arrange for direct-billing or master-billing of faculty, planner, or author expense at its discretion. Airfare and hotel expenses are frequently direct-billed to ASHP.
- Any exception to the limits or allowances specified in this policy must be approved in advance by the appropriate division director and documented in the CPE activity file. One example of an allowable exception would be reimbursement for an extra night's lodging to allow for purchase of a less expensive airline ticket, provided that ASHP's overall expenses would be decreased if this exception were made.
- Activity planners, faculty, and authors may not accept any reimbursement or payment related to their participation in the CPE activity from sources other than ASHP.

Activity faculty, planners, or authors must submit an ASHP Expense Reimbursement Request for reimbursement of out-of-pocket expenses, along with original receipts. The Expense Reimbursement Request must specify the name of payee, address, amount of reimbursement, expense itemization, and account code. This documentation is kept on file in the ASHP Financial Management Division for six years.

- Expense reimbursement may only be issued to the individual providing the service or to a business organization. Expense reimbursement may not be paid to an individual for services provided by another individual.

3.04-11 Expenditures for Learners

Policy

ASHP will provide honorarium and expense reimbursement for faculty, planners, or authors of CPE activities; ASHP will not provide reimbursement, honoraria, or inducements of any type to learners who participate in CPE activities. Commercial support may not be used to pay for travel, honoraria, or expenses for non-faculty/non-planner participants in a CPE activity. Commercial support may be used to pay for travel, lodging, honoraria, or personal expenses for bona fide employees and volunteers of ASHP, the co-sponsor, or the educational partner.

Procedure

- ASHP usually provides honoraria and expense reimbursement for faculty, planners, or authors of its CPE activities. Such payments and reimbursements are limited to faculty, planners, and authors and may not be provided to learners who participate in CPE activities.
- ASHP prohibits the offering of inducements of any kind to learners for their participation in a CPE activity.
- ASHP may provide meals to learners in conjunction with an educational activity.
 - In cases where meals are provided, the meal function is provided as an adjunct to the educational activity and may not compete with or take precedence over the educational activity.
 - Meals provided in conjunction with educational activities must be in keeping with the educational focus of the activity and must not be structured in such a way as to detract from, compete with, nor induce attendance at the educational activity.
 - Participation in meal functions associated with educational activities are limited to the participants/learners, faculty, planners, and staff who participate in the educational activity.
- Commercial support may not be used to pay for travel, honoraria, or expenses for non-faculty/non-planner participants in an educational activity.

ASHP Policy & Procedures for Continuing Pharmacy Education (CPE) Activities Manual

Finalized: August 18, 2009

3.04-12 Policy on Social Events

Policy

ASHP will adhere to the regulations, standards, and guidelines issued by ACCME, ACPE, and AMA, regarding social events or meals that are part of its CPE activities.

Procedure

- Social events, receptions, or meals at CPE activities shall not compete with or take precedence over the educational activity.
- Meals, receptions, or other social events must not be the focus or the primary inducement to attend the CPE activity. Information included in the activity invitations should not give the impression that these events are more important than the CPE activity.
- Social events or meals held in conjunction with a CPE activity must meet the following criteria:
 - The value of the event or meal should be modest.
 - The event should facilitate discussion among activity participants and faculty.
 - The educational portion should account for a majority of the total time of the educational activity and social event or meal.
- Spouses or guests should not be invited to attend CPE social events.

ASHP Policy & Procedures for Continuing Pharmacy Education (CPE) Activities Manual

Finalized: August 18, 2009

3.04-13 Management of Associated Commercial Promotion

Policy

ASHP does not allow commercial product promotion, exhibition, or advertisement in or during its CPE activities.

Procedure

- Acknowledgment of commercial support for an ASHP CPE activity is limited to acknowledgment of the commercial interest providing support for the activity and may not include product names.
- CPE activities in print format: Advertisements and promotional materials may not be interleaved within the pages of the CPE content. Advertisements and promotional materials may face the first or last pages of printed CPE content as long as these materials are not related to the CPE content they face **and** are not paid for by the commercial supporters of the CPE activity.
- CPE activities distributed in videotape, audiotape, CD, or DVD format: Product advertising may not be included within the content of or packaged with these CPE activities. "Commercial Breaks" are not allowed
- Web-based CPE activities: Advertisements and promotional materials may not be visible on the screen at the same time as the CPE content and may not be interleaved between computer 'windows' or screens of the CPE content. ASHP CPE activities may not be placed on the Web site of a commercial interest and links to a Web site of a commercial interest may not be embedded within an Internet CPE activity.
- Live CPE activities:
 - Advertisements and promotional materials cannot be displayed or distributed in the educational space immediately before, during, or after a CPE activity.
 - Promotional presentations may not be presented during a CPE activity.
 - In cases where a CPE activity is conducted during a meeting where commercial exhibits are permitted, the CPE activity must be held in a separate location from the CPE activity.
- Representatives or employees of commercial interests, including the commercial supporter of the educational activity if applicable, are permitted to attend educational activities sponsored by ASHP but may not engage in any sales or promotional efforts or discussions with activity participants or faculty immediately before, during, or immediately after the educational activity.

**ASHP Policy & Procedures for Continuing Pharmacy Education
(CPE) Activities Manual**

Finalized: August 18, 2009

- Arrangements for commercial exhibits or advertisements may not influence the planning or interfere with the presentation of a CPE activity. Exhibit Placement may not be a condition of commercial support for a CPE activity.

ASHP Policy & Procedures for Continuing Pharmacy Education (CPE) Activities Manual

Finalized: August 18, 2009

3.04-14 Policy on the Role of Commercial Interest Representatives

Policy

In accordance with the ACCME Standards for Commercial Support and the ACPE Guidelines for Standards for Commercial Support, ASHP does not permit a commercial interest or its representatives to serve as the agent of delivery for its CPE activities, including distribution of CPE enduring materials, hosting of live CPE activities, or arranging for electronic access to CPE activities. ASHP does not allow representatives of commercial interests to be designated as the agents for purposes of planning or implementation of CPE activities. Representatives of commercial interests who attend a live CPE activity must conduct themselves in accordance with ASHP policies.

Procedure

- Representatives of commercial interests may not act as the agents of the accredited provider in the planning or implementation of CPE activities. This includes, but is not limited to, site selection, menu planning, logistical arrangements, development of printed activity materials, faculty selection, faculty contact, expense reimbursement or payment of honoraria, and content development.
- The commercial supporter for the activity must sign a Letter of Agreement, which includes stipulation that the commercial supporter will abide by ASHP's policies.
- Representatives of commercial interests may attend CPE activities, but must conduct themselves in accordance with ASHP policies. ASHP staff will monitor representatives' behavior. Prohibited behavior for representatives of commercial interests includes, but is not limited to, the following:
 - Engaging in detailing or product promotion.
 - Distributing product-promotional materials.
 - Making payment directly to any faculty member, planner, or author honoraria or reimbursement of out-of-pocket expenses.
 - Providing any additional payment other than the commercial support to director of the activity, planning committee members, teachers, or authors, joint sponsor, or any others involved with the supported activity.
 - Developing their own activity invitations.
 - Providing payment or reimbursement for registration and expenses for attendees.
 - Directing faculty presentations by engaging in scripting or otherwise suggesting content or discussion points.

**ASHP Policy & Procedures for Continuing Pharmacy Education
(CPE) Activities Manual**

Finalized: August 18, 2009

- Participating in the activity by asking or answering questions, inducing participants to ask questions, or making comments or statements openly to the audience during the activity.
- Representatives of commercial interests may, upon ASHP's specific written request, distribute invitations, brochures, or business reply cards developed by ASHP designed to inform prospective participants about a CPE activity. In cases where this support is requested, the distribution of these materials by representatives of commercial interests may only serve as an adjunct to – and not a replacement for - promotion of the activity by ASHP, and these materials may not be packaged with promotional materials, advertising, reprints, or any other materials not specifically approved by ASHP.

ASHP Policy & Procedures for Continuing Pharmacy Education (CPE) Activities Manual

Finalized: August 18, 2009

3.04-15 Distribution of CPE Activities by a Commercial Interest

Policy

ASHP maintains responsibility for the distribution of all CPE enduring materials to learners. ASHP does not allow commercial interests to be the agent for providing a CPE activity to learners. A commercial interest may, at ASHP's specific request, assist in distributing information about a CPE activity to the target audience for the activity.

Procedures

- ASHP will maintain responsibility for the distribution of CPE activities to learners.
- The following mechanisms are used to distribute enduring materials to learners:
 - Direct mail to target audiences determined by ASHP. ASHP distributes print enduring materials via direct mail to target audiences for the CPE activity. ASHP purchases mailing lists for the target audiences from various mailing list vendors.
 - For journal CPE activities, including supplements, the publisher of the journal is responsible for distributing the activity to the journal's subscriber list via direct mail.
 - For Internet CPE activities, ASHP may send a broadcast e-mail message to target audiences containing a link to the CPE activity. In these cases, the broadcast e-mail message is sent to prospective learners in the ASHP CE database who have given permission for ASHP to e-mail them.
- Representatives of commercial interests, including the commercial supporter of the CPE activity if commercial support is received, are NOT allowed to distribute CPE activities or arrange for electronic access to CPE activities.
- Representatives of commercial interests may, upon ASHP's specific written request, distribute invitations, brochures, or business reply cards developed by ASHP to inform prospective participants about a CPE activity. In cases where this support is requested, the distribution of these materials by representatives of commercial interests may only serve as an adjunct to – and not a replacement for - promotion of the activity by ASHP, and these materials may not be packaged with promotional materials, advertising, reprints, or any other materials not specifically approved by ASHP.

ASHP Policy & Procedures for Continuing Pharmacy Education (CPE) Activities Manual

Finalized: August 18, 2009

3.04-16 Policy on Advertising

Policy

Product-promotion materials or product-specific advertisements of any type are prohibited in or during ASHP CPE activities. Promotional activities must be kept separate from CPE.

Procedures

- Printed CPE Activities: ASHP does not permit product advertising to be included in its printed CPE monographs or Journal supplements. If a CPE activity is placed within the center content of ASHP's Journal, advertisements and promotional materials will not be interleaved within the pages of the CPE content. Advertisements and promotional materials may face the first or last pages of printed CPE content as long as these materials are not related to the CPE content and are not paid for by the commercial supporters of the CPE activity.
- Computer-based CPE Activities: For computer-based CPE activities (e.g., Internet activities, CDs), advertisements and promotional materials will not be visible on the screen at the same time as the CPE content and not interleaved between computer "windows" or screens of the CPE content. In addition, ASHP CPE activities may not be placed on the Web site owned or controlled by a commercial interest, and links to a Web site of a commercial interest may not be embedded within an Internet CPE activity.
- Audio and video recorded CPE Activities: Advertisements and promotional materials will not be included within the CPE activity and there will be no "commercial breaks."
- Live CPE Activities: Advertisements and promotional materials cannot be displayed or distributed in the educational space immediately before, during, or after a CME/CPE activity. Representatives of commercial interests are not permitted to engage in sales or promotional activities while in the space or place of the CPE activity or its related meal function or social event.
- Educational materials that are part of a CPE activity such as presentation slides, syllabi, and activity handouts will not contain any advertising, product promotion, or product-group message.
- Generic drug names are to be used throughout the content of a CPE activity. The use of trade names in CPE content is only appropriate when listing complete information regarding multiple products (e.g., a chart listing product information such as trade name, generic name, dosing information) or when referencing FDA-approved manufacturers' labeling. ASHP staff are responsible for reviewing

ASHP Policy & Procedures for Continuing Pharmacy Education (CPE) Activities Manual

Finalized: August 18, 2009

activity content to ensure that generic names are used and any mention of a product trade name is appropriate as noted in this policy.

- Print or electronic information distributed about the non-CPE elements of a CPE activity that are not directly related to the transfer of education to the learner, such as schedules and content descriptions, may include product-promotion material or product-specific advertisement, subject to approval by ASHP.

In reference to:

ACPE Standard 5: Standards for Commercial Support

The provider must plan all CPE activities independent of commercial interest. The educational content must be presented with full disclosure and equitable balance. Appropriate topics and learning activities must be distinguished from topics and learning activities which are promotional or appear to be intended for the purpose of endorsing either a specific commercial drug, device or other commercial product (as contrasted with the generic product/drug entity and its contents or the general therapeutic area it addresses), or a specific commercial service (as contrasted with the general service area and/or the aspects or problems of professional practice it addresses).

SECTION IV – DELIVERY OF CPE ACTIVITIES

4.01 Faculty for CPE Activities

Policy

ASHP selects faculty through a variety of methods to ensure they are expert in the subject matter and qualified by experience, training and/or preparation to meet the educational needs of the target audience. ASHP provides verbal and written information to CPE activity faculty and collaborates with faculty to ensure that CPE activities are of high-quality and meet ACPE Standards.

Procedure

- ASHP selects and confirms faculty for each CPE activity and provides guidance throughout the planning process to ensure the activity meets ACPE standards and is planned and conducted in accordance with ASHP standards and policies.
- Faculty selection employs research and networking among experts to identify highly regarded experts in the topic of the CPE activity. In cases when faculty candidates submit activity proposals, their qualifications are carefully reviewed by ASHP staff and, when appropriate, by the ASHP Educational Programming Committee.
- In addition to content expertise, ASHP staff consider prospective faculty members' presentation and writing skills and experience in the use of active learning techniques in the faculty selection process to ensure the best possible educational experience for ASHP CPE activity participants.
- ASHP provides faculty with guidance, which may be written and/or verbal. Formats may include:
 - Meeting Programming Associate (MPA) Handbook
 - Faculty/Presenter/Speaker Handbook
 - Email and phone consultations as needed
- Communications and correspondence with faculty must include the following elements:
 - Method of delivery of the CPE activity
 - Date, time, and location for live CPE activity
 - Anticipated initial release date for enduring/ self-study CPE activity
 - Faculty responsibilities for participating in the CPE activity
 - Subject matter of faculty participation
 - Instructions that content must be scientifically and evidence-based, whenever available. In all cases, instructions include that content presented should be objective, free from commercial bias, and must present a balanced view of various therapeutic options available.
 - Educational needs of the target audience upon which activity content will be based.

ASHP Policy & Procedures for Continuing Pharmacy Education (CPE) Activities Manual

Finalized: August 18, 2009

- Instructions regarding the incorporation of active learning strategies available
- ASHP requirements for disclosure of relevant financial relationships with any commercial interest.
- Faculty guidance may include conference calls, emails, or review of drafts to determine scope of content, design, intended audience, learning objectives, incorporating active learning strategies, delivery and/or assessment of learning. Discussions may include:
 - Preparation and review of instructional materials (i.e. slides, presentation materials, handouts, AV needs, etc.)
 - Development and use of learning assessment and provision of feedback to participants.
 - How will faculty be evaluated, including specific areas to be addressed on the evaluation form
- ASHP staff responsible for planning, developing and/or coordination of CPE activities identifies and resolve any conflicts of interests prior to the delivery of the CPE activity.
- Faculty performance and CPE content are evaluated by participants.
- As part of its quality improvement efforts, ASHP provides activity faculty with overall evaluation data and the data specific to their presentations.

In reference to:

ACPE Standard 6: Faculty for CPE Activities

The provider must communicate and collaborate with CPE activity faculty regarding the identified educational needs, intended audience, objectives, active participation, and learning assessments for each CPE activity.

ASHP Policy & Procedures for Continuing Pharmacy Education (CPE) Activities Manual

Finalized: August 18, 2009

4.02 Teaching and Learning Methods

Policy

ASHP staff involved in planning CPE activities work closely with CPE faculty to ensure that active learning is appropriately incorporated into all CPE activities. ASHP staff routinely monitors the effectiveness of the selected methods of delivery. Active learning may involve reading, writing, discussion, and engagement in solving problems, analysis, synthesis, and evaluation.

Procedure:

- ASHP educates CPE faculty on ACPE's requirement for active learning and provides training on how to meet the requirement. This training is provided via live in-person sessions, live webinars, and recorded webinars and self-study activities.
- Requirements and suggested methods of active learning are communicated to activity faculty.
- Consultations are held with Meeting Programming Associates (MPAs) and other key faculty as needed to ensure their awareness of the ACPE requirement for active learning as well as how to meet the requirement. Consultations may take the form of written correspondence, including email, or telephone conversations.
- Use and effectiveness of active learning methods are monitored and evaluated by learners and ASHP staff via participant evaluations and feedback from staff session monitors.
- ASHP CPE faculty are encouraged to use the following active learning methods or to develop their own: polling, quiz and test questions, self-assessment instruments, interactive case studies, interactive scenarios, discussion/peer sharing and application exercises.
- Faculty for computer-based activities are encouraged to use additional methods such as synchronous or asynchronous chat and "conference room" capabilities.
- Faculty are educated on selecting active learning strategies that are appropriate for the defined objectives and activity type.

In reference to:

ACPE Standard 7: Teaching and Learning Methods

The provider must assure that all CPE activities include active participation and involvement of the pharmacist and technician.

4.03 Educational Materials

Policy

ASHP CPE activity educational materials (e.g. handouts, slides, outlines, background materials, selected bibliographies, audiovisuals, multimedia) are designed to enhance participants' ability to achieve the objectives; serve as guidance; provide additional sources of information and include reference tools usable in pharmacy practice.

Procedure

- Content is reviewed by ASHP staff responsible for developing and/or coordinating CPE activities to ensure it is current and presents a balanced view of various therapeutic options available. It should be scientifically based, objective and applicable to the contemporary practice of pharmacy.
- Educational materials may include the following:
 - Title of CPE activity
 - Faculty name, credentials, position title, and affiliations
 - ACPE logo, Activity Program Number, CE credit hours
 - ASHP accreditation statement
 - Faculty biographical sketch
 - Faculty disclosures of relevant financial relationships, if not included elsewhere
 - Description or abstract
 - Learning objectives (achievable by the learner)
 - Summary of content main points
 - Active learning strategies
 - Learning assessment tools
 - Self-assessment questions (with answers) based on the stated learning objectives
 - Resources to provide more in-depth information
 - Requirements to obtain CPE Statement of credit
- ASHP reviews materials to be presented prior to the activity and modifies as needed to comply with ACPE Standards.
 - Content must present an independent, equitable view of the topic and is free from commercial bias and promotion
 - No copyright infringement in the materials

In reference to:

ACPE Standard 8: Educational Materials

The provider must offer educational materials for each CPE activity that will enhance participants' understanding of the content and foster applications to pharmacy practice

SECTION V – ASSESSMENT

5.01 Assessment of Learning

Policy

Learning assessment is an integral part of every ASHP CPE program. Learning assessment mechanisms selected are based on the objectives being assessed and the activity type.

Procedure

- After the activity type and objectives have been defined, appropriate learning assessment methods are selected and developed. This applies to both live and self-study activities.
- For knowledge-based activities, assessments may include self-assessment instruments, polling or questions/quizzes/tests. Self-assessments enable learners to determine individualized strengths and weaknesses related to the content being taught. Polling, questions, quizzes and tests enable learners to determine if they have mastered the material.
- For application-based activities, assessments may include successful completion of case studies, scenarios or other activities requiring use of knowledge and skills taught in the session. Group discussion of learning accomplishments may be employed. Expert evaluation and feedback are included.
- Practice-based activities also include formative and summative assessments. For example, for formative assessments, teleconferences may require participants to give status reports on given projects along with descriptions of successes and challenges to be overcome. Experts give feedback on the status and if the strategies being used to manage challenges can be improved upon. For summative assessments, projects may be completed and evaluated or tests or knowledge and skills acquired in the CPE activity may be employed.

In reference to:

ACPE Standard 9: Assessment of Learning

The provider in collaboration with faculty must include learning assessments in each CPE activity to allow pharmacists and technicians to assess their achievement of the learned content. Completion of a learning assessment is required for CPE credit.

5.01 Assessment Feedback

Policy

ASHP ensures that participants receive prompt, appropriate and constructive feedback of the assessment activities conducted in CPE activities. Learner feedback given corresponds to the activity type and objectives.

Procedure

- After a CPE activity learning assessment, feedback is given to participants so they can determine if they have achieved the objectives.
- For knowledge-based activities, faculty provide answers to questions along with explanations about why the correct answer is correct and the incorrect answers are incorrect.
- For application-based activities, faculty explain correct solutions to cases or other problem-solving assessments along with explanations for why it is the correct solution and why any incorrect solutions offered are incorrect.
- For practice-based activities, assessment feedback follows the guidelines described above for knowledge-based and application-based activities, depending on the type of assessment being used. In addition, when projects implemented for the activity are being evaluated, feedback may take the form of assessment of the project based on a defined set of criteria for successful completion of the project.
- If participants have not achieved the objectives, faculty provide feedback on how the objectives can be met. They may provide further explanation, if time, or provide resources for further exploration.
- ASHP CPE faculty give feedback that corresponds to the learning assessment, which is consistent with the objectives and activity type.

In reference to:

ACPE Standard 10: Assessment Feedback

The provider must ensure learner assessment feedback is provided to participants in an appropriate, timely, and constructive manner.

SECTION VI – PROGRAM EVALUATION

6.01 Evaluation of CPE Activity

Policy

ASHP evaluates each CPE activity for its effectiveness in meeting the educational needs identified, the achievement of each stated objective, quality of faculty, usefulness of educational material, effectiveness of teaching and learning methods, including active learning, appropriateness of learning assessment activities, and learners' perceptions of bias or commercialism.

Procedure

- Activity evaluation tools are developed and implemented for all CPE activities. Activity evaluations may be administered in paper form or electronically via the ASHP Learning Center.
- Results of CPE activity evaluation are summarized and reviewed by ASHP staff after each activity.
- Evaluation data are used by ASHP staff to make in decisions regarding whether to change, revise, or discontinue a CPE activity.
- Appropriate changes and improvements are made to future CPE activities based on staff review of activity evaluation information.
- Individual activity evaluation results are shared with the activity faculty.
- CPE evaluations collect information about at least all of the following:
 - Whether the CPE activity met the participant's educational needs.
 - Achievement of objectives
 - Quality of faculty
 - Usefulness of educational materials
 - Effectiveness of teaching and learning methods
 - Appropriateness of learning assessments
 - Perceptions of bias, promotion or advertisement of commercial products
- Evaluation results are summarized separately for pharmacists, pharmacy technicians, and other health care professionals.

ASHP Policy & Procedures for Continuing Pharmacy Education (CPE) Activities Manual

Finalized: August 18, 2009

In reference to:

ACPE Standard11: Evaluation of CPE Activity

Providers must develop and conduct evaluations of each CPE activity. The evaluations must allow pharmacists and technicians to provide feedback on the following items:

- applicability of the CPE activity to meet their educational needs
- achievement of each stated objective
- quality of faculty
- usefulness of educational material
- effectiveness of teaching and learning methods, including active learning
- appropriateness of learning assessment activities
- perceptions of bias or commercialism

6.02 Achievement and Impact of Mission and Goals

Policy

ASHP staff members develop and implement evaluations that assess the achievement and impact of our mission and goals as stated in Standard 1. The information obtained in these evaluations is used to further develop and improve the ASHP CPE program.

Procedure

- ASHP conducts an annual review of its mission and goal statements and determines how well its CPE activities are achieving them using data gathered throughout the year. The review also determines the extent of the impact of the mission and goals as implemented through ASHP's CPE activities. In addition, ways to have a more positive impact are defined.
- Based on the annual review, improvements are instituted for the CPE program and modifications may be made to the mission and goal statements.
- Methods used to gather information about the achievement and impact of ASHP's mission and goals are appropriate to the CPE activity type.
- For knowledge-based activities, methods used include documentation of number of participants in attendance, attendee participation in active learning activities, evaluation of attendee satisfaction, and documentation that activity objectives have been achieved. This information is gathered in different ways, such as through faculty or ASHP staff collecting data during the activity itself or through an evaluation instrument completed by the participants. The current instrument asks participants to rate their satisfaction on several factors, including whether the objectives were met, whether their educational needs were met, faculty effectiveness, effectiveness of teaching methods and materials and participants ability to answer assessment questions.
- For application-based activities, in addition to methods used for knowledge-based activities, performance measures are used. For example, successful completion of case studies or other activities by participants may be documented. Evaluations seek to determine the usefulness and applicability of material learned by asking questions, such as, "Describe something new that you learned that you plan to use in your setting. Be as specific as possible."
- For practice-based activities, in addition to methods used for knowledge- and application-based activities, data on changes to patient and/or population health are gathered. For example, for the Patient Care Impact Program, an ASHP practice-based program, participants summarize the impact of their projects on a poster. A webpage displays the posters completed during the program. These

ASHP Policy & Procedures for Continuing Pharmacy Education (CPE) Activities Manual

Finalized: August 18, 2009

include the impact of the project on patients and/or populations who benefitted from the program.

- Data gathered are used by ASHP staff to determine effectiveness and ways to improve CPE activities. In addition, consideration is given to determining possible revisions to the ASHP Mission and Goal statements.
 - An overall CPE program evaluation is conducted on an annual basis. Summative evaluation results are reviewed and analyzed. Recommendations and yearly goals are defined.
 - ASHP determines whether its CPE program met specific standards and the degree to which the program in general had a positive impact on practice.

In reference to:

ACPE Standard12: Achievement and Impact of Mission and Goals

Providers must establish and implement evaluation plans that assess achievement and impact of stated mission and goals (Standard 1). They must use this information for continuous development and improvement of the CPE program.

ASHP Policy & Procedures for Continuing Pharmacy Education (CPE) Activities Manual

Finalized: August 18, 2009

Evaluation of Program Effectiveness

Knowledge-Based Activities

Element Evaluated	Questions to be Answered in the Program Evaluation Process	Evaluation Tools
Attendance	How many participants attended the activity?	Registration and activity counts
Attendee participation in active learning	What was the level of participation in active learning?	Percentage estimates by faculty or staff*
Attendee satisfaction	How satisfied were participants with the quality of the CPE activity in terms of whether the objectives were met, their educational needs were met, faculty effectiveness, effectiveness of teaching methods, effectiveness of materials and participant ability to answer assessment questions?	Feedback from evaluation forms Analysis of results for each educational activity
Achievement of activity objectives	To what extent did the participants achieve the objectives based on their completion of the learning assessment?	Percentage estimates of participant successful completion of learning assessment by faculty or staff**

*Faculty or staff estimate the percentage of participants actively engaged.

**Faculty poll participants asking, "How many missed one or more items on the learning assessment?" Faculty or staff member record an estimated percentage of participants who missed/did not miss items. (Note: Faculty request questions from those who missed items so clarifications can be given.)

ASHP Policy & Procedures for Continuing Pharmacy Education (CPE) Activities Manual

Finalized: August 18, 2009

Application-Based Activities

Element Evaluated	Questions to be Answered in the Program Evaluation Process	Evaluation Tools
Attendance	How many participants attended the activity?	Registration and activity counts
Attendee participation in active learning	What was the level of participation in active learning?	Percentage estimates by faculty or staff*
Attendee satisfaction	How satisfied were participants with the quality of the CPE activity in terms of whether the objectives were met, their educational needs were met, faculty effectiveness, effectiveness of teaching methods, effectiveness of materials and participant ability to answer assessment questions?	Feedback from evaluation forms Analysis of results for each educational activity
Achievement of activity objectives	To what extent did the participants achieve the objectives based on their completion of the learning assessment?	Percentage estimates of participant successful completion of learning assessment by faculty or staff**
Completion of case studies or other exercise appropriate to the objective(s)	How successful were the participants in completing the case study or other exercise?	Percentage estimates of participant successful completion of learning assessment by faculty or staff**

*Faculty or staff estimate the percentage of participants actively engaged.

**Faculty poll participants asking, "How many missed one or more items on the learning assessment?" Faculty or staff member record an estimated percentage of participants who missed/did not miss items. (Note: Faculty request questions from those who missed items so clarifications can be given.)

ASHP Policy & Procedures for Continuing Pharmacy Education (CPE) Activities Manual

Finalized: August 18, 2009

Practice-Based Activities

Element Evaluated	Questions to be Answered in the Program Evaluation Process	Evaluation Tools
Attendance	How many participants attended the activity?	Registration and activity counts
Attendee participation in active learning	What was the level of participation in active learning?	Percentage estimates by faculty or staff*
Attendee satisfaction	How satisfied were participants with the quality of the CPE activity in terms of whether the objectives were met, their educational needs were met, faculty effectiveness, effectiveness of teaching methods, effectiveness of materials and participant ability to answer assessment questions?	Feedback from evaluation forms Analysis of results for each educational activity
Achievement of activity objectives	To what extent did the participants achieve the objectives based on their completion of the learning assessment?	Percentage estimates of participant successful completion of learning assessment by faculty or staff**
Completion of case studies or other exercise appropriate to the objective(s)	How successful were the participants in completing the case study or other exercise?	Percentage estimates of participant successful completion of learning assessment by faculty or staff**
Impact on patient and/or population health	What was the impact on patient and/or population health?	Data gathered during or after completion of the practice-based activity projects

*Faculty or staff estimate the percentage of participants actively engaged.

**Faculty poll participants asking, "How many missed one or more items on the learning assessment?" Faculty or staff member record an estimated percentage of participants who missed/did not miss items. (Note: Faculty request questions from those who missed items so clarifications can be given.)

The manual will undergo annual review by ASHP Internal CPE staff committee

Exhibit C

ASHP Policies for ACCME



THE ACCME'S ESSENTIAL AREAS AND THEIR ELEMENTS

ESSENTIAL AREA 1: PURPOSE AND MISSION

The provider must,

- Element 1 Have a written statement of its CME mission, which includes the CME purpose, content areas, target audience, type of activities provided, and expected results of the program.

ESSENTIAL AREA 2: EDUCATIONAL PLANNING

The provider must,

- Element 2.1 Use a planning process(es) that links identified educational needs with a desired result in its provision of all CME activities.
- Element 2.2 Use needs assessment data to plan CME activities.
- Element 2.3 Communicate the purpose or objectives of the activity so the learner is informed before participating in the activity.
- Element 3.3 Present CME activities in compliance with the ACCME's policies for disclosure and commercial support.

[NOTE: The ACCME's policies for disclosure and commercial support are articulated in: (1) *The Standards For Commercial Support: Standards to Ensure Independence in CME Activities*, as adopted by ACCME in September 2004; and (2) ACCME policies applicable to commercial support and disclosure. All materials can be found on www.accme.org.]

Essential Area 3: Evaluation and Improvement

The provider must,

- Element 2.4 Evaluate the effectiveness of its CME activities in meeting identified educational needs.
- Element 2.5 Evaluate the effectiveness of its overall CME program and make improvements to the program.

COMPLIANCE WITH THE FOLLOWING WILL BE DETERMINED AT PRE APPLICATION AND, AS REQUIRED, DURING THE PROVIDER'S TERM OF ACCREDITATION

ADMINISTRATION

The provider must,

- Element 3.1 Have an organizational framework for the CME unit that provides the necessary resources to support its mission including support by the parent organization, if a parent organization exists
- Element 3.2 The provider must operate the business and management policies and procedures of its CME program (as they relate to human resources, financial affairs and legal obligations), so that its obligations and commitments are met.

**2006 UPDATED DECISION-MAKING CRITERIA
RELEVANT TO THE ESSENTIAL AREAS AND ELEMENTS**

Measurement criteria have been established for the Elements of the Essential Areas. If a provider meets the criteria for the Elements within the Essential Area, the provider will be deemed to be 'In Compliance.'

Essential Area and Element(s)		Criteria for Compliance
Essential Area 1: Purpose And Mission	The provider must, E 1 Have a written statement of its CME mission, which includes the CME purpose, content areas, target audience, type of activities provided, and expected results of the program.	C 1 The provider has a CME mission statement that includes all of the basic components (CME purpose, content areas, target audience, type of activities, expected results) with expected results articulated in terms of changes in competence, performance, or patient outcomes that will be the result of the program.
Essential Area 2: Educational Planning	The provider must, E 2.1 Use a planning process(es) that links identified educational needs with a desired result in its provision of all CME activities. E 2.2 Use needs assessment data to plan CME activities. E 2.3 Communicate the purpose or objectives of the activity so the learner is informed before participating in the activity. E 3.3 Present CME activities in compliance with the ACCME's policies for disclosure and commercial support.	C 2 The provider incorporates into CME activities the educational needs (knowledge, competence, or performance) that underlie the professional practice gaps of their own learners. C 3 The provider generates activities/educational interventions that are designed to change competence, performance, or patient outcomes as described in its mission statement. C 4 The provider generates activities/educational interventions around content that matches the learners' current or potential scope of professional activities. C 5 The provider chooses educational formats for activities/interventions that are appropriate for the setting, objectives and desired results of the activity. C 6 The provider develops activities/educational interventions in the context of desirable physician attributes (e.g., IOM competencies, ACGME Competencies). C 7 The provider develops activities/educational interventions independent of commercial interests (SCS 1, 2 and 6). C 8 The provider appropriately manages commercial support (if applicable, SCS 3). C 9 The provider maintains a separation of promotion from education (SCS 4). C 10 The provider actively promotes improvements in health care and NOT proprietary interests of a commercial interest (SCS 5).
[Note: Regarding E 3.3 and C7 to C10 - The ACCME's policies for disclosure and commercial support are articulated in: (1) The Standards For Commercial Support: Standards to Ensure Independence in CME Activities, as adopted by ACCME in September 2004; and (2) ACCME policies applicable to commercial support and disclosure. All these materials can be found on www.accme.org .]		

Essential Area and Element(s)	Criteria for Compliance
<p style="text-align: center;">Essential Area 3: Evaluation and Improvement</p> <p>The provider must, E 2.4 Evaluate the effectiveness of its CME activities in meeting identified educational needs. E 2.5 Evaluate the effectiveness of its overall CME program and make improvements to the program.</p>	<p>C 11. The provider analyzes changes in learners (competence, performance, or patient outcomes) achieved as a result of the overall program's activities/educational interventions</p> <p>C 12. The provider gathers data or information and conducts a program-based analysis on the degree to which the CME mission of the provider has been met through the conduct of CME activities/educational interventions.</p> <p>C 13. The provider identifies, plans and implements the needed or desired changes in the overall program (e.g., planners, teachers, infrastructure, methods, resources, facilities, interventions) that are required to improve on the provider's ability to meet the CME mission.</p> <p>C 14. The provider demonstrates that identified program changes or improvements, that are required to improve on the provider's ability to meet the CME mission, are underway or completed.</p> <p>C 15. The provider demonstrates that the impacts of program improvements, that are required to improve on the provider's ability to meet the CME mission, are measured.</p>
<p style="text-align: center;">Accreditation with Commendation</p> <p>In order for an organization to achieve the status Accreditation with Commendation, the provider must demonstrate that it fulfills the following Criteria 16 - 22, in addition to Criteria 1-15.</p>	<p>C 16. The provider operates in a manner that integrates CME into the process for improving professional practice.</p> <p>C 17. The provider utilizes non-education strategies to enhance change as an adjunct to its activities/educational interventions (e.g., reminders, patient feedback).</p> <p>C 18. The provider identifies factors outside the provider's control that impact on patient outcomes.</p> <p>C 19. The provider implements educational strategies to remove, overcome or address barriers to physician change.</p> <p>C 20. The provider builds bridges with other stakeholders through collaboration and cooperation.</p> <p>C 21. The provider participates within an institutional or system framework for quality improvement.</p> <p>C 22. The provider is positioned to influence the scope and content of activities/educational interventions.</p>

LEVELS OF ACCREDITATION

PROVISIONAL ACCREDITATION requires compliance with Criteria 1 to 3 and 7 to 12. The criteria required for *Provisional Accreditation* are listed on pages 2-3 in black.

CONTINUED ACCREDITATION requires compliance with Criteria 1 to 3 and 7 to 12 (*Provisional Accreditation*) **plus** six additional criteria; Criteria 4 to 6 and 13 to 15. The additional criteria for *Accreditation* are listed on pages 2-3 in green.

ACCREDITATION WITH COMMENDATION requires compliance with Criteria 1 to 15 (*Continued Accreditation*) **plus** seven additional criteria; Criteria 16 to 22. The additional criteria for *Accreditation with Commendation* are listed above in blue.

THE ACCME STANDARDS FOR COMMERCIAL SUPPORTSM
Standards to Ensure Independence in CME Activities

STANDARD 1: INDEPENDENCE

- 1.1** A CME provider must ensure that the following decisions were made free of the control of a commercial interest. (See www.accme.org for a definition of a 'commercial interest' and some exemptions.)
- (a) Identification of CME needs;
 - (b) Determination of educational objectives;
 - (c) Selection and presentation of content;
 - (d) Selection of all persons and organizations that will be in a position to control the content of the CME;
 - (e) Selection of educational methods;
 - (f) Evaluation of the activity.
- 1.2** A commercial interest cannot take the role of non-accredited partner in a joint sponsorship relationship.⌘

STANDARD 2: Resolution of Personal Conflicts of Interest

- 2.1** The provider must be able to show that everyone who is in a position to control the content of an education activity has disclosed all relevant financial relationships with any commercial interest to the provider. The ACCME defines "'relevant' financial relationships" as financial relationships in any amount occurring within the past 12 months that create a conflict of interest.
- 2.2** An individual who refuses to disclose relevant financial relationships will be disqualified from being a planning committee member, a teacher, or an author of CME, and cannot have control of, or responsibility for, the development, management, presentation or evaluation of the CME activity.
- 2.3** The provider must have implemented a mechanism to identify and resolve all conflicts of interest prior to the education activity being delivered to learners.⌘

STANDARD 3: Appropriate Use of Commercial Support

- 3.1** The provider must make all decisions regarding the disposition and disbursement of commercial support.
- 3.2** A provider cannot be required by a commercial interest to accept advice or services concerning teachers, authors, or participants or other education matters, including content, from a

commercial interest as conditions of contributing funds or services.

- 3.3** All commercial support associated with a CME activity must be given with the full knowledge and approval of the provider.

Written agreement documenting terms of support

- 3.4** The terms, conditions, and purposes of the commercial support must be documented in a written agreement between the commercial supporter that includes the provider and its educational partner(s). The agreement must include the provider, even if the support is given directly to the provider's educational partner or a joint sponsor.

- 3.5** The written agreement must specify the commercial interest that is the source of commercial support.

- 3.6** Both the commercial supporter and the provider must sign the written agreement between the commercial supporter and the provider.

Expenditures for an individual providing CME

- 3.7** The provider must have written policies and procedures governing honoraria and reimbursement of out-of-pocket expenses for planners, teachers and authors.

- 3.8** The provider, the joint sponsor, or designated educational partner must pay directly any teacher or author honoraria or reimbursement of out-of-pocket expenses in compliance with the provider's written policies and procedures.

- 3.9** No other payment shall be given to the director of the activity, planning committee members, teachers or authors, joint sponsor, or any others involved with the supported activity.

- 3.10** If teachers or authors are listed on the agenda as facilitating or conducting a presentation or session, but participate in the remainder of an educational event as a learner, their expenses can be reimbursed and honoraria can be paid for their teacher or author role only.

Expenditures for learners

- 3.11** Social events or meals at CME activities cannot compete with or take precedence over the educational events.

3.12 The provider may not use commercial support to pay for travel, lodging, honoraria, or personal expenses for non-teacher or non-author participants of a CME activity. The provider may use commercial support to pay for travel, lodging, honoraria, or personal expenses for bona fide employees and volunteers of the provider, joint sponsor or educational partner.

Accountability

3.13 The provider must be able to produce accurate documentation detailing the receipt and expenditure of the commercial support. ☞

STANDARD 4. Appropriate Management of Associated Commercial Promotion

4.1 Arrangements for commercial exhibits or advertisements cannot influence planning or interfere with the presentation, nor can they be a condition of the provision of commercial support for CME activities.

4.2 Product-promotion material or product-specific advertisement of any type is prohibited in or during CME activities. The juxtaposition of editorial and advertising material on the same products or subjects must be avoided. Live (staffed exhibits, presentations) or enduring (printed or electronic advertisements) promotional activities must be kept separate from CME.

- For *print*, advertisements and promotional materials will not be interleaved within the pages of the CME content. Advertisements and promotional materials may face the first or last pages of printed CME content as long as these materials are not related to the CME content they face and are not paid for by the commercial supporters of the CME activity.
- For *computer based*, advertisements and promotional materials will not be visible on the screen at the same time as the CME content and not interleaved between computer 'windows' or screens of the CME content.
- For *audio and video recording*, advertisements and promotional materials will not be included within the CME. There will be no 'commercial breaks.'
- For *live, face-to-face CME*, advertisements and promotional materials cannot be displayed or distributed in the educational space immediately before, during, or after a CME activity. Providers cannot allow representatives of Commercial Interests to engage in sales or promotional activities while in the space or place of the CME activity.

4.3 Educational materials that are part of a CME activity, such as slides, abstracts and handouts, cannot contain any advertising, trade name or a product-group message.

4.4 Print or electronic information distributed about the non-CME elements of a CME activity that are not directly related to the transfer of education to the learner, such as schedules and content descriptions, may include product-promotion material or product-specific advertisement.

4.5 A provider cannot use a commercial interest as the agent providing a CME activity to learners, e.g., distribution of self-study CME activities or arranging for electronic access to CME activities. ☞

STANDARD 5. Content and Format without Commercial Bias

5.1 The content or format of a CME activity or its related materials must promote improvements or quality in healthcare and not a specific proprietary business interest of a commercial interest.

5.2 Presentations must give a balanced view of therapeutic options. Use of generic names will contribute to this impartiality. If the CME educational material or content includes trade names, where available trade names from several companies should be used, not just trade names from a single company. ☞

STANDARD 6. Disclosures Relevant to Potential Commercial Bias

Relevant financial relationships of those with control over CME content

6.1 An individual must disclose to learners any relevant financial relationship(s), to include the following information:

- The name of the individual;
- The name of the commercial interest(s);
- The nature of the relationship the person has with each commercial interest.

6.2 For an individual with no relevant financial relationship(s) the learners must be informed that no relevant financial relationship(s) exist.

Commercial support for the CME activity.

6.3 The source of all support from commercial interests must be disclosed to learners. When commercial support is 'in-kind' the nature of the support must be disclosed to learners.

6.4 'Disclosure' must never include the use of a trade name or a product-group message.

Timing of disclosure

6.5 A provider must disclose the above information to learners prior to the beginning of the educational activity. ☞



ACCME STANDARDS FOR COMMERCIAL SUPPORTSM

Standards to Ensure the
Independence of CME
Activities

The ACCME Standards for Commercial SupportSM

Standards to Ensure Independence in CME Activities

STANDARD 1: Independence

1.1 A CME provider must ensure that the following decisions were made free of the control of a commercial interest. (See www.accme.org for a definition of a 'commercial interest' and some exemptions.)

- (a) Identification of CME needs;
- (b) Determination of educational objectives;
- (c) Selection and presentation of content;
- (d) Selection of all persons and organizations that will be in a position to control the content of the CME;
- (e) Selection of educational methods;
- (f) Evaluation of the activity.

1.2 A commercial interest cannot take the role of non-accredited partner in a joint sponsorship relationship.⌘

STANDARD 2: Resolution of Personal Conflicts of Interest

2.1 The provider must be able to show that everyone who is in a position to control the content of an education activity has disclosed all relevant financial relationships with any commercial interest to the provider. The ACCME defines "relevant financial relationships" as financial relationships in any amount occurring within the past 12 months that create a conflict of interest.

2.2 An individual who refuses to disclose relevant financial relationships will be disqualified from being a planning committee member, a teacher, or an author of CME, and cannot have control of, or responsibility for, the development, management, presentation or evaluation of the CME activity.

2.3 The provider must have implemented a mechanism to identify and resolve all conflicts of interest prior to the education activity being delivered to learners.⌘

STANDARD 3: Appropriate Use of Commercial Support

3.1 The provider must make all decisions regarding the disposition and disbursement of commercial support.

3.2 A provider cannot be required by a commercial interest to accept advice or services concerning teachers, authors, or participants or other education matters, including content, from a commercial interest as conditions of contributing funds or services.

3.3 All commercial support associated with a CME activity must be given with the full knowledge and approval of the provider.

Written agreement documenting terms of support

3.4 The terms, conditions, and purposes of the commercial support must be documented in a written agreement between the commercial supporter that includes the provider and its educational partner(s). The agreement must include the provider, even if the support is given directly to the provider's educational partner or a joint sponsor.

3.5 The written agreement must specify the commercial interest that is the source of commercial support.

3.6 Both the commercial supporter and the provider must sign the written agreement between the commercial supporter and the provider.

Expenditures for an individual providing CME

3.7 The provider must have written policies and procedures governing honoraria and reimbursement of out-of-pocket expenses for planners, teachers and authors.

3.8 The provider, the joint sponsor, or designated educational partner must pay directly any teacher or author honoraria or reimbursement of out-of-pocket expenses in compliance with the provider's written policies and procedures.

3.9 No other payment shall be given to the director of the activity, planning committee members, teachers or authors, joint sponsor, or any others involved with the supported activity.

3.10 If teachers or authors are listed on the agenda as facilitating or conducting a presentation or session, but participate in the remainder of an educational event as a learner, their expenses can be reimbursed and honoraria can be paid for their teacher or author role only.

Expenditures for learners

3.11 Social events or meals at CME activities cannot compete with or take precedence over the educational events.

3.12 The provider may not use commercial support to pay for travel, lodging, honoraria, or personal expenses for non-teacher or non-author participants of a CME activity. The provider may use commercial support to pay for travel, lodging, honoraria, or personal expenses for bona fide employees and volunteers of the provider, joint sponsor or educational partner.

Accountability

3.13 The provider must be able to produce accurate documentation detailing the receipt and expenditure of the commercial support. ☞

STANDARD 4. Appropriate Management of Associated Commercial Promotion

4.1 Arrangements for commercial exhibits or advertisements cannot influence planning or interfere with the presentation, nor can they be a condition of the provision of commercial support for CME activities.

4.2 Product-promotion material or product-specific advertisement of any type is prohibited in or during CME activities. The juxtaposition of editorial and advertising material on the same products or subjects must be avoided. Live (staffed exhibits, presentations) or enduring (printed or electronic advertisements) promotional activities must be kept separate from CME.

- For *print*, advertisements and promotional materials will not be interleaved within the pages of the CME content. Advertisements and promotional materials may face the first or last pages of printed CME content as long as these materials are not related to the CME content they face and are not paid for by the commercial supporters of the CME activity.
- For *computer based*, advertisements and promotional materials will not be visible on the screen at the same time as the CME content and not interleaved between computer 'windows' or screens of the CME content
- For *audio and video recording*, advertisements and promotional materials will not be included within the CME. There will be no 'commercial breaks.'
- For *live, face-to-face CME*, advertisements and promotional materials cannot be displayed or distributed in the educational space immediately before, during, or after a CME activity. Providers cannot allow representatives of Commercial Interests to engage in sales or promotional activities while in the space or place of the CME activity.

4.3 Educational materials that are part of a CME activity, such as slides, abstracts and handouts, cannot contain any advertising, trade name or a product-group message.

4.4 Print or electronic information distributed about the non-CME elements of a CME activity that are not directly related to the transfer of education to the learner, such as schedules and content descriptions, may include product-promotion material or product-specific advertisement.

4.5 A provider cannot use a commercial interest as the agent providing a CME activity to learners, e.g., distribution of self-study CME activities or arranging for electronic access to CME activities. ☞

STANDARD 5. Content and Format without Commercial Bias

5.1 The content or format of a CME activity or its related materials must promote improvements or quality in healthcare and not a specific proprietary business interest of a commercial interest.

5.2 Presentations must give a balanced view of therapeutic options. Use of generic names will contribute to this impartiality. If the CME educational material or content includes trade names, where available trade names from several companies should be used, not just trade names from a single company. ☞

STANDARD 6. Disclosures Relevant to Potential Commercial Bias

Relevant financial relationships of those with control over CME content

6.1 An individual must disclose to learners any relevant financial relationship(s), to include the following information:

- The name of the individual;
- The name of the commercial interest(s);
- The nature of the relationship the person has with each commercial interest.

6.2 For an individual with no relevant financial relationship(s) the learners must be informed that no relevant financial relationship(s) exist.

Commercial support for the CME activity.

6.3 The source of all support from commercial interests must be disclosed to learners. When commercial support is 'in-kind' the nature of the support must be disclosed to learners.

6.4 'Disclosure' must never include the use of a trade name or a product-group message.

Timing of disclosure

6.5 A provider must disclose the above information to learners prior to the beginning of the educational activity. ☞

Exhibit D

ACPE Letter of Accreditation



cc: Susan Pantrell

ACCREDITATION COUNCIL FOR PHARMACY EDUCATION
20 North Clark Street, Suite 2500 • Chicago, Illinois 60602-5109 • www.acpe-accredit.org
312/664-3575 • FAX 312/664-4652

January 19, 2004

FEB - 4 2004

Barbara Hammonds
American Society of Health-System Pharmacists
7272 Wisconsin Avenue
Bethesda, MD 20814

Dear Ms. Hammonds:

During its January 2004 Board of Directors meeting, the Accreditation Council for Pharmacy Education reviewed American Society of Health-System Pharmacists's Petition for Continued Accreditation for purposes of considering renewal of accredited provider status. The Council's decision is provided in the official copy of the Council's Action and Recommendations (enclosed).

The Council's accreditation action, which includes terms and conditions, dates for submission of future reporting, and comments and recommendations for improvement should be carefully reviewed.

If you have any questions regarding this action or these comments and recommendations, or if I may be of assistance, please do not hesitate to contact me.

Sincerely,

Handwritten signature of Dimitra V. Travlos in cursive.

Dimitra V. Travlos, Pharm.D., BCPS
Executive Assistant Director

Handwritten signature of Dawn G. Zarembski in cursive.

Dawn G. Zarembski, Pharm.D., BCPS
Executive Assistant Director

Enclosure

cc: Mr. Charles Myers

AMERICAN COUNCIL ON PHARMACEUTICAL EDUCATION

**Continuing Education
Provider Accreditation Program**



**Accreditation Action and Recommendations
After Review of a Petition for Continued Accreditation**

January 2004

**American Society of Health-System Pharmacists
Provider Number: 204**

American Society of Health-System Pharmacists

I. Introduction

The American Council on Pharmaceutical Education reviewed the Petition for Continued Accreditation of American Society of Health-System Pharmacists at its January 2004 meeting. This review was based upon due consideration of the Provider's Self-Assessment Report, internal staff and external field reviews, participant feedback, and other communications received from the Provider.

II. Accreditation Action

Following discussion of the program, it was the decision of the Board of Directors that American Society of Health-System Pharmacists be (note checked category below):

- continued as an ACPE-accredited provider of continuing pharmaceutical education. The accreditation term extends for six years (January 31, 2010) with an Interim Report due October 1, 2006. The Interim Report serves as an update on specific issues that were identified in the Provider's Petition for Continued Accreditation.
- continued as an ACPE-accredited provider of continuing pharmaceutical education. The accreditation term extends for one year (January 31, 2005) at which time a Progress Report will be due on October 1, 2004. A Progress Report is submitted by Providers who have a shortened term of accreditation and serves as the basis for the Board to act to continue recognition as an ACPE-accredited provider.

The Provider will be included and its accreditation status will be designated on ACPE's website, www.acpe-accredit.org shortly after the January 2004 meeting.

Exhibit E

ACCME Certificate of Accreditation



Accreditation Council for Continuing Medical Education

comprised of

The American Board of Medical Specialties • The American Hospital Association
The American Medical Association • The Association for Hospital Medical Education
The Council of Medical Specialty Societies • The Federation of State Medical Boards of the U.S., Inc.
The Association of American Medical Colleges

certifies that

American Society of Health-System Pharmacists

*has fulfilled the accreditation requirements set forth by
the Accreditation Council for Continuing Medical Education
and is hereby accredited as a provider of continuing medical education for physicians.*

Murray Kopelow, MD, MS, FRCPC

Date of Decision March 30, 2008

Expiration of Term March 2012

Exhibit F

AHFS Drug Information - COI and Disclosure Policy



19 January 2010

[Home](#)
[Products & Services](#)
[Support](#)
[Off-label Uses](#)
[About AHFS](#)
[Contact Us](#)

Off-label Uses

Supporting Documents
Overview
Editorial Independence
Review Process
Conflict of Interest & Disclosure Policy
Expert Review Committee Members
Levels of Evidence
Oncology Final Determinations


[Site Map](#)

AHFS Conflict of Interest and Disclosure Policy

The mission of AHFS is to provide an evidence-based foundation for safe and effective drug therapy. Information published in the AHFS DI compendium, including specific information on off-label uses, helps to shape treatment decisions made by clinicians and influences public and private healthcare policy and decisions. As a result, it is important that the information be authoritative, objective, and free of undue influence from drug sponsors (e.g., pharmaceutical manufacturers, sellers), health insurers, pharmacy benefit managers, and other third parties who may seek to use the compendium to promote their own vested interests. Editorial decisions are evidence-based and made independent of third parties; final decisions are made solely by the AHFS Editorial Staff, taking into account the advice of expert reviewers. In the case of balloted determinations made by the AHFS Oncology Expert Committee, decisions made through this process will prevail and will not be overturned by the AHFS Staff.

Numerous experts, including physicians, pharmacists, and other professionally qualified individuals, participate in an extramural review process for AHFS. Participation is solicited but voluntary, and no honorarium or other benefit is provided. These experts must provide full disclosure of interest, including any affiliation they have with or financial involvement they have in the sponsor of the drug(s) under consideration and directly competitive products. In the case of balloted determinations made by the AHFS Oncology Expert Committee, conflict of interest disclosure policies follow the definition of a publicly transparent process for identifying potential conflicts of interest as established in Section 414.930(a) of the Code of Federal Regulations (CFR).

Disclosure of Interests by Individuals Substantively Involved in the Oncology Off-label Use Determination Process

All individuals who substantively participate in the development, review, or disposition of an off-label oncology determination of medical acceptance are required to disclose direct and indirect financial interests. All Committee members appointed to the AHFS Oncology Expert Committee are required to complete an initial disclosure form listing all direct and indirect financial interests for themselves, their spouse, and any minor children for the previous 12 months. Prior to each review, those Committee members selected to participate in a particular off-label review are required to update their disclosure information, as well as that of their spouse and any minor children, to identify any potential new conflicts of interests. AHFS staff members who substantively participate in the development, review, or disposition of a compendial recommendation for an off-label oncology use also are required to disclose their own direct and indirect financial interests as well as those of their spouse and any minor children.

Process for Selection of Committee Member Reviewers and Experts

Members of the AHFS Oncology Expert Committee have been identified as experts through their affiliated professional organizations, which include the American Society of Health-System Pharmacists (ASHP), Association of Community Cancer Centers (ACCC), American Society of Clinical Oncology (ASCO), Hematology and Oncology Pharmacist's Association (HOPA), and Oncology Nursing Society (ONS), and review by AHFS staff of submitted credentials. Individual Committee members are selected to participate in the review of an off-label use on a rotating basis. However, at the discretion of the AHFS staff, specific individuals may be selected based on their area of expertise. The AHFS staff screens all the initial disclosure information for the AHFS Oncology Expert Committee and selects those committee members who do not have any direct or indirect conflicts of interest of their own or involving their spouse or minor children related to the specific off-label use being reviewed. Conflicts of interest are evaluated by AHFS staff not only as they relate directly to the sponsor, organization, or affected firm, but also are considered in the context of the interests relating to a potential competitor. Relevant conflicts of interests are those with a potential to result in a direct and predictable impact on a financial interest as a result of a final determination of medical acceptance.

- Committee members who have disclosed direct or indirect financial interests involving themselves, their spouse, or any minor child in an amount exceeding \$50,000 that are relevant to the particular off-label use under consideration are not allowed to participate in the determination process.
- Committee members who have disclosed direct or indirect financial interests involving themselves, their spouse, or any minor child in an amount less than \$50,000 that are relevant to the particular off-label use under consideration are not routinely asked to serve as reviewers, but may be asked to serve in an advisory capacity if their expertise is required; however, they are not able to vote on the final ballot.
- Committee members who have affiliations with a sponsor or organization (i.e., consultant, speakers bureau) that are relevant to the particular off-label use under consideration, or whose spouse or any minor child has such affiliations, regardless of whether they receive any form of monetary compensation, are not asked to serve as reviewers, but may be asked to serve in an advisory capacity if their expertise is required; however, they are not able to vote on the final ballot.

If a Committee member has been identified as having a conflict of interest and it is determined that the particular member's expertise is required, the AHFS staff determines the merits of using the Committee member in an advisory capacity to provide an expert review on the

subject matter. The AHFS staff may elect to grant a waiver indicating the role of the Committee member in an advisory capacity, but will also indicate that there was no participation in the final review or vote by the particular Committee member.

AHFS may choose to use an outside expert in either a consulting role or on an ad-hoc basis to help facilitate the understanding as well as the decision-making of the voting Committee members, especially in cases where there is a lack of expertise amongst the existing Committee members. However, outside consultants do not participate in the review of materials or in the final vote. Outside consultants are required to complete the disclosure form to provide the same information that has been requested of the full Committee members.

Availability of Information on Financial Disclosures and Conflicts of Interests

In accordance with the need for transparency, a conflict of interest statement summarizing the management of recognized conflicts of interest for individuals (e.g., Committee members, consultants, AHFS staff) who substantively participated in the development, review, or disposition of an off-label oncology determination is published with each Final Determination Report.

- If no direct or indirect conflicts for individual committee members or their spouses or minor children have been identified during the screening and selection process, then this is so stated in the final determination.
- If a Committee member has disclosed a relevant financial interest of less than \$50,000 involving self, spouse, or any minor child (see Process for Selection of Committee Member Reviewers and Experts) and is asked to participate in a review in an advisory capacity, the nature of the conflict is summarized in the final determination.
- If the expertise of an outside consultant is required to facilitate understanding and decision-making of the voting Committee members, the nature of any relevant conflict (s) involving the consultant or the consultant's spouse or any minor child is summarized in the final determination.

Additional information pertaining to conflicts of interest for each final determination is maintained and made timely available in response to public requests for a period of not less than 5 years after initial publication of the determination.



American Society of Health-System Pharmacists
7272 Wisconsin Avenue, Bethesda, MD 20814
www.ashp.org

[Copyright](#) | [Privacy Policy](#) | [Trademark](#)

Exhibit G

AHSP BOD Conflict of Interest Policy and FAQ

ASHP Policies on Conflict of Interest, Disclosure, and External Business/Professional Activities of the Board of Directors

I. Background and Assumptions:

ASHP is a non stock corporation governed by Maryland general corporate law. The state statute addresses the legal expectations placed on Boards of Directors. The Directors and other designated Representatives who are deemed to act as official representatives of ASHP are responsible for the direction of the business and professional affairs of ASHP. With this responsibility there are commensurate obligations to ASHP and the ASHP membership. The first obligation is a **Duty of Care**, and this requires the Director to be active in the decision making process, and be informed about the affairs of the organization so that appropriate attention is given to the major business and professional policies of ASHP.

The second obligation is the **Duty of Loyalty** which means the Director acts only and at all times in the best interest of ASHP. The corporation's interest must prevail over individual interests and influences so that conflicts of interest are minimized, and that information gained through service to ASHP is not disclosed or used to one's personal benefit. As part of this Duty there is a legal obligation to provide advanced written disclosure to ASHP of outside interests because certain outside activity of Directors may give rise to concerns or perceptions that the outside activity will: 1) bias or influence the individual's decision making regarding a program, policy or activity under consideration by ASHP, or 2) create an unfair competitive advantage for any individual person or outside organization (hereafter collectively referred to as "conflict of interest").

Since major decisions about ASHP are made by the Board of Directors it is important that individuals with the appropriate level of experience and expertise be available for service to ASHP Directors. It is expected that these individuals will have other concurrent professional and business interests while representing ASHP. Some of these other interests may involve potential or perceived conflicts of interest. It is vital that ASHP and Directors take protective action to manage any potential conflict of interest situations.

The Board of Directors believes that certain assumptions are integral to any policy regarding conflict of interest. First, securing Officers and Directors on behalf of ASHP who have a wide variety of related professional and business experiences furthers the best interests of ASHP. These types of individuals from the profession provide invaluable expertise for policy discussions and corporate transactions. It is recognized that it would be unreasonable to expect individual members of the Board of Directors to forego all outside activity during their terms of office or service to ASHP.

Second, Directors must meet certain professional, ethical and legal standards which, requires them to act objectively, honestly, in good faith, in the best interests and on behalf of ASHP. In order to accomplish the mission and objectives of ASHP Directors will be given access to sensitive business, strategic and proprietary information about ASHP during their time of service. It is expected that access to such information will only be used within the parameters of their activities with ASHP.

II. General Policies and Procedures for Conflict of Interest and Disclosure by the Board of Directors

Given the above background and assumptions the following policies and procedures have been developed for current and future Officers and Directors of ASHP:

1. Officers and Directors are expected to exercise their best judgment to further and protect the best interests of ASHP and the membership; this judgment must be exercised in light of ASHP's mission as well as their experiences, perspectives and expertise.
2. Officers and Directors shall complete the ASHP Disclosure Report Form and the Nondisclosure/Confidentiality Statement, and return both documents to the Corporate Secretary of the ASHP Board. The Disclosure Report Form should disclose any outside activity or interest of a personal, financial, business, or other nature which might create a bias or conflict of interest with ASHP, whether or not the individual believes that a conflict or bias will develop. The Corporate Secretary of ASHP shall circulate copies of all the annual disclosures to the Board of Directors for consideration and action (if any), and shall make the occurrence of those disclosures a matter of official record.

In addition to the annual completion of the "Disclosure Report Form" Directors are to keep the Board updated at other meetings (e.g. Executive Sessions) of the Board of relevant activities not previously disclosed to the Board. The duty to disclose conflicts of interest is an ongoing one, and any changes in information reported by the Director on the Disclosure Report Form or any new information should be reported promptly to the Corporate Secretary or the Chair of the Board of Directors

3. As to any specific matter under consideration by Board or other deliberative body of ASHP, the Corporate Secretary or individual Director shall raise the possibility, that a potential for bias or conflict of interest may exist, and advise the Chair of the Board and the Corporate Secretary of ASHP. The Chair shall, after discussion with the Director, determine if a probable conflict of interest or bias may exist, and require appropriate action of the Director.
4. An Officer or Director with a conflict of interest or bias shall not vote on matters where the conflict or bias is applicable. They should not participate in discussions as advocates on matters affecting their own interests at Board meetings or informally through private contacts, but may respond to requests for factual information needed to reach an informed decision. In addition, in some situations a Director who is determined to have a conflict of interest should not be present at a meeting in order to avoid inhibiting free discussion of the matter.

Disclosure of the existence of specific conflict of interest and nonparticipation in debates and votes shall be noted in the minutes.

5. Other ASHP members acting on ASHP's behalf (other than Officers and Directors) may be required to disclose in a written form to the Corporate Secretary, prior to the commencement of service for ASHP, the existence of any outside activities which might create a conflict of interest during service to ASHP.
6. The legal and professional standards which apply to Officers and Directors are also deemed to apply to the ASHP staff and agents of ASHP.

7. Conflict of interest and disclosure is an evolving concept and as such it is advisable for this policy and related documents to be reviewed every 2-3 years to assure that the documents are reflective of current practices. It is recommended that the Immediate Past President of ASHP lead this review.

III. Other Specific Policies for ASHP Board of Directors Relating to External Professional and Business Activities

It is recognized that members of the ASHP Board of Directors (Directors) may need further direction (which are distinctive from other elected positions at ASHP) in handling potential conflicts of interest situations when individual Directors are participating in professional and business activities external to ASHP. The following policies have been adopted by the ASHP Board to more specifically guide Directors in fulfilling their Board and fiduciary responsibilities at ASHP.

1. Members of the ASHP Board of Directors have legal obligations related to duty of care and duty of loyalty, as defined by Maryland State law, and are bound by these obligations, as well as other professional/ethical standards of conduct when they become a Director. A Director must act only in the best interest of ASHP as a corporation and its membership, and should be cognizant of their obligation to represent ASHP positively even when they are acting outside their official duties.
2. Members of the Board should not benefit financially solely as a result of their position on the Board. A Director may not use or disclose confidential or proprietary information obtained through service to ASHP for personal or professional advantage.
3. Members of the Board, as a general rule, should avoid acceptance of honoraria or other remuneration which come directly from ASHP or any of its Divisions or business units. However, when honoraria are offered then such honoraria should be directed to the ASHP Foundation.
4. Members of the Board, as a general rule, should avoid entering into contractual arrangements with ASHP for traditional publishing and similar opportunities during their term on the Board of Directors.
5. Members of the Board should avoid direct participation in ASHP educational activities and programs as faculty, moderator, writer or presenter while a member of the Board. Participation in other external business or educational programs may be permissible as long as ASHP will be not be harmed financially or in any other tangible form by the Director's participation in these external activities. Outside activities should not give rise to concerns or perceptions that the outside activities are competing with ASHP products, services and other membership activities.
6. Members of the Board should avoid the receipt of remuneration, gifts, gratuities or other favors from entities or organizations outside ASHP that could influence (or be perceived as attempting to influence) an individual Board Member's judgment or decision making at ASHP.

7. Members of the Board should postpone professional consulting arrangements and participation on advisory panels while a member of the Board unless they are unrelated to ASHP activities, programs or professional policies.
8. When a member of the Board engages in external professional or other business activities it must be clearly disclosed to the audience who they represent (or do not represent) in the activity in order to minimize any misunderstandings or misperceptions by the audience. This duty to disclose does not apply to external activities that are unrelated to ASHP and the practice of pharmacy, or activities that are within the normal scope of your current employment.
9. Members of the Board when considering participation in a professional outside activity should take into account the perceptions of the audience. If the Director believes the perception of the audience, even with a disclosure, is not likely to be altered by the disclosure the Director should decline participation in the external activity.
10. Members of the Board when representing and/or traveling to a meeting or other event at the expense of ASHP should expect to be available and visible during the meeting hours for various ASHP assignments and other duties, and should curtail their participation in other external activities during these times.
11. Members of the Board that have questions about their external professional and business activities that are not addressed by these policies should refer their questions to the Chair of the Board and the Executive Vice President of ASHP, and may be referred to the full Board as appropriate.

The Board agreed to the Disclosure Report Form on 4/23/01 and Nondisclosure/Confidentiality Statement (Appendix A).

Approved by the Board on August 22, 2007 (including FAQ)

FREQUENTLY ASKED QUESTIONS: ASHP CONFLICT OF INTEREST POLICY

Introduction: The purpose of this FAQ is to provide further interpretation of the official *ASHP Policies on Conflict Of Interest, Disclosure, and External Business/Professional Activities of the Board of Directors*.

1. What is the current procedure for handling ASHP Board members' disclosure of outside activities and potential conflicts of interest while a member of the Board of Directors?

Board policies relating to conflict of interest are given to potential candidates considering elective office for the ASHP Board of Directors as part of the informational packet they receive prior to running for office. After a person is elected to the Board of Directors they are given a confidentiality/nondisclosure statement to sign and a Disclosure Report form to complete. Board members-elect complete these documents and review them with the Board in September. The full Board of Directors completes this disclosure form every April. These disclosures are copied and distributed to all Board members and discussed for potential conflict of interest in executive session. There is an ongoing obligation to disclose and review with the Board potential conflict of interest situations. After this time, if potential conflicts of interest arise it can be discussed at subsequent executive sessions of the Board throughout the year. In between Board meetings, if a situation or opportunity arises which might be a potential conflict of interest, an individual Board member should promptly call the Chair of the Board and the Executive Vice President in order to discuss and receive direction on the matter.

Some organizations have separate compliance officers and/or a compliance committee to handle conflict of interest questions and related situations, but given the history and culture of the ASHP Board it has been the practice to have the Board as a whole handle these matters. This approach has worked well, and fosters a high level of trust and team work among Board members.

2. What is "conflict of interest" for the purpose of disclosure by ASHP Board members?

As a general proposition a "conflict of interest" may be defined as a personal interest or situation which may influence a decision for the organization (*Managing Conflicts of Interest: A primer for Nonprofit Boards, 2006*). These situations may be financial or non financial. In the *ASHP Policy on Disclosure of Outside Interests*, conflict of interest is defined as follows:

Certain outside activity of Directors may give rise to concerns or perceptions that the outside activity may: 1) bias or influence the individual's decision making regarding a program, policy or activity under consideration by ASHP, or 2) create an unfair competitive advantage for any individual person or outside organization (hereafter collectively referred to as "conflict of interest").

The definition of conflict of interest is by its nature imprecise and is very much subject to the specific facts and circumstances. What is important for Directors to understand is that decisions and actions by Directors are to be based on "disinterested" judgment. Under Maryland corporate law (MD Code §2-419) this concept is an integral part of the Duty of Loyalty and is interpreted to mean that an ASHP Director must act only and at all times in the best interest of the corporation. ASHP's interest must prevail over individual interests, biases and external influences. It is important to remember that all conflict of interest cannot be avoided, but they can be managed appropriately so that decisions and actions by the Board of Directors are protected.

3. ASHP Directors receive many invitations to speak at ASHP affiliated state societies and other health care related entities when they are on the Board. How should these invitations be handled?

It is expected that Board members will be asked to speak at ASHP affiliate state society meetings. This is a positive activity for ASHP because it provides the opportunity to share priorities and policies of ASHP with our affiliated state societies while at the same time receiving feedback from our members and others at the state level. Sometimes these invitations come directly to ASHP, and other times they are made directly to a specific Board member. When these invitations are made the ASHP Affiliate Relations Division should be contacted so that the topic and handling of expenses can be discussed in advance. Depending on the circumstances travel expenses may be paid by ASHP or the affiliated state society. Any honorarium received by a Board member is to be directed to the ASHP Research and Educational Foundation unless prior discussion and approval is received from the Chair of the Board and Executive Vice President.

For ASHP meetings, Board members should not accept speaking invitations involving the educational program or exhibiting companies. Board member time and responsibilities are usually very tight, and Directors need to be available to represent ASHP and the Board of Directors.

If a Director receives an invitation to speak at other pharmacy or health related organizations these invitation should be reviewed in advance with the Chair of the Board and the Executive Vice President of ASHP before accepting such an engagement.

4. How should a Board member handle an invitation or request to become a Board member of a pharmaceutical company, medical device corporation or other type of entity with potential interests in ASHP activities, policies and/or programs?

As a Director on a corporate board an individual has a fiduciary obligation to represent that corporation by making informed and unbiased decisions and acting only in the best interest of the corporation. It is inappropriate for an ASHP Board Member to serve concurrently on another board that may have common or overlapping interests with ASHP because there is a potential for decision making to be influenced and loyalties compromised. It is difficult for any board member to carry out their fiduciary obligations when serving multiple masters. In this situation the possibility for conflict of interest (including perceptions) is high, and disclosure, recusing oneself from certain discussions and not voting does not eliminate or sanitize the conflict of interest.

5. How should a member of the ASHP Board of Directors handle a request to provide pharmacy consulting services to a health care entity or other third party about a professional matter?

Prior to being elected to the Board of Directors, some Directors as part of their practice provide fee based consulting services, or serve on industry advisory panels for external corporations on specific aspects of pharmacy practice or drug therapy management. Election to the ASHP Board means new responsibilities and obligations to ASHP. Due to their level of professional experience Board Members often receive requests to serve on advisory panels or act as consultants to the pharmaceutical and medical device industries, but given today's close scrutiny of the behavior and decision making of corporate boards, Board Members should not participate in these advisory opportunities (e.g. drug company advisory panels) while a member of the ASHP Board in order to minimize actual and/or perceived conflicts of interest.

If a Board member has an established history of engaging in certain consulting activities which directly involve third parties that may have an interest in ASHP's programs, publications and professional policies, and it is within their scope of employment the Board member may be able to continue these

opportunities while serving as an ASHP Board member provided that the consulting arrangement is structured through the employing institution/entity of the Board member, and all fees go to the employing institution. With any consulting arrangements it is essential that an ASHP Director represent him/herself as an individual practitioner and their opinions as their own or their institutions.

When any of these opportunities arise, the Director should first discuss the situation with the Chair of the ASHP board and the EVP of ASHP for appropriate direction.

6. Should a member of the Board accept a publishing opportunity from ASHP or another publisher while a member of the Board?

As a general proposition members of the Board should refrain from participating in ASHP or other pharmacy related publishing projects until they have finished their term of office on the Board. This policy minimizes potential conflicts of interest relative to Board decisions about ASHP publication or educational activities. Also, it is important to avoid any perceptions of a conflict of interest to ASHP members or other third parties that an individual Board member is receiving opportunities and benefiting financially by virtue of their elected position and service on the Board of Directors.

However, it may be appropriate on certain occasions for a Board member to be actively involved with an ASHP publishing project and receive a fee if they have an expertise which cannot be reasonably secured from another source. Also, if the Board member has a long standing history, prior to being elected to the Board, with a specific ASHP publication or program activity the Board member may continue their involvement with this publication and accept payments for the project. Any such arrangement must be handled at “arms length” through the standard ASHP contracting process. For these types of projects the Board member decides whether to direct these payments to the ASHP Foundation while on the Board.

7. Are there policies for ASHP staff which address conflict of interest situations?

ASHP staff conduct is a management issue under the purview of the Executive Vice President of ASHP. Further, the behaviors of staff are subject to the ASHP *Conditions of Employment, Personnel Handbook, Internal Policies and Procedures*, and the statement on *Editorial Independence of AHFS Drug Information*. These policies are reviewed and revised on a regular basis so that they are consistent with Board policies.

Approved by the ASHP Board of Directors: August 22, 2007



Confidentiality and Nondisclosure Statement

This Confidentiality and Nondisclosure Statement is made as of the ____ day of _____ by _____ ("Representative"). The undersigned agrees as follows with respect to disclosures made by the American Society of Health-System Pharmacists (ASHP) to me of certain information:

1. As an Officer, Director of the ASHP Board, and/or other Volunteer Representative of ASHP, I understand that I must comply with certain professional and legal standards in order to act in the best interests of ASHP and its membership. And that in the course of carrying out my respective ASHP duties and responsibilities, I have access to confidential and/or proprietary information (Confidential Information or Information) concerning ASHP. I have an obligation to avoid disclosure of this Information to third parties.
2. I agree that Confidential Information shall include all information that has, or could potentially have, value in the activities, programs, business or prospective businesses or activities of ASHP, and that if disclosed to third parties, could prejudice the ability of ASHP to conduct its business and membership activities successfully.
3. I agree to keep all of the Information in strictest confidence, and not to disclose any of this Information to any third parties, nor to use any of the Information for any purpose other than ASHP business and membership activities.
4. I understand that I may disclose Confidential Information to other ASHP Directors, Officers, employees, agents, financial, legal consultants and other advisors who have a need to know the Confidential Information, but only to the extent which is permitted by law, ASHP, or is necessary to carry out ASHP business, programs or activities.
5. At such time when I am no longer a Representative of ASHP, regardless of the reason, I understand that I shall not be relieved of the obligations with respect to the confidentiality or nondisclosure of the Information, and such obligation shall expressly survive the termination of my responsibilities with ASHP.

I have read and understand the above conditions regarding ASHP Confidential Information, and agree that my signing of this statement indicates that I will abide by these terms.

Name: _____

Signature: _____

Date: _____



TO: **Henri R. Manasse, Jr.**
 Secretary, Board of Directors

FROM: _____

SUBJECT: **Disclosure Report**

DATE: _____

Having read and understood the "ASHP Policy on Disclosure of Outside Activities," and the "ASHP Policy on External Professional and Business Activities," I hereby make the following disclosure pursuant to those policies. I understand that disclosure is a continuing obligation and that in addition to the annual completion of this form I will keep the Board updated at other meetings of the Board, and make additional disclosures in accord with Board policies.

1. List any health-related board, advisory panel, regulatory body, office, committee or programs which you have participated in during the past 12 months (include the name of the entity, the position held).

Company/Agency	Activity/Service
_____	_____
_____	_____
_____	_____

2. List any health-related publications, or products, excluding ASHP publications/products, which you contributed to in the past 12 months that might raise concerns that such outside activities are competing with ASHP products, services or other membership activities.

3. List any grants received during the past 12 months, including name of granting entity and purpose and/or scope of grant.

Organization	Grant Purpose/Scope
_____	_____
_____	_____
_____	_____
_____	_____

4. List the sources for scholarships, awards, gifts, honoraria, monies or other benefits, which exceed \$10,000 or ten percent of your gross annual income, received during the past 12 months from activities, services, retainers or consultancies (include the name of the paying entity, and a description of your service) that might give rise to a conflict of interest with ASHP.

Organization

Service/Activity

5. Describe, to the best of your knowledge, any financial interest which exceeds ten percent of your gross annual income or a ten percent equity interest, or other significant interest of yourself or an immediate family relative, such as a spouse, child or parent, in any outside activity or entity which does substantial business with or is in direct competition with ASHP.

6. Describe, to the best of your knowledge, any other transactions or actions in the past 12 months in which you or an immediate family member has a personal interest or in which you competed, directly or indirectly, with the interests of ASHP.

Name

Signature

Date

Revision Approved by Board of Directors April 24, 2001

Exhibit H
ASHP Personnel Handbook

Welcome to: Staff Members

From: Henri R. Manasse, Jr., Ph.D., Sc.D.
 Executive Vice President/Chief Executive Officer

On behalf of the Officers and Board of Directors of the American Society of Health-System Pharmacists, I welcome you to the ASHP team.

Our work here is extremely rewarding because everything we do is focused on our mission, which is to “advance and support the professional practice of pharmacists in hospitals and health systems and serve as their collective voice on issues related to medication use and public health.” How do we meet this challenging goal? It’s through teamwork—with each other and with our members.

The Society was founded in 1942 with 154 charter members, and the organization operated without a paid staff until 1960. Today, we have over 30,000 members, a staff of approximately 200 and a budget that exceeds \$43 million—all figures that make us stand out in the association world.

In short, you have joined a successful team involved in an important mission. I trust that you will find ASHP a creative environment in which to make your own contributions.

Please familiarize yourself with the information in this handbook, and keep it for future reference. If you have any questions, don't hesitate to contact the Human Resources Division.

Best of luck and, again welcome to the team!

AMERICAN SOCIETY OF HEALTH-SYSTEM PHARMACISTS (ASHP)
EMPLOYEE HANDBOOK

TABLE OF CONTENTS

1.00	Your ASHP Personnel Handbook
1.01	Employment at Will
2.00	ASHP Background and Structure
2.01	What is ASHP?
2.02	Who Are ASHP Members?
2.03	Organizational Chart(s)
3.00	Employment Policies
3.01	Equal Employment Opportunity
3.02	Sexual Harassment Policy
3.03	Nonsmoking Policy
3.04	Outside Employment and Application
3.05	Hours of Work
3.06	Confidential and Proprietary Information
3.07	Electronic Communication Systems
3.08	Dress Code
3.09	Office Security
3.10	Americans with Disability Act Amendments Act of 2008
3.11	Whistleblower Protection Policy
3.12	Alcohol and Drug Policy
4.00	Employment Practices
4.01	Classification of Employees
4.02	Internal Posting System for Open Positions
4.03	New Hire Orientation
4.04	Initial Employment Period
4.05	Personnel Records
4.06	Position Descriptions
4.07	Performance Reviews
4.08	Resignation
4.09	Exit Interviews
4.10	Retirement
4.11	Official Travel
4.12	Emergency Guidelines
4.13	Lunchroom

- 5.00 Compensation
 - 5.01 Payroll
 - 5.02 Employee Pay Vouchers (Earnings Statements)
 - 5.03 Payroll Advances
 - 5.04 Overtime
 - 5.05 Holidays

- 6.00 Benefits
 - 6.01 Group Insurance Programs
 - 6.02 COBRA
 - 6.03 Retirement Programs
 - 6.04 Pre-Tax Benefit Plan
 - 6.05 Credit Union
 - 6.06 Tuition Reimbursement
 - 6.07 Employee Certification Reimbursement Program
 - 6.08 Sport & Health

- 7.00 Leave
 - 7.01 Leave Eligibility
 - 7.02 Leave Classification
 - 7.03 Vacation Leave
 - 7.04 Sick Leave
 - 7.05 Personal Leave
 - 7.06 Inclement Weather
 - 7.07 Military Leave
 - 7.08 Bereavement Leave
 - 7.09 Family and Medical Leave Act and Maryland Flexible Leave Act
 - 7.10 Leave Without Pay
 - 7.11 Jury Duty

Section 1.00

Your ASHP Personnel Handbook*

This handbook is designed to familiarize you with ASHP and to furnish information that is important to you as an ASHP staff member. It provides a general overview of the Society and outlines matters that will affect your employment.

The information herein is intended to serve as a guide only and is not to be a contract of employment. ASHP reserves the right to change, modify, amend, or delete information discussed in this handbook, as is the case with any policy or practice at ASHP, published or unpublished. ASHP retains the right to do so at its sole discretion, without prior notice, without inserting any such changes in this handbook, and without providing a reason for changes.

We have tried to present this material in a brief but comprehensive manner; however, if you need clarification on any point, please contact the Human Resources Division.

** ASHP also has a Policies and Procedures Manual which provides additional detail about many internal operational matters, such as organizational structure, information systems, travel, external communications, visitors and other ASHP activities. All staff members are to familiarize themselves with the content of this document, which is located on the ASHP Intranet.*

Section 1.01

Employment at Will

All ASHP staff members, except the Executive Vice President/Chief Executive Officer, are employed "at will." This means that either the staff member or the employer (ASHP) may terminate the employment relationship at any time, for any lawful reason. Accordingly, ASHP has the right to discipline and/or terminate any staff member for any lawful reason including, but not limited to, less than satisfactory work performance, theft, excessive absence, tardiness, insubordination, and illegal conduct.

Nothing in this handbook creates an express or implied contract of employment, nor is it an enforceable promise of continued employment. Any statements or actions indicating otherwise by any person are outside the scope of his or her authority and are null and void. Your continuing as an employee constitutes your understanding of this policy of employment "at will."

Section 2.00

ASHP Background and Structure

Section 2.01

What Is ASHP?

ASHP is a **30,000 member** national professional association representing pharmacists who practice in inpatient, outpatient, home-care, and long-term-care settings, as well as pharmacy students and technicians.

Our Mission & Vision

ASHP believes that the mission of pharmacists is to help people make the best use of medicines. The **mission of ASHP** is to advance and support the professional practice of pharmacists in hospitals and health systems and serve as their collective voice on issues related to medication use and public health.

ASHP's Vision for Pharmacy Practice in Hospitals and Health Systems envisions pharmacists in hospitals and health systems in roles that enhance patient health through better medication use, develop integrated practice that expands pharmacists' responsibilities, and enhance the public image of pharmacists.

History

ASHP was founded on August 21, 1942, as an outgrowth of the subsection on hospital pharmacy of the American Pharmacy Association (formerly known as American Pharmaceutical Association). The Society opened its first full-time office in 1960 in Washington, DC, and moved to Bethesda in 1966. To accommodate an expanding staff, in 1992 the Society moved to larger quarters in its current location.

Major Activities

The major purpose of ASHP is to ensure high-quality professional pharmacy practice in hospitals and health-systems so pharmacists in those settings can help people make the best use of their medicines. As an organization, we provide a wealth of valuable services to our members; provide continuing education; accredit pharmacy residency programs; publish books, a scientific journal, and computer software; and represent the interests of our members to government and other health care groups.

Among our publications and programs are the *AHFS Drug Information*, the *American Journal of Health-System Pharmacy (AJHP)*, *ASHP Intersections* (a membership magazine), **CareerPharm** (job recruitment program), **ASHP Advantage** (customized education), and a variety of other special activities of interest to pharmacists, other healthcare providers, and consumers.

ASHP conducts two national education and exhibit conferences each year, as well as a series of specialized continuing-education programs. The Midyear Clinical Meeting, held each December, has grown to become the largest meeting of pharmacists in the world. The Summer Meeting, where the House of Delegates addresses the professional policies of ASHP, is held in June.

Section 2.02

Who Are ASHP Members?

ASHP members are pharmacists and pharmacy technicians who practice in inpatient, outpatient, home-care, and long-term-care settings, as well as pharmacy students.

ASHP began as an organization of hospital pharmacists, and while the majority of our members continue to practice in hospitals, their roles and practice sites have expanded considerably.

Pharmacists in hospitals and health systems are experts on medications, how each one works in the body, and how to use each one safely and effectively. They:

- Advise physicians, nurses, and other medical staff on new drugs, effective therapies, and the selection and administration of medications,
- Perform critical quality checks to detect and prevent harmful drug interactions, adverse reactions, and mistakes,
- Counsel patients and their families about proper medication use,
- Monitor patient responses to medications to make sure the drug is working correctly,

- Prepare the powerful injectable medications used for cancer treatment,
and
- Conduct wellness and disease prevention programs to help manage
high-risk conditions like diabetes, asthma, or high blood pressure.

Section 2.03

Organizational Chart(s)

The most current version of ASHP's organizational chart may be accessed on ASHP's Intranet: <http://intranet>, click on Pubs→Docs→Forms, scroll down to Human Resources Organizational Charts; click on ASHP Organization Chart.

Section 3.00

Employment Policies

Section 3.01

Equal Employment Opportunity

We have a strong policy supporting equal employment opportunities and do not tolerate any type of unlawful discrimination. ASHP does not discriminate against any staff member or applicant because of race, color, religion, national origin, age, gender, sexual preference, **gender identity**, marital status, pregnancy, parenthood, political affiliation or any other protected status. Further, ASHP does not discriminate against qualified persons who have special needs or disabilities. This applies to recruitment, hiring, promotion, rate of pay, job assignments, benefits and all other work-related issues. ASHP makes every effort to ensure that staff and applicants are treated in compliance with this policy, which conforms with federal law and Maryland anti discrimination laws designed and implemented "to secure an end to discrimination for any reason other than individual merit."

Any staff member, who believes that he or she has been subject to, or has witnessed, a prohibited, discriminatory act, is encouraged to report it immediately, in confidence, to the Director of Human Resources or a Corporate Group member.

Section 3.02

Sexual Harassment Policy

Introduction

ASHP is committed to fostering a collegial work environment in which all individuals are treated with respect and dignity. Accordingly, acts of sexual harassment will not be tolerated. Sexual harassment is defined as unwelcome sexual advances, requests for sexual favors, and other verbal or physical conduct of a sexual nature when: (1) submission to such conduct is made either explicitly or implicitly a term or condition of employment; (2) submission to or rejection of such conduct is used as the basis for employment decisions; or (3) such conduct has the purpose or effect of unreasonably interfering with an individual's work performance or creating an intimidating, hostile, or offensive work environment.

Depending upon the circumstances, examples of sexual harassment could include:

- Physical contact, such as touching, hugging, kissing, rubbing or massaging someone's neck or shoulders, pinching, stroking someone's hair, or intentionally brushing against another's body;
- Whistling in an offensive manner;
- Leering or stalking;
- Offensive comments, jokes, or gestures of a sexual nature;

- Unwelcomed sexual flirtation, advances or propositions;
- Suggestive or sexually-explicit posters, calendars, photographs, graffiti, or cartoons;
- The demand for sexual favors, particularly, but not only, in exchange for job benefits or job enhancements;
- Sending e-mails containing offensive sexual content or using the Society's access to the Internet in a manner that is offensive and unreasonably interferes with the work of other employees.

The list above is not exhaustive, but is intended to provide examples of conduct that could constitute sexual harassment, depending on the circumstances. Factors that must be taken into consideration when determining if certain conduct is sexual harassment in violation of this Policy include the frequency, severity, pervasiveness and/or consequences of the actions.

Procedures for Addressing Complaints of Sexual Harassment: Any person who believes that he or she has been subject to such offensive acts or who is aware of any such improper behavior should report it immediately to the Director of Human Resources, or a Corporate Group member.

All complaints of sexual harassment or other prohibited behavior will be promptly investigated. No staff member will be subjected to retaliation or adversely affected in any term or condition of employment as a result of bringing such a complaint or cooperating in its investigation. Any staff member found to have engaged in such prohibited conduct will be subject to appropriate discipline, which may include dismissal. Additionally, an individual who prevents or attempts to prevent another individual from making a complaint, who fails to cooperate with or interferes with the investigation of such a complaint, or who retaliates against an individual who makes a complaint is subject to the disciplinary actions, described in this policy.

ASHP conducts seminars for all staff that addresses these issues. All staff is required to attend.

Section 3.03

Nonsmoking Policy

Smoking is not permitted anywhere in the ASHP office space at 7272 Wisconsin Avenue, including the lunchroom or any employee accessible balcony. This policy is effective at all times, including before and after regular working hours and on holidays and weekends, and applies to ASHP staff, vendors, members and guests.

This policy also extends to ASHP-sponsored social functions at other facilities; smoking is not permitted in the specific rooms where the social function is conducted.

Section 3.04

Outside Employment

ASHP staff may be allowed to engage in outside employment when certain conditions are met. For the purposes of this policy, “outside employment” includes self-employment as well as employment and consulting activities for both public and private entities.

Staff who are contemplating outside employment are required to complete an Outside Employment Application/Agreement form and obtain advanced written approval from their supervisor, respective Vice President and the ASHP Executive Vice President. Staff are not permitted to engage in any outside employment that would adversely affect the satisfactory performance of their primary responsibilities to ASHP and its programs and/or in any way affect the reputation and image of ASHP. The primary commitment of ASHP staff shall remain the fulfillment of their responsibilities to ASHP. Outside employment may only take place outside of the staff member’s normal business hours and responsibilities at ASHP.

Outside employment shall not in any way affect the integrity or reputation of ASHP, nor shall it tend to result in adverse publicity for ASHP. Staff will not be permitted to engage in any outside employment that would tend to compete with or trade on the business of ASHP. Staff engaging in outside employment may not reveal or utilize any of ASHP’s materials, equipment, policies, practices, techniques or programs. Outside employment shall not create any actual or perceived conflict of interest or commitment with ASHP.

ASHP reserves the right to designate that staff holding certain positions may not engage in outside employment. ASHP reserves the right to revoke approval of outside employment or to take disciplinary action if a staff member’s work for ASHP is adversely affected by outside employment or if specific conditions of the outside employment are violated. No outside employment may relate directly to a staff

member's primary responsibilities at ASHP.

The completed Outside Employment Application/Agreement must be forwarded to Human Resources to be filed in the staff member's personnel file.

ASHP Outside Employment Application/Agreement

Application

Name: _____ Date: _____

Position: _____

Division/Office: _____

Please complete this application/agreement and forward it to your supervisor for review. If approved, obtain all of the required signatures and return the completed application/agreement to the Director, Human Resources.

Title and Description of Outside Position:

Name of Organization:

Reason for Requesting Approval of Outside Employment:

Agreement

This agreement, effective _____, is between ASHP and _____ ("Employee").

The position described above will not adversely affect the satisfactory performance of my primary responsibilities to ASHP and its programs and/or in any way affect the reputation and image of ASHP. I understand that my primary commitment shall remain the fulfillment of my responsibilities to ASHP. I also understand and agree that the work I perform for the above organization will only take place outside of my normal business hours and responsibilities at ASHP.

My outside employment position shall not in any way affect the integrity or reputation of ASHP, nor shall it tend to result in adverse publicity for ASHP. The outside position will

not compete with or trade on the business of ASHP. I understand I am not permitted to reveal or utilize any of ASHP's materials, equipment, policies, practices, techniques or programs in the course of my outside employment. I further understand that my outside employment shall not create any actual or perceived conflict of interest or commitment with ASHP.

I understand that ASHP reserves the right to revoke approval of my outside employment or to take disciplinary action if ASHP believes that my work for ASHP is adversely affected by my outside employment or if specific conditions of this outside employment agreement are violated. I further understand that my outside employment position will not relate directly to my primary responsibilities at ASHP.

I have read and agree to follow ASHP's Policy on Outside Employment (Section 3.04).

FOR SUPERVISORS: Please attach a memo stating why you feel that this employee, *is or is not* a good candidate for the requested outside employment.

Employee Signature: _____ Date: _____

Supervisor's Signature: _____ Date: _____

Assistant Vice President's Signature: _____ Date: _____

Vice President's Signature: _____ Date: _____

Approved by:

Executive Vice President and Chief Executive Officer Date: _____

Section 3.05

Hours of Work

In order to maintain an effective and efficient organization, ASHP expects regular attendance and punctuality of all employees. Absenteeism and tardiness place a burden on other employees. Excessive absenteeism and tardiness will not be tolerated and could result in disciplinary actions or dismissal. ASHP expects that employees will be punctual and at work during their scheduled work hours.

ASHP normal business hours are 8:30 a.m. to 5:00 p.m., Monday through Friday with an hour for lunch. The work week is 37.5 hours for full-time staff. Staff may not use the lunch hour on a regular basis to leave an hour early or to make up for arriving at work an hour late. The ASHP front desk is staffed from 8:00 a.m. to 5:30 p.m., Monday through Friday.

Staff may request a working schedule other than 8:30 a.m. and 5:00 p.m. as long as this schedule does not interfere with the business interests or operations of ASHP and is approved in writing by the appropriate supervisor, Division Director, Corporate Staff supervisor and Director of Human Resources. Once these hours are approved, they must be adhered to each day. Approval of the schedule may be revoked at any time and without notice. Telecommuting staff members are expected to be available for communications during the Society's normal business hours.

Recognizing differences in the requirements of the Society and its programs, including the wide interests and geographic base of our members, the Executive Vice President/Chief Executive Officer may prescribe alternate working hours for selected staff when such hours are in the best interests of ASHP.

Section 3.06

Confidential and Proprietary Information

All internal ASHP information, which includes but is not limited to accounting records, correspondence and employment-related data, is confidential and proprietary information of ASHP. All staff, and particularly those who have access to such information in performing their jobs, are expected to treat all such information in a confidential manner. All work prepared by the staff member pursuant to their employment at ASHP is the property of ASHP.

Staff are not authorized to duplicate software programs, electronic or hard files, and any unauthorized duplication is grounds for immediate discipline, up to and including dismissal. Staff are not allowed to keep any back-up copies of work done for ASHP when they leave the Society. Those who wish to have examples of their work must obtain advance written permission from their supervisors to make and keep specific samples. Under no circumstances are staff allowed to keep copies of proprietary or confidential information, data, or programs to use as samples of their work.

Section 3.07

Electronic Communication Systems

Our telephone system, computer hardware and software systems, electronic mail, Intranet and World Wide Web accesses are for ASHP business use only. More detailed policies related to staff use of e-mail and the Internet may be found on the Intranet and in the *ASHP Policies and Procedures Manual* (Policy 4:03 Use of ASHP Electronic Communication Systems). Staff are required to familiarize themselves with these policies. Staff should have no expectation of privacy when using these systems. Personal software is not to be installed onto ASHP hardware or equipment. Violation of the policies related to these electronic systems will be subject to appropriate discipline, which may include immediate dismissal.

Personal Mail

Personal mail (electronic or print) may not be sent using ASHP letterhead logos or envelopes. Under no circumstances is the ASHP postage meter to be used for personal mail; it is for business use only.

All mail (print and electronic) received at ASHP is regarded as official Society business. ASHP assumes no responsibility for personal mail that is addressed to the office.

Section 3.08

Dress Code

The standard dress for ASHP staff at ASHP headquarters is business casual. Reasonable judgment is to be used concerning what is appropriate dress based on anticipated duties for a given day and the general nature of business activities at ASHP. Employees are reminded that ASHP is a professional organization and the work environment, including dress, should reflect a professional image.

Traditional business attire (suits, sport coats, dress shirts, ties, dresses, pant suits, etc.) is to be worn for all interviews with candidates for employment with ASHP.

Staff are permitted to wear jeans to ASHP headquarters each Friday throughout the year. On occasion, offices/divisions have “clean up days” in their respective areas. On these days, staff can also wear jeans. Jeans cannot be too tight, too revealing, and/or too baggy or loose. Jeans must be neat and clean and presentable without holes or fraying. Excessively low-rise jeans and bib overalls are not permitted. Athletic shoes are not permitted at anytime including “clean up days.”

In order to make representatives from other professional associations, the pharmaceutical industry, vendors, or business associates comfortable while attending meetings at ASHP headquarters, staff should inform these guests of

the ASHP dress policy. When representing ASHP at external events, business meetings, or conferences, staff should consult the sponsoring organization to determine appropriate dress.

Common sense should be used in dressing in a manner that is neat, clean, and appropriate in a business and professional setting. The following types of clothing and footwear are examples of what is **not** considered acceptable for ASHP:

- Shorts or short sets
- Leggings or stretch pants
- Excessively low-rise jeans and bib overalls (even on Friday or a “clean up day”)
- Skirts, dresses and tops that are too short or revealing
- Tee-shirts of any type or style, tank tops, cut-off shirts, and sweat shirts
- Sweat suits, jogging suits, and any athletic apparel
- Athletic shoes of any kind including tennis, running, basketball, etc.
- Rubber sandals, flip-flops, beach footwear, or slippers
- Sandals for men

If, in the opinion of a supervisor, a staff member does not adhere to the dress policy, the staff member will be sent home to change. Personal or vacation leave will be charged for this time away from the office.

Employees that have a question or concern about the appropriateness of another employee's dress should bring it to the attention of the appropriate supervisor and/or inform the Human Resources Division.

This policy does not require that staff dress business casual. Staff comfortable with traditional business attire may continue to dress in this manner.

Section 3.09

Office Security

ASHP's offices are located in a public building and people enter and leave at various times throughout the day, night and weekends. Staff should therefore be sensitive to what is going on around them and should exercise caution when entering and leaving the building during non-business hours. ASHP is not responsible for personal property on the premises or in offices that is damaged, lost, or stolen. All personal and ASHP property (with significant value) used by staff in the office should be properly stored and/or locked when not in use.

ASHP provides all staff with DataWatch® access cards for entrance to the secured sections of ASHP space. Staff assume responsibility for these access cards and if lost will be replaced at a cost of \$25.

Every ASHP staff member will be issued a Photo ID badge on their first day of employment. Staff assume responsibility for these Photo ID badges and if lost will be replaced at a cost of \$10. ASHP staff members must wear the badge at all times, in a method or location so it is visible at all times while in ASHP offices, including nights and weekends. Lost Photo ID Badges and/or DataWatch® access cards must be reported to the Human Resources Division immediately.

Section 3.10

Americans with Disability Act Amendments Act of 2008 Policy

The Americans with Disabilities Act Amendments Act of 2008 (ADAAA) makes it unlawful to discriminate in employment against qualified individuals with disabilities. The ADAAA further requires certain employers to reasonably accommodate qualified individuals with disabilities, if it does not create an undue hardship for ASHP. It is the policy of ASHP to comply with all Federal and state laws concerning the employment of persons with disabilities.

It is ASHP's policy not to discriminate against qualified individuals with disabilities in regard to application procedures, hiring, advancement, discharge, compensation, training, job assignments, benefits, leave and other terms, conditions and privileges of employment.

ASHP will reasonably accommodate qualified individuals with a disability. An applicant who can be reasonably accommodated for a job without undue hardship to ASHP, will be given the same consideration for that position as any other applicant.

All staff are required to comply with safety standards. Applicants who pose a direct threat to the health or safety of themselves or other individuals in the workplace, which threat cannot be eliminated by reasonable accommodation, will not be hired. With respect to existing staff who pose a direct threat to the health or safety of themselves or other individuals in the workplace, ASHP will attempt

to reasonably accommodate them; however, if reasonable accommodation is not feasible, then the individual will be placed on appropriate leave until an organizational decision has been made in regard to the staff member's immediate employment situation.

Revised: 2/09

Section 3.11

Whistleblower Protection Policy

It is the policy of ASHP that all directors, officers and employees observe the highest standards of professional and personal ethics in the conduct of their duties and responsibilities. All directors, officers and employees must practice honesty and integrity in fulfilling their responsibilities, and comply with all applicable federal and state laws and regulations (law). It is the responsibility of all directors, officers and employees to report violations or suspected violations of law in accordance with this Whistleblower Protection Policy.

No director, officer or employee who in good faith reports a violation of the law shall suffer harassment, retaliation or adverse employment consequences. Any employee who retaliates against someone who in good faith has reported a violation shall be subject to disciplinary action up to and including termination of employment. This Whistleblower Protection Policy is intended to encourage and enable employees to raise serious concerns within ASHP prior to seeking resolution outside ASHP.

Employees shall be able to share their questions, concerns, suggestions or complaints with someone who can address them properly. In most cases, an employee's supervisor is in the best position to address an area of concern. However, if an employee is not comfortable speaking with their supervisor, they

are encouraged to speak with someone in the ASHP Human Resources Division, or anyone in management whom the employee feels comfortable approaching. Supervisors and managers are required to report suspected violations of law to the ASHP General Counsel, who shall be entrusted with initiating a prompt investigation of all reported violations. Complaints may be submitted on a confidential basis or may be submitted anonymously. Reports of violations or suspected violations of law will be kept confidential to the extent possible, consistent with the need to conduct an adequate investigation. Except with regard to anonymous submissions, the General Counsel will acknowledge receipt of the reported violation, will promptly initiate an investigation and will ensure that appropriate corrective action is taken if warranted by the results of the investigation.

Any employee who files a complaint concerning a violation or suspected violation of the law must act in good faith and have reasonable grounds for believing that the information disclosed is true and constitutes a violation of law. Any allegations that prove unsubstantiated and which prove to have been made maliciously or with knowledge of their falsity will be viewed as serious offenses by ASHP, and will be subject to appropriate discipline including dismissal.

Section 3.12

Alcohol and Drug Policy

Any of the following actions constitutes a violation of this policy and may subject an employee to disciplinary action, including immediate dismissal:

- a. Using, selling, purchasing, transferring, possessing, manufacturing, or storing an illegal drug or drug paraphernalia used with illegal drugs, or attempting or assisting another to do so, while in the course of employment or engaged in a company sponsored activity, on premises, in owned, leased or rented vehicles, or on ASHP business.
- b. Working or reporting to work, conducting company business or being on premises or in a company-owned, leased or rented vehicle while under the influence of an illegal drug, alcohol or in an impaired condition.

Section 4.00

Employment Practices

Section 4.01

Classification of Employees

Regular Full-time Employees

Regular, full-time staff positions have been evaluated to determine which ones are classified as exempt and non-exempt. These classifications are based on criteria for complying with the Fair Labor Standards Act (FLSA) as established by the U.S. Department of Labor. Only non-exempt staff are eligible for overtime pay. (See section 5.04 for overtime policies.)

Part-time Employees

Part-time staff includes all staff who are regularly engaged to work less than 30 hours per week. They may be entitled to a proportionate share of ASHP provided benefits after completing a six-month Initial Employment Period. ASHP reserves the right to designate which staff positions will be filled on a part-time basis and to establish a regular work schedule for these employees. For specific details contact the Human Resources Division.

Part-time staff working consistent hours between 20 hours to 29 hours weekly will receive vacation accrual prorated based on average weekly hours

worked. For example, a part-time employee working consistent 20 hours per week will accrue 2.5 vacation hours each pay.

Temporary Employees

Temporary staff includes workers hired through temporary agencies. Temporary staff are not eligible for health benefits, other types of insurance benefits, pension, or accrued vacation or sick leave. All temporary employees will be paid by their assigned agency.

Change of Status

Part-time or temporary workers who become regular full-time staff members may be eligible for ASHP provided benefits as of the date of their full-time employment.

If a full-time staff member converts to part-time status, the individual, as determined on a case-by-case basis, may be eligible for ASHP provided benefits.

Section 4.02

Internal Posting System for Open Positions

Open positions are announced online on ASHP's Intranet (internal posting). ASHP staff are encouraged to apply for any position for which they are qualified. Staff are to notify their current supervisors if they apply for another position within the Society. To be considered for a different position and division within ASHP, you should have completed one-year's employment in your current position with the Society and not be on probationary status for any reason. If you are changing within the same division, you do not need to wait one year.

Before vacating one position to take another within ASHP, a non-exempt staff member is expected to give at least two weeks' notice and an exempt staff member 4 weeks' notice to his or her current supervisor.

Section 4.03

New Hire Orientation

On the first day of employment, all new staff members report to the Human Resources Division for orientation. Each will have received an employment packet outlining what will be covered during orientation. Before beginning employment at ASHP the staff member should have signed and returned to ASHP the document titled "Conditions of Employment." All employees must complete the U.S. Citizenship and Immigration Services Employment Eligibility Verification form by their first day of employment. If the form isn't completed, the employee will not be permitted to work at ASHP.

New staff is also required to participate in a Vice President orientation, which is usually conducted two times a year. It provides the staff with a broad view of ASHP's relationship with its members, the pharmacy profession and the internal structure and operation of the Society. This program is meant to be supplemental to a division or department orientation.

An orientation on the use of the ASHP network will usually be conducted by a Help Desk staff member during the first week of employment.

Section 4.04

Initial Employment Period

The first six months of employment are considered to be an Initial Employment Period for each new staff member. All provisions of this handbook will apply, unless otherwise noted or amended by ASHP management. After this initial period, both ASHP and the staff member can expect appropriate written notice of termination. ASHP reserves the right to extend this initial period if a new staff member's performance does not meet expectations.

If part-time or temporary staff members should assume full-time status, the Initial Employment Period will be calculated from the effective date of full-time status with ASHP. Any staff member who moves from one position to another within ASHP is again subject to the provisions of the Initial Employment Period.

Section 4.05

Personnel Records

ASHP endeavors to maintain accurate records concerning employment, promotion, compensation, discipline and personal data. Individual personnel records are the property of ASHP and are maintained by the Human Resources Division.

Staff may review and request copies of the information in his or her personnel record by scheduling an appointment with the Human Resources Division. The Human Resources Director or a member of the division will be present during the review. Staff may not remove information from the file and may add information only if it pertains to data in the file. With the assistance of the Human Resources Division and on a need-to-know basis, division directors or supervisors may access the personnel files of their staff but may not revise or remove the contents thereof.

Change of Address and Personal Data

There are certain vital statistics that need to be kept up-to-date to ensure provision of benefits. Staff members are responsible for notifying Human Resources immediately of any changes that might affect their employment.

Section 4.06

Position Descriptions

Each position at ASHP has a written description that sets forth the current duties and responsibilities of the individual at the time of hire. The description includes a summary of the position, an outline of the responsibilities and the essential functions to be performed and a list of the qualifications and experience necessary to perform the job successfully. ASHP reserves the right to change the duties and responsibilities of a position at any time and without prior notice; the position description is then updated accordingly.

Section 4.07

Performance Reviews

The performance review process is designed to: 1) encourage communication between staff and supervisors, 2) provide a regular opportunity for assessing job performance, 3) identify job goals and plans for achieving them, 4) and identify training, career development and upward mobility objectives.

Performance reviews for new non-exempt staff are conducted at the end of the individuals Initial Employment Period and again at the end of the first year of employment. Reviews for new exempt employees are conducted at the end of the first year of employment. Subsequent reviews for staff, exempt and non-exempt, are conducted on an annual basis.

The Human Resources Division maintains a record of the dates of each staff member's performance review and notifies both the employee and his/her immediate supervisor when an evaluation is due.

Section 4.08

Resignation

When voluntarily leaving ASHP, a staff member should write a letter of resignation to his or her supervisor, and should send a copy to the Director of Human Resources; the letter should state the date the resignation will be effective. Non-exempt staff members are expected to give at least two weeks' notice, exempt staff four weeks. No vacation leave may be taken during the period of termination notice without written permission of the supervisor.

ASHP may request that the staff member vacate the position sooner than the proposed resignation date; in this case the staff member will be paid in full, with benefits, until the proposed resignation date, not exceeding two or four weeks.

Before leaving ASHP, staff must return all ASHP library materials and other property including building access cards, keys, photo ID badges, computer equipment and ASHP issued credit cards. All advances must be repaid and tuition assistance reimbursement on a pro-rata basis. An exit interview will be scheduled with a member of the Human Resources staff. Once a staff member's resignation has been submitted, all subsequent wage payments will be made by direct deposit except for the final payment.

Section 4.09

Exit Interviews

When a staff member resigns from ASHP, a member of the Human Resources Division conducts the exit interview. During the interview the staff member is asked to complete a forwarding address form and is provided information on eligibility for continued health insurance benefits and any pension or savings and investment plan benefits due the staff member.

Section 4.10

Retirement

Benefits and pension information is available to those who are planning retirement. Staff is encouraged to talk with the Director of Human Resources. When a decision about retirement has been made and an effective date identified, the staff member should talk to his or her supervisor regarding these plans.

Section 4.11

Official Travel

Members of the staff may be asked to represent ASHP at its own meetings or selected meetings of other organizations. The primary consideration in planning staff coverage is how to best achieve ASHP objectives for each particular meeting.

Consistent with our policy, persons traveling on Society business will be provided with transportation, accommodations and services that meet reasonable and adequate standards of convenience, safety and comfort. Travel advances may be available.

Travel authorizations, arrangements and reimbursements must follow established procedures as more fully described in the *ASHP Policies and Procedures Manual*. Forms and instructions can be obtained on the ASHP Intranet. Staff traveling on official business who have obtained appropriate authorization are covered by ASHP's group travel accident insurance policy.

Section 4.12

Emergency Guidelines

Emergency Exits

The second floor of the ASHP space has three emergency exits; the third floor space has two. Staff should become familiar with the location of these exits and should proceed to the nearest one in the event of a fire alarm or other emergency. The elevators **may not** be used for exiting during an emergency situation.

Accidents and Injuries

When staff observe life-threatening injury, accident, or illness while on the job, 911 should be called immediately. A staff member with CPR/AED training should also be contacted. Additionally, the person calling 911 should notify the ASHP front desk and the Human Resources Division immediately.

Any staff member who sustains a non-life-threatening injury while on the job must notify the Human Resources Division immediately to be eligible for coverage provided under the Workers' Compensation Act.

Section 4.13

Lunchroom

A lunchroom is located on the third floor of the ASHP space for the use of ASHP staff. Cleanup is the responsibility of those who use the room and its facilities. Spills should be wiped up, all trash should be placed in trash cans, and **no** dirty dishes should be left in the room.

Refer to policy 3:06 Employee Lunchroom and coffee stations in the *ASHP Policy and Procedures Manual* for specific guidelines on this facility.

Section 5.00

Compensation

Section 5.01

Payroll

ASHP's pay week for payroll processing is Monday through Sunday. Staff are paid by direct deposit on the 15th and last day of the month. If a payday falls on a Saturday, Sunday, or holiday, the direct deposit will be made on the last banking business day prior to the 15th or last day of the month.

On the first payday, staff will be paid by check rather than direct deposit. During the first pay period with ASHP, the staff member's bank is notified of future direct deposits to the employee's account. Subsequently, all payrolls are by direct deposit, except for the final payment.

Section 5.02

Employee Pay Vouchers (Earning Statements)

Earning Statements are distributed to employees on payday. These statements show employee pay, taxes, deductions, benefits and leave balances. Employees who are not available at the time of distribution are to pick up their statement from the Human Resources Division. All statements should be delivered back to the Human Resources Division for security reasons.

In this document, we have included the codes that may be found on your earning statements. You will need these codes to understand the detail of your payroll. The statement is sectioned off within the categories of “Earnings”, “Taxes”, “Payroll Deductions” and “Payroll Benefits”.

Earnings

BER	Bereavement Pay
BONUS	Bonus Pay
CSB	Community Sick Bank
DEDOVP	Deduction Overpayment
FIND	Finder’s Fee
FLURMB	Flu Shot Reimbursement
H01	Part-time Regular Pay
H10	Part-time Vacation Pay
JURY	Jury Duty Pay
OT	Overtime Pay (paid at regular rate)
OT150	Overtime Pay (paid at time and a half)
PER	Personal Pay
PARKRM	Parking Reimbursement
PRKT	Parking Year End Reimbursement (post-tax)
REG	Regular Pay
RTRO	Retroactive Pay
RTROH	Retroactive Pay for part-time employees
SBK	Personal Sick Bank Pay

SICK	Sick Pay
STD	Short Term Disability Pay
TUINOT	Tuition Reimbursement
VAC	Vacation Pay

Taxes

DC	DC Tax
FIT	Federal Income Tax
MD	MD Tax (Includes county tax)
Med	Medicare = 1.45% of wages – no wage base limit
SS	Social Security tax = 6.2% of wages – wage base limit is \$97,500 for 2007
VA	Virginia Tax

Payroll Deductions (employee paid)

401\$	401(k) Pre-tax Dollar
401\$CU	401(k) Pre-tax Dollar Catchup
401%	401(k) Pre-tax Percentage
401%CU	401(k) Pre-tax Percentage Catchup
457\$	457 Plan Dollar
BSH	Sport and Health Club Dues
CDEN1	Individual Dental
CDEN2	Individual + Child Dental
CDEN3	Individual + Spouse Dental
CDEN4	Individual + Family Dental
CHMO1	HMO Individual
CHMO2	HMO Individual + Child
CHMO3	HMO Individual + Spouse
CHMO4	HMO Individual + Family
CPOS1	POS Individual
CPOS2	POS Individual + Child
CPOS3	POS Individual + Spouse
CPOS4	POS Individual + Family
CPPO1	PPO Individual
CPPO2	PPO Individual + Child
CPPO3	PPO Individual + Spouse
CPPO4	PPO Individual + Family
FMCR	Family Care Flexible Spending
FOUN	Research and Education Foundation Contribution
GARN	Garnishment

HLCR	Health Care Flexible Spending
LON	401k Loan Repayment
MTRO	Pre-tax Metro
PARK	Pre-tax Parking
RPT\$	Roth Post-tax 401k Dollar Amount
RPT\$CU	Roth Post-tax 401k Dollar Amount Catchup
RPT%	Roth Post-tax 401k Percentage
RPT%CU	Roth Post-tax Percentage Catchup
WWATCH	Weight Watchers

Payroll Benefits (company paid)

401\$	401(k) Match
401\$CU	401(k) Match
401%	401(k) Match
401%CU	401(k) Match
ADD	Accidental Death and Dismemberment
DEPLIF	Dependant Life Insurance
DISA	Disability
LIFE	Life Insurance
PENS	ASHP Pension Plan
RPT\$	Roth Match
RPT\$CU	Roth Match
RPT%	Roth Match
RPT%CU	Roth Match
W2GRP	Group Term Life Insurance (taxable to employee for life insurance in excess of \$50,000)

Section 5.03

Payroll Advances

A salary advance may be requested only under emergency circumstances. Multiple requests will be denied. A request for advance, describing the need, must be submitted in writing to the Director of Human Resources. If approved, the Human Resources Division will obtain the required written permission from the employee, prepare the payment and make arrangements for the staff member to secure the advance. The total of the advance will be deducted from the next paycheck. In the event of a staff member's termination or resignation, outstanding salary advances will be deducted from the individual's last paycheck.

Section 5.04

Overtime

Only non-exempt employees are eligible for overtime compensation. The Vice President supervising the non-exempt employee must approve overtime in writing and in advance. Non-exempt staff are permitted to work evenings and/or weekends without direct supervision if requested by the employee's supervisor. The signed preauthorization will be forwarded to the Human Resources Division prior to the hours being worked. The first 2.5 hours exceeding 37.5 are paid at the employee's regular hourly rate of pay. Hours worked in excess of 40 are paid at 1.5 times the employee's regular hourly rate. Non-exempt staff can work no more than 4 hours overtime after normal work hours Monday through Friday and no more than 8 hours overtime on Saturday and/or Sunday, except for Summer and Midyear Clinical Meetings. Payment for overtime will be made based on the payroll schedule.

Non-Exempt Meeting Attendees

Non-exempt staff attending one of ASHP's national meetings at the Society's request will be eligible for overtime under the following conditions:

1. Overtime will be paid to non-exempt staff for work in excess of 37.5 hours in a workweek beginning on Monday and ending on Sunday.

2. The first 2.5 hours in excess of 37.5 will be paid at the staff member's regular hourly rate. Work in excess of 40 hours during a workweek will be paid at 1.5 times the staff member's regular hourly rate.
3. Staff will be paid for 8-hours for each travel day to and from the meeting. If the staff member works at the meeting site on the travel day and the day extends beyond 8 hours, the additional time will be applied to the 40 hours eligible for 1.5 times pay.
4. Non-exempt staff are welcome but not required to attend evening functions at the national meetings. Voluntary attendance at these evening functions will not be considered work time for overtime calculations.
5. Non-exempt staff will not be eligible for the "administrative" day off traditionally given to exempt staff after attendance at one of the national meetings and will be expected to work a normal schedule following attendance at an ASHP national meeting.

Each non-exempt staff member working at an ASHP national meeting will complete a special time sheet provided by Human Resources denoting the actual hours worked, including travel time to and from the meeting site. Time sheets must be initialed and approved by the division director.

Section 5.05

Holidays

Only full-time staff of the Society are paid for holidays. If a holiday falls during a full-time staff member's vacation or absence because of illness, the holiday will not be charged to the employee's vacation or sick leave.

Our office is closed on the following holidays:

New Year's Day	Labor Day
Martin Luther King's Birthday	Columbus Day
President's Day	Thanksgiving Day
Memorial Day	Day after Thanksgiving
Independence Day	Christmas Day

Section 6.00

Benefits

Section 6.01

Group Insurance Programs

We currently provide our staff with insurance benefits, including health, dental, life, Accidental Death and Dismemberment, disability and travel accident insurance coverage. Staff is provided with information about the insurance benefits, the terms and the conditions on the first day of employment. ASHP automatically bonds all of its staff.

Qualified staff are eligible for insurance coverage effective the first day of the calendar month following their hire date, providing the hire date is on or before the 10th of the month. If the hire date is after the 10th, staff are eligible for insurance coverage on the first day of the calendar month following 30 days of employment.

Section 6.02

COBRA

When a staff member leaves employment with ASHP, federal law provides that staff, at their own expense, have the option to continue certain health benefits for which they were covered under the ASHP group plan. Questions about continuation of health benefits should be directed to the Human Resources Division.

If a staff member has coverage for a spouse, child or family, a letter will be mailed to the dependents notifying them of the ending of their coverage and their right to COBRA coverage.

Section 6.03

Retirement Programs

ASHP provides staff who meet service and age requirements a paid Pension Plan and a self directed Savings and Investment Plan [401(k)]. As required by law, each staff member is given a Summary Plan Description for these plans on the first day of employment. Once a staff member satisfies the required eligibility requirements for participation in the 401(k) and Pension Plan, they are provided an orientation with information about the plans. For questions about the Pension or Savings and Investment Plan benefits, please refer to your Summary Plan Descriptions or contact the Human Resources Division.

Section 6.04

Pre-Tax Benefit Plan

ASHP provides Pre-Tax Benefit Plans for those staff who wish to participate. These plans allow employees to set aside, each calendar year, on a pre-tax basis, the amount of money they expect to spend that year on:

- medical/dental services for themselves and their dependents that will not be reimbursed by insurance,
- dependent care (child care/elder care) expenses,
- the cost of carrying individual medical and dependent coverage in the ASHP health/dental insurance program,
- transportation fees incurred in commuting to work based on IRS regulations, and
- public transportation allowance based on IRS regulations for METRO, vanpool or other means public transportation.

To set aside these funds, payments to the plan are taken from the staff member's pay before Federal, state, and Social Security/Medicare taxes are deducted.

Further, ASHP provides non-exempt staff with up to \$65 per month in commuting benefits. Up to \$60 is available for parking at 7272 Wisconsin parking facility or reimbursement for parking in other facilities. Up to \$65 is available in Metro Checks for public transportation.

To find out more about these benefits, contact the Human Resources Division.

Section 6.05

Credit Union

We offer a payroll deduction credit union program through the Montgomery County Teachers Federal Credit Union. Staff is eligible to enroll after completing the Initial Employment Period. Details are available from the Human Resources Division.

Section 6.06

Tuition Reimbursement

ASHP provides a Tuition Reimbursement Program, administered by the Senior Vice President, for full-time staff. Staff members are eligible for the program after completion of the Initial Employment Period. Courses must be job-related or lead to a degree, and attendance must not interfere with work.

Staff are expected to remain employed by ASHP for a period of one-year following reimbursement. If a staff member leaves ASHP prior to one year after reimbursement, he/she will be required to reimburse ASHP a pro-rata share of the expense. Information and necessary application forms may be obtained on the ASHP intranet.

Section 6.07

Employee Certification Reimbursement Program

ASHP provides a Certification Reimbursement Program, administered by the Senior Vice President, for full-time employees. An employee is eligible for the program after a period of six month's full-time employment at ASHP.

The certification program must be offered by a credible organization or institution and recognized as an official credential for a profession. The certification program must be job related or of potential benefit to the employee's work at ASHP. Attendance must not interfere with work.

Employees are expected to remain employed by ASHP for a period of one-year following reimbursement. If an employee leaves ASHP prior to one year after reimbursement, he/she will be required to reimburse ASHP a pro-rata share of the expense. Information and necessary application forms may be obtained on the ASHP intranet.

Section 6.08

Sport & Health

ASHP maintains a corporate account with Sport and Health Clubs of the Washington Metro area which provides staff with reduced rates for a monthly membership. Membership dues are deducted through payroll on the first payroll of each month. For additional information, contact the Human Resources Division.

Section 7.00

Leave

Section 7.01

Leave Eligibility

Other than holidays, staff are not eligible for leave until the first of the calendar month following the date of hire, providing the date of hire is on or before the 10th of the month. If the date is after the 10th, the first date that a staff member is eligible for leave is the first day of the calendar month following 30 days of employment with ASHP.

Section 7.02

Leave Classification

ASHP leave falls under the following classifications:

- Vacation
- Sick
- Personal Days
- Inclement Weather
- Military
- Bereavement
- Family and medical
- Leave without pay
- Jury Duty

Staff must record the leave they have taken and approved by the Vice President or Division Director.

The following sections describe each of the above classifications.

Section 7.03

Vacation Leave

Paid vacation is provided to all full-time staff. Although every attempt is made to accommodate a staff member's desired vacation plans, business needs take priority. All vacation time must be scheduled with the approval of the staff member's Office or Division Director. Time charged to vacation in excess of time earned will be charged as personal leave. Once personal leave is exhausted, the time will be withheld from pay as Leave Without Pay. Under no circumstances will vacation leave be advanced, or taken from sick leave.

Full-time staff earns vacation leave on the last day of each pay period as follows:

Non-exempt and Exempt staff with less than 60 months (5 years) of employment	5.000 hours per pay period
Non-exempt and Exempt staff with at least 60 months (5 years) employment	6.667 hours per pay period

Regular part-time staff routinely working more than 20 hours per week earn a percentage of vacation based on the annual number of regular hours worked.

Vacation earned but not taken by the end of the calendar year in which it is earned can be carried forward and used in the next calendar year. The

maximum amount of vacation that may be carried into the next year is equal to the amount the staff member earned in the previous year.

Staff who resign, are terminated or retire will be paid for earned but unused vacation hours, pursuant to Maryland law, in their final paycheck.

Section 7.04

Sick Leave

ASHP offers sick leave with pay to full-time staff who are absent from work because of individual or family illness, disability, or the need for medical or dental care.

Full-time staff earn sick leave at the rate of four hours per pay period on the last day of each pay period. Full-time staff routinely working more than 30 hours per week earn a percentage of sick leave based on the annual number of hours worked¹. At the end of each year, hours in excess of 96 hours will be placed in a personal bank until a maximum of 640 hours is saved. Banked hours can be used by the staff member in the event of the following:

- Birth of a child;
- Adoption or placement of a foster child;
- To care for the staff member's immediate family member (i.e. spouse, child, parent) who has a serious health condition;
- Inability of the staff member to perform their job due to a serious health condition.

Staff may opt to enroll in ASHP's Community Sick Bank by donating eight hours of sick leave on the first payroll in January. This donation entitles the enrollee to receive 1/2 of the amount in their personal sick leave bank at the

¹ Staff working less than 30 hours are not entitled to sick leave.

beginning of the current calendar year. In order to enroll the first year, the enrollee must have 120 sick hours available. After the initial enrollment, the minimum to participate is 104 hours. Enrollment forms and additional information on this plan are available on ASHP intranet site.

Staff will be charged sick leave on an hourly basis. If a staff member has used all accrued sick leave, additional absences will be charged to vacation leave, then personal leave and, thereafter, to Leave Without Pay. Staff may be required to provide documentation for an absence charged to sick leave.

Sick Leave is not convertible to, and is not to be used as, Vacation Leave or any other leave except as required by law. No payment for unused or banked sick leave hours will be made upon termination, resignation or retirement.

Section 7.05

Personal Leave

Full-time staff is granted 24 hours of Personal Leave each calendar year. The 24 hours will be credited to staff in a lump sum each January for all full-time staff. Staff must have been hired prior to or on, December 10 in order to receive the full accrual in January. If hired after December 10, the staff member will receive a pro-rated accrual based on two hours per month. Personal Leave not used by December 31 will be forfeited. No payment for unused Personal Leave hours will be made upon termination, resignation or retirement.

Personal time, to the extent possible, is to be scheduled with your immediate supervisor. Although every attempt is made to accommodate a staff member's personal leave request, business needs take priority.

Part-time staff working less than 30 hours a week are not eligible for Personal Leave.

Section 7.06

Inclement Weather

ASHP provides a recorded message advising staff of its business hours during inclement weather. The recorded message will be available as of 6:15 a.m. on a work day affected by inclement weather. The message may be accessed by calling 301-657-3000 and dialing extension 1781.

Staff not able to make it to work on an inclement weather day may charge the absence to Vacation or Personal leave. If no Vacation or Personal Leave exists, then Leave Without Pay (LWP) will be charged. If ASHP elects to close the office, delays the opening or dismisses staff early due to inclement weather, no leave of any kind will be charged for these hours.

If a staff member has scheduled leave on a day of closure or early opening/closing due to inclement weather the staff member must still charge a full day's leave.

Section 7.07

Military Leave

Full-time staff who must be absent from work to fulfill their military obligations with the National Guard or Reserves are granted Leave With Pay, not to exceed 10 working days annually. Such leave will not be deducted from the staff member's Vacation Leave nor will the staff member forfeit benefits during the period of absence.

Full-time staff who are called up for military duty during a national emergency, for compulsory military training, or to be examined for such service or training, are entitled to re-employment with ASHP in accordance with applicable Federal and state laws.

Section 7.08

Bereavement Leave

Full-time staff is allowed up to three days of absence with pay to attend to funeral arrangements for a death in the immediate family (parents, child, sibling, spouse, grandparent, mother- or father-in-law, legal guardian, or other relative for whom the staff member is directly responsible). One day with pay may be granted to attend the funeral of close friends or business associates, at the discretion of the Office or Division Director. Time in excess of these allowances will be charged to Vacation Leave, at the discretion of the Office or Division Director. Sick leave may not be used for bereavement.

Part-time staff working less than 30 hours per week are not eligible for bereavement leave.

Section 7.09

Family and Medical Leave Act

Maryland Flexible Leave Act

Family/Medical Leave (FMLA) is provided to staff who, because of serious medical or family related reasons, will be absent from work for an extended or intermittent amount of time.

Staff who have been employed by the Society for at least one year and have worked at least 1,250 hours during the 12 months preceding the request for leave are eligible for up to a total of 12 weeks of leave per year under FMLA for the following reasons:

- Birth of a child;
- Adoption or placement of a foster child;
- To care for the staff member's immediate family member (i.e. spouse, child, parent) who has a serious health condition;
- Inability of the staff member to perform his or her job due to a serious health condition.

Staff may only take 12 weeks in any one-year period. This one-year period commences on the day the staff member starts taking FMLA. The 12 weeks or portion thereof may be taken at one time or, if there is a serious health reason, may be taken intermittently.

Staff requesting FMLA will be required to use any accrued paid leave (i.e. sick leave, personal and vacation leave) before leave without pay will be granted.

When the staff member returns from FMLA leave (within their maximum twelve (12) weeks per rolling twelve month period) the staff member will be reinstated to their former position or equivalent position with equivalent pay, benefits, and other employment terms and conditions. However, a staff member has no greater right to reinstatement or to other benefits and conditions of employment than if the staff member had been continuously employed by the Society during the FMLA leave period. Further, the Society will maintain the staff member's health insurance coverage in the same manner as if the staff member were on paid leave. While on FMLA the staff member's share, if any, of the health insurance premium is to be paid to the Society, by the staff member on a monthly basis, by the 10th of the month. Failure to do so in a timely manner could result in termination of all health insurance coverage. Staff members who return from an FMLA leave (i.e. within their maximum twelve (12) weeks per rolling twelve-month period), will be reinstated to their former position or to an equivalent position with equivalent pay, benefits, and other employment terms and conditions. However, a staff member has no greater right to reinstatement or to other benefits and conditions of employment than if the staff member had been continuously employed by the Society during

the FMLA leave period. Therefore, if changes in the Society's business occur during a staff member's FMLA leave and the staff member would have been terminated, laid off or reassigned had he or she been on active status, the staff member is not guaranteed reinstatement.

Any staff member requesting FMLA must provide the Society with 30 days advance written notice if the necessity of the leave is foreseeable, but in any case notice is required as soon as practicable. Requests for FMLA leave should be submitted to the Director of Human Resources. The request should set forth the reasons for the needed leave, the anticipated start date of the leave, and the anticipated duration of the leave.

Staff members requesting or otherwise eligible for FMLA leave may be required to submit a certification from their health care provider stating, among other things, the date on which the serious health condition began; the probable duration of the condition and any current period of incapacity; the medical facts known to the health care provider regarding the serious health condition; and that the employee either is unable to perform the functions of his or her position due to the serious health condition or is needed to provide assistance or psychological comfort to a spouse, child or parent with a serious health condition. When required, such certification must be submitted as soon as practicable, but, in no event, later than fifteen (15) calendar days after the onset of the serious health condition. The Society reserves the right to require a second and/or third medical

opinion by a health care provider of its choice. Further, the Society may require a fitness of duty report from the health care provider that the staff member is able to resume work, *i.e.*, fit for duty. Failure to meet the applicable notice and certification requirements may result in counting the staff member's days off against his or her attendance record; disciplinary action, up to and including termination; denial of a request for leave; or denial of reinstatement following the leave.

The Society's leave policy conforms to applicable state and Federal Laws. Further information and the necessary forms may be obtained from the Human Resources Division.

Maryland Flexible Leave Act

The Maryland Flexible Leave Act (MFLA) is provided to staff who take accrued paid vacation and sick leave to care for the staff member's ill child, spouse or parent. MFLA does not affect leave granted under the federal Family and Medical Leave Act (FMLA).

After October 1, 2008, staff who are eligible for vacation and sick leave may elect to take earned vacation and sick leave to care for the staff member's ill child, spouse or parent. MFLA applies to earned vacation and sick leave taken after October 1, 2008, but staff may elect to use earned vacation and sick leave accrued before October 1, 2008.

Staff who earn both sick and vacation leave may elect which type and amount of leave to be used under MFLA. Under MFLA, staff may be required to provide

documentation of the illness as described in Section 7.04 (Sick Leave) and above. Staff may also be required to provide advanced written notice of a request for MFLA as soon as practicable as described above.

Section 7.10

Leave Without Pay

Staff may be granted Leave Without Pay with the prior authorization of the Executive Vice President, supervisory Corporate Group member, and the Director of Human Resources in accordance with Federal and state laws.

Section 7.11

Jury Duty

Full-time staff selected for jury duty, or to act as a court witness, will receive full pay and benefits during their absence. Staff are required to provide copies of the subpoena or jury summons to the Human Resources Division. Time used for jury duty, or to act as a court witness, should be noted as such when submitting time. Staff appearing as a plaintiff, defendant, or for non-subpoenaed court appearance will not receive paid time off. In these instances, vacation or personal leave must be charged.

Part-time staff working less than 30 hours per week are not eligible for Jury Duty leave. Time away from the office will not be paid.

Exhibit I

ASHP Conditions of Employment

NON-EXEMPT STAFF CONDITIONS OF EMPLOYMENT
FOR FULL-TIME EMPLOYEE

1. You, _____, agree to assume the position of _____ in the Division/Office, currently reporting to _____, effective _____, assuming you have met the minimum hours required by your employment agency, contingent upon your ability to provide the American Society of Health-System Pharmacists, Inc. (the "Society" or "ASHP") with proper verification of your eligibility for employment in the United States according to Title 8, United States Code, Section 1324A. You understand and agree that you are an employee-at-will. ASHP reserves the right to change the position description for this position at any time. ASHP reserves the right to assign you other duties which are within the scope of ASHP activities. You understand that the first six (6) months of your employment will be considered probationary in order to give both the Society and you an opportunity to assess your performance; during this period both you and the Society may terminate your employment immediately. After the six-month probationary period has passed, you are required to provide ASHP with a two-week written notice in order to terminate employment. No vacation leave can be taken during this two-week period.
2. You will devote your full time and best efforts to your duties at ASHP with the understanding that "moonlighting" is prohibited without full and open prior disclosure to and prior written approval from ASHP management.
3. Your starting salary will be \$_____. Your position classification is non-exempt under FLSA and overtime will be paid for work in excess of FLSA limits (40 hours/week). Your first performance review will be _____, with any increase effective _____. A second performance review will be conducted _____, with any increase effective _____, and thereafter, in accord with ASHP's salary review policy (as it may be amended from time-to-time). Insurance benefits will begin _____.
4. The enclosed Personnel Handbook outlines other terms, conditions, and benefits of employment, all of which are incorporated herein. ASHP reserves the right to replace or amend the Handbook. You will also be subject to ASHP administrative and management policies and practices, which ASHP may change, modify, establish or delete at any time, at its sole discretion. Benefits relating to retirement and health programs, vacation and sick leave accrual are set forth in documents relating to those plans, and are available to you. Your rights therein are subject to and governed by State and federal law.

NON-EXEMPT STAFF CONDITIONS OF EMPLOYMENT

Page 2

5. You may not, during or after your employment, disclose or use for your benefit or the benefit of any other person, corporation or entity or to the detriment of the Society, any information, methods, strategies, plans, practices, or intents concerning ASHP's business or affairs which you may have acquired in the course of your employment, nor interfere with or entice away any other employee of ASHP.

The restrictions of this provision shall not apply to information which (a) is, or becomes publicly known through no wrongful act of Employee; or (b) is received by Employee from a third party free to disclose it without obligation to ASHP.

EMPLOYEE:

Name

Date

EXEMPT STAFF CONDITIONS OF EMPLOYMENT
FOR FULL-TIME EMPLOYEE

1. You, _____ will assume the position of _____, which is currently a function of _____, reporting to _____, as of _____, contingent upon your ability to provide the American Society of Health-System Pharmacists, Inc. (the "Society" or "ASHP") with proper verification of your eligibility for employment in the United States according to Title 8, United States Code, Section 1324A. You understand and agree that you are an employee-at-will. ASHP reserves the right to change the position description and reporting relationship for your position at any time. ASHP reserves the right to assign you other duties which are within the scope of ASHP activities. The first six (6) months of your employment will be considered probationary in order to give both the Society and you an opportunity to assess your performance; during this period both you and the Society may immediately terminate your employment. After the six-month probationary period has passed, you are required to provide ASHP with a four-week written notice in order to terminate employment. No vacation leave can be taken during this four-week period.
2. You will devote your full time and best efforts to your duties and you will not engage in any business, work or professional services for remuneration for any person, firm or entity other than ASHP without full and open prior disclosure to and prior written approval from ASHP management. You also agree to perform your duties, and attend Society functions as requested, outside normal work hours, if necessary, to meet unexpected deadlines of ASHP's needs.
3. Your starting annual salary will be \$_____. Your position classification is exempt under FLSA and no overtime will be paid. Your next performance review will be _____ with any salary increase effective _____, and thereafter, in accordance with ASHP's salary review policy (as it may be amended from time-to-time). Insurance benefits will begin _____.
4. The ASHP Personnel Handbook outlines other terms, conditions and benefits of employment which are incorporated herein. ASHP reserves the right to replace or amend the Handbook. You will also be subject to ASHP administrative and management policies and practices, which ASHP may change, modify, establish or delete at any time, at its sole discretion. Benefits relating to retirement and health programs, as well as vacation and sick leave policies, are set forth in documents relating to those plans and are available to you. Your rights thereto are subject to and governed by State and federal law.

Exempt Staff Conditions of Employment

Page 2

5. Any honorarium or payment for special services received by you in conjunction with your employment by ASHP is to be paid and endorsed over to the Society.
6. All written or printed material received from you, composed by you for ASHP, or obtained by ASHP during your employment shall be the property of the Society and must be surrendered on the termination of your employment and/or when otherwise requested.
7. You may not, during or after your employment, disclose or use for your benefit or the benefit of any other person, corporation or entity or to the detriment of the Society, any information, methods, strategies, plans, practices, or intents concerning ASHP's business or affairs which you may have acquired in the course of your employment, nor interfere with or entice away any other employee of ASHP.
8. All work prepared by you in print or electronic form, (the "Work") shall, to the extent permitted under the United States Copyright Act, be considered "works made for hire". The Work shall be the sole and exclusive property of ASHP, and ASHP shall own all rights therein, including, without limitation, the copyright therein, together with all extensions and renewals thereof, throughout the world. In the event any work prepared by you hereunder shall not qualify as "works made for hire" within the meaning of the United States Copyright Act, you agree to assign and hereby assign the copyright in such work, and shall, without additional charge to ASHP, give ASHP such information and execute all such additional instruments and documentation as may be reasonably required to vest all such rights in ASHP.

I have read and understand the above conditions, and agree to comply with them during my employment at ASHP.

EMPLOYEE:

Name

Date

Exhibit J

ASHP Policy on Editorial Independence of AHFS DI



19 January 2010

[Home](#)
[Products & Services](#)
[Support](#)
[Off-label Uses](#)
[About AHFS](#)
[Contact Us](#)

Off-label Uses

- [Supporting Documents](#)
- [Overview](#)
- [Editorial Independence](#)
- [Review Process](#)
- [Conflict of Interest & Disclosure Policy](#)
- [Expert Review Committee Members](#)
- [Levels of Evidence](#)
- [Oncology Final Determinations](#)


[Site Map](#)

Editorial Independence of AHFS Drug Information

Approved by the American Society of Health-System Pharmacists Committee on Publications and Board of Directors

The mission of *AHFS Drug Information (AHFS DI)* is to provide an evidence-based foundation for safe and effective drug therapy. Information included in *AHFS DI* shapes treatment decisions made by clinicians and influences public and private health care policy and decisions. As a result, it is important that the information be authoritative, objective, and free of undue influence from pharmaceutical manufacturers, health insurers, pharmacy benefits managers, and other third parties who may seek to use the compendium to promote their own vested interests. Editorial decisions are evidence-based and made independent of such third parties; final decisions are made solely by the AHFS editorial staff, taking into account the advice of expert reviewers.

Widely trusted for its established record in refuting unfounded efficacy claims, its rigorous science-based editorial process, and its independence from the influence of pharmaceutical manufacturers, *AHFS DI* has remained true to its mission for almost 50 years.

AHFS DI is the only remaining official drug compendium published by a non-commercial entity (i.e., by a tax-exempt ["nonprofit"] professional association). The American Society of Health-System Pharmacists (ASHP) is an IRS 501(c)(6) tax exempt entity. ASHP is the national professional association that represents pharmacists who practice in inpatient, outpatient, home-care, and long-term-care settings. ASHP has a long history of fostering evidence-based medication use as well as patient medication safety—efforts designed to help pharmacists improve their delivery of pharmaceutical care.

AHFS DI is published by ASHP under the authority of its elected Board of Directors. As such, the Board exercises oversight through its ongoing Society considerations as well as through its Committee on Publications. This oversight by the Board also involves review and approval of relevant recommendations originating from its appointed Commission on Therapeutics and the advisory and best practices developments of its Councils, House of Delegates, and other policy-recommending bodies.

In addition, hundreds of experts, principally physicians but also other clinicians, leading medical scientists, pharmacists, pharmacologists, and other professionally qualified individuals, participate in an ongoing extramural review process for *AHFS DI*. Participation is solicited but voluntary, and no honorarium nor other benefit (e.g., complimentary subscription) is provided. These experts must provide full disclosure of interest, including any affiliation with or financial involvement in the manufacturer of the drug(s) under consideration and directly competitive products.

ASHP considers it essential that interactions between AHFS and pharmaceutical manufacturers be limited to the legitimate exchange of the scientific and medical information needed to fulfill the mission of *AHFS DI*. To maintain independence from the undue influence of the promotional interests of pharmaceutical manufacturers, communications are directed to the scientific and medical information areas within the companies; contact with marketing areas is avoided.

ASHP holds in high regard the responsibilities attendant to the public and private trust placed in the evidence-based editorial deliberations of AHFS. As such, ASHP also considers it essential to protect the integrity and independence of the editorial decisions of AHFS staff by separating the Society's business activities with pharmaceutical manufacturers (e.g., exhibits at educational meetings, journal advertising) from the editorial activities of its drug compendium. AHFS staff apply the following principles of editorial independence in weighing the propriety of their conduct:

1. AHFS staff should avoid participating in business discussions with pharmaceutical manufacturers and other ASHP staff should avoid engaging AHFS staff in such discussions.
2. AHFS staff must disclose any potential financial conflicts of interest or other external activities that may affect their editorial decisions on specific drugs. AHFS staff should not hold financial interests that conflict or may influence the conscientious performance of their editorial duty.
3. AHFS staff may not solicit or accept any gift or other item of monetary value from any individual or entity seeking official action or influence from the compendium nor from those whose interests may be substantially affected by the performance or nonperformance of the staff's editorial duties.
4. AHFS staff have an obligation to act impartially and not give preferential treatment to any interested individual or organization that might influence their editorial decisions.
5. AHFS staff should avoid actions that might create the appearance that they are violating these principles of ethical conduct and editorial independence. Any such behavior shall be judged from the perspective of a reasonable individual in a similar situation with knowledge of the relevant facts. When necessary, the expert advice of other staff (e.g., professional practice, corporate counsel) should be sought.
6. On occasion, ASHP may determine that the Society's interest in the staff's participation in a particular activity or discussion outweighs any concern that a reasonable individual might question the integrity of the activity.
7. AHFS staff members with questions about their activities that are not addressed by

these principles on editorial independence shall refer their questions to the Vice President of Publishing and Editor of AHFS.



American Society of Health-System Pharmacists
7272 Wisconsin Avenue, Bethesda, MD 20814
www.ashp.org

[Copyright](#) | [Privacy Policy](#) | [Trademark](#)

Exhibit K

Annual Disclosures from Tate and Tryon - 2006-2009

**ATTACHMENT "A"
RELATED PARTY RESPONSES**

The following four questions were posed to each member of the Organization's senior management team:

1. Do you, or a member of your immediate family, serve on the Board of Directors of any organization other than the American Society of Health-System Pharmacists, Inc. and Subsidiary?
2. Do you, or a member of your immediate family, have an ownership interest in any company that conducts business with the American Society of Health-System Pharmacists, Inc. and Subsidiary?
3. Have you, or a member of your immediate family, had any financial interest in any sales, purchases, transfers, leasing arrangements or guarantees entered into by the American Society of Health-System Pharmacists, Inc. and Subsidiary since the beginning of the fiscal year under audit? Please include any transactions that are currently pending completion.
4. Have you, or a member of your immediate family, been indebted to the American Society of Health-System Pharmacists, Inc. and Subsidiary at any time since the beginning of the fiscal year under audit? Please exclude amounts related to ordinary travel for American Society of Health-System Pharmacists, Inc. and Subsidiary and expense advances.

Management Responses for ASHP:

Henri Manasse, Jr.

Dr. Manasse responded to question #1 that he serves on the Board of Governors of the National Patient Safety Foundation and the Board of Directors of the Pharmacy Technician Certification Board. Dr Manasse's spouse serves on the Board of Directors of the Westside Holistic Family Center and the Board of Trustees of the Western Springs Baptist Church. Dr. Manasse had no other affirmative responses to the above questions.

William Zellmer

Mr. Zellmer had no affirmative responses to the above questions.

Fern Zappala

Ms. Zappala had no affirmative responses to the above questions.

Stan Lowe, Jr.

Mr. Lowe had no affirmative responses to the above questions.

Charles Myers

Mr. Myers had no affirmative responses to the above questions.

John Spencer

Mr. Spencer had no affirmative responses to the above questions.

Management Responses for ASHP - Continued:

Carol Wolfe

Ms. Wolfe responded to question #1 that she serves on the Local Station Board of WPFW, a community radio station in the Pacifica Foundation Network. Ms. Wolfe had no other affirmative responses to the above questions.

David J. Edwards

Mr. Edwards responded to question #1 that through May 8, 2006, he served as President of the Board of Directors of Highbridge Park Community Association, and through May 15, 2006, he served as Treasurer of the Board of Directors of St. Matthews Housing Corporation. Mr. Edwards had no other affirmative responses to the above questions.

Dean Manke

Mr. Manke responded to question #1 that he serves as Treasurer of Temple Trace Homeowner's Association. Mr. Manke had no other affirmative responses to the above questions.

David Witmer

Mr. Witmer had no affirmative responses to the above questions.

Richard Talley

Mr. Talley had no affirmative responses to the above questions.

Gerald McEvoy

Mr. McEvoy responded to question #1 that he serves on the Board of Directors of National Council on Patient Information and Education. Mr. McEvoy had no other affirmative responses to the above questions.

Elizabeth Hartnett

Ms. Hartnett had no affirmative responses to the above questions.

Tracy Connors

Ms. Connors responded to question #1 that she serves as Treasurer of the Home and School Association at Our Lady of Lourdes Catholic School. Ms. Connors had no other affirmative responses to the above questions.

RELATED PARTY RESPONSES

The following four questions were posed to each member of the Organization's management team:

1. Do you, or a member of your immediate family, serve on the Board of Directors of any organization that could have a potential conflict or does business directly or indirectly with American Society of Health-System Pharmacists, Inc. and Subsidiary?
2. Do you, or a member of your immediate family, have an ownership interest in any company that conducts business with American Society of Health-System Pharmacists, Inc. and Subsidiary? For purposes of this question, please exclude any ownership of publicly-traded equity securities.
3. Have you, or a member of your immediate family, had any financial interest in any sales, purchases, transfers, leasing arrangements, or guarantees entered into by American Society of Health-System Pharmacists, Inc. and Subsidiary since June 1, 2006? Please include within your answer any transactions that are currently pending completion.
4. Have you, or a member of your immediate family, been indebted to American Society of Health-System Pharmacists, Inc. and Subsidiary at any time since June 1, 2006? Please exclude amounts related to ordinary travel and expense advances.

Responses to the inquiry are as follows:

Management Responses for ASHP:

The following ASHP employees had no affirmative responses to the above questions:

Henri R. Manasse, Jr., Chief Executive Officer
William A. Zellmer, Deputy Executive Vice President
Fern Zappala, General Counsel
Stan Lowe, Jr., Senior Vice President
Charles E. Myers, Group Vice President, Professional Development and Member Relations
John Spencer, Chief Information Officer
Carol Wolfe, Vice President, Publications and Drug Information Systems
David J. Edwards, Vice President, Finance
Dean J. Manke, Vice President, Marketing and Sales
David R. Witmer, Vice President, Member Relations
C. Richard Talley, Assistant Vice President, Pharmacy Publishing
Gerald K. McEvoy, Assistant Vice President, Drug Information
Elizabeth Hartnett, Controller
Tracy Yaklyvich, Assistant Controller

**AMERICAN SOCIETY OF HEALTH-SYSTEM
PHARMACISTS, INC. AND SUBSIDIARY**

RELATED PARTY QUESTIONS AND RESPONSES

May 31, 2009

The following four questions were posed to each member of the Organization's management team:

1. Do you, or a member of your immediate family, serve on the Board of Directors of any organization that could have a potential conflict or does business directly or indirectly with American Society of Health-System Pharmacists, Inc. and Subsidiary?
2. Do you, or a member of your immediate family, have an ownership interest in any company that conducts business with American Society of Health-System Pharmacists, Inc. and Subsidiary? For purposes of this question, please exclude any ownership of publicly-traded equity securities.
3. Have you, or a member of your immediate family, had any financial interest in any sales, purchases, transfers, leasing arrangements, or guarantees entered into by American Society of Health-System Pharmacists, Inc. and Subsidiary since June 1, 2008? Please include within your answer any transactions that are currently pending completion.
4. Have you, or a member of your immediate family, been indebted to American Society of Health-System Pharmacists, Inc. and Subsidiary at any time since June 1, 2008? Please exclude amounts related to ordinary travel and expense advances.

Management Responses for ASHP:

The following employee had affirmative responses to the above questions:

McEvoy, Gerald

Assistant Vice President, Drug Information

Mr. McEvoy responded to question number one that he serves on the Board of Directors of BMJ North America, a wholly owned subsidiary of the British Medical Society, and the National Council on Patient Information and Education. Both appointments were approved by the Organization's Board of Directors. Mr. McEvoy had no other affirmative responses to the above questions.

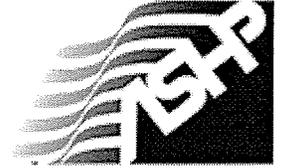
The following members of management were included in the related party survey and they had no affirmative responses to the above questions:

Allen, Stephen	Executive Vice President/CEO of the Foundation
Cantrell, Susan	Vice President, Resources Development
Edwards, Dave	Vice President, Finance
Hartnett, Betty	Controller
Lowe, Stan	Deputy Executive VP and Chief Operating Officer
Mannase, Henri	Chief Executive Officer
Manke, Dean	Vice President, Marketing and Sales
Scheckelhoff, Douglas	Vice President, Professional Development
Spencer, Jack	Chief Information Officer, VP of Operations and Technology
Talley, Richard	Assistant Vice President, Pharmacy Publishing
Thompson, Kasey	Vice President - Policy, Planning and Communication
Witmer, David	Vice President, Member Services
Wolfe, Carol	Vice President, Publications and Drug Information Systems
Yaklyvich, Tracy	Assistant Controller
Zappala, Fern	General Counsel & Vice President, Human Resources

Exhibit L

Disclosure Report Forms from the ASHP Board of Directors

2006 Board of Directors



TO: Henri R. Manasse, Jr.
Secretary, Board of Directors

FROM: JAMES G. STEVENSON

SUBJECT: Disclosure Report

DATE: 9/18/06

Having read and understood the "ASHP Policy on Disclosure of Outside Activities," and the "ASHP Policy on External Professional and Business Activities," I hereby make the following disclosure pursuant to those policies. I understand that disclosure is a continuing obligation and that in addition to the annual completion of this form I will keep the Board updated at other meetings of the Board, and make additional disclosures in accord with Board policies.

- 1. List any health-related board, advisory panel, regulatory body, office, committee or programs which you have participated in during the past 12 months (include the name of the entity, the position held).

Company/Agency	Activity/Service
Amgen	HOSPITAL PHARMACY ADVISORY BOARD, SPENCERS BOUND
MGI PHARM	HOSPITAL PHARMACY ADVISORY BOARD
ABBOTT	HOSPITAL PHARMACY ADVISORY BOARD
ELI LILLY	HOSPITAL PHARMACY ADVISORY BOARD

- 2. List any health-related publications, or products, excluding ASHP publications/products, which you contributed to in the past 12 months that might raise concerns that such outside activities are competing with ASHP products, services or other membership activities.

None

- 3. List any grants received during the past 12 months, including name of granting entity and purpose and/or scope of grant.

Organization	Grant Purpose/Scope
MICHIGAN DEPARTMENT OF LABOR	PHARMACY TECHNICIAN TRAINING GRANT (TO ENHANCE TRAINING OF PHARMACY TECHNICIANS IN MICHIGAN)

4. List the sources for scholarships, awards, gifts, honoraria, monies or other benefits, which exceed \$10,000 or ten percent of your gross annual income, received during the past 12 months from activities, services, retainers or consultancies (include the name of the paying entity, and a description of your service) that might give rise to a conflict of interest with ASHP.

Organization

Service/Activity

NONE

5. Describe, to the best of your knowledge, any financial interest which exceeds ten percent of your gross annual income or a ten percent equity interest, or other significant interest of yourself or an immediate family relative, such as a spouse, child or parent, in any outside activity or entity which does substantial business with or is in direct competition with ASHP.

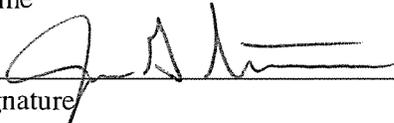
NONE

6. Describe, to the best of your knowledge, any other transactions or actions in the past 12 months in which you or an immediate family member has a personal interest or in which you competed, directly or indirectly, with the interests of ASHP.

NONE

JAMES G. STEVENSON

Name



Signature

9/18/06

Date

Revision Approved by Board of Directors April 24, 2001



TO: Henri R. Manasse, Jr.
Secretary, Board of Directors

FROM: JANET A. SILVESTER

SUBJECT: Disclosure Report

DATE: 9/18/06

Having read and understood the "ASHP Policy on Disclosure of Outside Activities," and the "ASHP Policy on External Professional and Business Activities," I hereby make the following disclosure pursuant to those policies. I understand that disclosure is a continuing obligation and that in addition to the annual completion of this form I will keep the Board updated at other meetings of the Board, and make additional disclosures in accord with Board policies.

- 1. List any health-related board, advisory panel, regulatory body, office, committee or programs which you have participated in during the past 12 months (include the name of the entity, the position held).

Company/Agency

Activity/Service

VCU NATIONAL ADVISORY COUNCIL - DEAN'S ADVISORY - MEMBER
INNOVATION EXECUTIVE PHARMACY COUNCIL - PAST CHAIR
VIRGINIA INSTITUTE FOR PHARMACEUTICAL CARE BOARD - MEMBER

- 2. List any health-related publications, or products, excluding ASHP publications/products, which you contributed to in the past 12 months that might raise concerns that such outside activities are competing with ASHP products, services or other membership activities.

NONE

- 3. List any grants received during the past 12 months, including name of granting entity and purpose and/or scope of grant.

Organization

Grant Purpose/Scope

NONE

4. List the sources for scholarships, awards, gifts, honoraria, monies or other benefits, which exceed \$10,000 or ten percent of your gross annual income, received during the past 12 months from activities, services, retainers or consultancies (include the name of the paying entity, and a description of your service) that might give rise to a conflict of interest with ASHP.

Organization

Service/Activity

NONE

5. Describe, to the best of your knowledge, any financial interest which exceeds ten percent of your gross annual income or a ten percent equity interest, or other significant interest of yourself or an immediate family relative, such as a spouse, child or parent, in any outside activity or entity which does substantial business with or is in direct competition with ASHP.

NONE

6. Describe, to the best of your knowledge, any other transactions or actions in the past 12 months in which you or an immediate family member has a personal interest or in which you competed, directly or indirectly, with the interests of ASHP.

NONE

JANET A. SILVESTER

Name

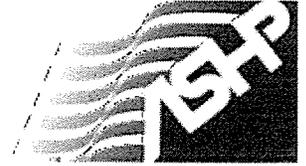
Janet A Silvester

Signature

10/15/06

Date

Revision Approved by Board of Directors April 24, 2001



TO: Henri R. Manasse, Jr.
Secretary, Board of Directors

FROM: Kathryn R. Schultz

SUBJECT: Disclosure Report

DATE: 9/21/06

Having read and understood the "ASHP Policy on Disclosure of Outside Activities," and the "ASHP Policy on External Professional and Business Activities," I hereby make the following disclosure pursuant to those policies. I understand that disclosure is a continuing obligation and that in addition to the annual completion of this form I will keep the Board updated at other meetings of the Board, and make additional disclosures in accord with Board policies.

- 1. List any health-related board, advisory panel, regulatory body, office, committee or programs which you have participated in during the past 12 months (include the name of the entity, the position held).

Company/Agency	Activity/Service
Sanofi Antis Pasteur	Advisory board (vaccines)

- 2. List any health-related publications, or products, excluding ASHP publications/products, which you contributed to in the past 12 months that might raise concerns that such outside activities are competing with ASHP products, services or other membership activities.

None

- 3. List any grants received during the past 12 months, including name of granting entity and purpose and/or scope of grant.

Organization	Grant Purpose/Scope
None	

4. List the sources for scholarships, awards, gifts, honoraria, monies or other benefits, which exceed \$10,000 or ten percent of your gross annual income, received during the past 12 months from activities, services, retainers or consultancies (include the name of the paying entity, and a description of your service) that might give rise to a conflict of interest with ASHP.

Organization

Service/Activity

None

5. Describe, to the best of your knowledge, any financial interest which exceeds ten percent of your gross annual income or a ten percent equity interest, or other significant interest of yourself or an immediate family relative, such as a spouse, child or parent, in any outside activity or entity which does substantial business with or is in direct competition with ASHP.

None

6. Describe, to the best of your knowledge, any other transactions or actions in the past 12 months in which you or an immediate family member has a personal interest or in which you competed, directly or indirectly, with the interests of ASHP.

None

Kathryn R. Schultz
Name

Kathryn Schultz
Signature

9/21/06.
Date

Revision Approved by Board of Directors April 24, 2001



TO: Henri R. Manasse, Jr.
 Secretary, Board of Directors

FROM: JANET A. SILVESTER

SUBJECT: Disclosure Report

DATE: 9/18/06

Having read and understood the "ASHP Policy on Disclosure of Outside Activities," and the "ASHP Policy on External Professional and Business Activities," I hereby make the following disclosure pursuant to those policies. I understand that disclosure is a continuing obligation and that in addition to the annual completion of this form I will keep the Board updated at other meetings of the Board, and make additional disclosures in accord with Board policies.

1. List any health-related board, advisory panel, regulatory body, office, committee or programs which you have participated in during the past 12 months (include the name of the entity, the position held).

Company/Agency	Activity/Service
<u>VCU NATIONAL ADVISORY COUNCIL</u>	<u>DEAN'S ADVISORY - MEMBER</u>
<u>INNOVATION EXECUTIVE PHARMACY COUNCIL</u>	<u>PAST CHAIR</u>
<u>VIRGINIA INSTITUTE FOR PHARMACEUTICAL CARE BOARD</u>	<u>MEMBER</u>

2. List any health-related publications, or products, excluding ASHP publications/products, which you contributed to in the past 12 months that might raise concerns that such outside activities are competing with ASHP products, services or other membership activities.

NONE

3. List any grants received during the past 12 months, including name of granting entity and purpose and/or scope of grant.

Organization	Grant Purpose/Scope
<u>NONE</u>	

4. List the sources for scholarships, awards, gifts, honoraria, monies or other benefits, which exceed \$10,000 or ten percent of your gross annual income, received during the past 12 months from activities, services, retainers or consultancies (include the name of the paying entity, and a description of your service) that might give rise to a conflict of interest with ASHP.

Organization

Service/Activity

NONE

5. Describe, to the best of your knowledge, any financial interest which exceeds ten percent of your gross annual income or a ten percent equity interest, or other significant interest of yourself or an immediate family relative, such as a spouse, child or parent, in any outside activity or entity which does substantial business with or is in direct competition with ASHP.

NONE

6. Describe, to the best of your knowledge, any other transactions or actions in the past 12 months in which you or an immediate family member has a personal interest or in which you competed, directly or indirectly, with the interests of ASHP.

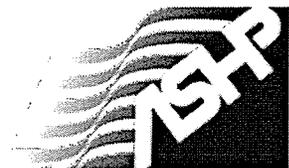
NONE

JANET A. SILVESTER
Name

Janet A Silvester
Signature

12/15/06
Date

Revision Approved by Board of Directors April 24, 2001



TO: Henri R. Manasse, Jr.
Secretary, Board of Directors

FROM: Teresa Hudson

SUBJECT: Disclosure Report

DATE: 9-18-06

Having read and understood the "ASHP Policy on Disclosure of Outside Activities," and the "ASHP Policy on External Professional and Business Activities," I hereby make the following disclosure pursuant to those policies. I understand that disclosure is a continuing obligation and that in addition to the annual completion of this form I will keep the Board updated at other meetings of the Board, and make additional disclosures in accord with Board policies.

- 1. List any health-related board, advisory panel, regulatory body, office, committee or programs which you have participated in during the past 12 months (include the name of the entity, the position held).

Company/Agency

Activity/Service

AR Medicaid Drug Utilization Review Committee - Committee Member

WAMS College of Pharmacy, Drug Review Committee - Committee Member

- 2. List any health-related publications, or products, excluding ASHP publications/products, which you contributed to in the past 12 months that might raise concerns that such outside activities are competing with ASHP products, services or other membership activities.

All health-related publications were in peer-reviewed journals

- 3. List any grants received during the past 12 months, including name of granting entity and purpose and/or scope of grant.

Organization

Grant Purpose/Scope

(PI) Florida Mental Health Institute at the University of South Florida:
I conducted an analysis of drug spend and its association with various policies in the Florida Medicaid program, a survey of physicians affected by the policies and an analysis of change in prescribing patterns assoc. with the policies.

(PI) BMS: grant to use VA data to examine the differential effect of antipsychotic medications on weight gain, dyslipidemia and the relationship between weight gain and adherence to antipsychotic medications

BOARD Disclosure Report Form Formated.doc

(Co-I) AHRQ - I'm Co-I for a center grant to build research infrastructure at WAMS using secondary data specifically AR Medicaid BEBS. I am the primary investigator in a project to develop models evaluating racial disparities in antipsychotic use in 3 dx states

4. List the sources for scholarships, awards, gifts, honoraria, monies or other benefits, which exceed \$10,000 or ten percent of your gross annual income, received during the past 12 months from activities, services, retainers or consultancies (include the name of the paying entity, and a description of your service) that might give rise to a conflict of interest with ASHP.

Organization

Service/Activity

None

5. Describe, to the best of your knowledge, any financial interest which exceeds ten percent of your gross annual income or a ten percent equity interest, or other significant interest of yourself or an immediate family relative, such as a spouse, child or parent, in any outside activity or entity which does substantial business with or is in direct competition with ASHP.

None

6. Describe, to the best of your knowledge, any other transactions or actions in the past 12 months in which you or an immediate family member has a personal interest or in which you competed, directly or indirectly, with the interests of ASHP.

None

Teresa Hudson

Name

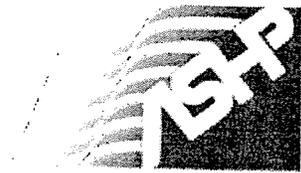
Teresa Hudson

Signature

9-18-06

Date

Revision Approved by Board of Directors April 24, 2001



TO: Henri R. Manasse, Jr.
Secretary, Board of Directors

FROM: Phil Schneider

SUBJECT: Disclosure Report

DATE: 3-15-06

Having read and understood the "ASHP Policy on Disclosure of Outside Activities," and the "ASHP Policy on External Professional and Business Activities," I hereby make the following disclosure pursuant to those policies. I understand that disclosure is a continuing obligation and that in addition to the annual completion of this form I will keep the Board updated at other meetings of the Board, and make additional disclosures in accord with Board policies.

- 1. List any health-related board, advisory panel, regulatory body, office, committee or programs which you have participated in during the past 12 months (include the name of the entity, the position held).

Company/Agency	Activity/Service
<u>Med Assets Clinical Pharmacy Advisory Committee</u>	<u>- Committee Member</u>
<u>CAPB Pharmacy Advisory Panel</u>	<u>- Committee Member</u>

- 2. List any health-related publications, or products, excluding ASHP publications/products, which you contributed to in the past 12 months that might raise concerns that such outside activities are competing with ASHP products, services or other membership activities.

<u>Alpha Handbook of non-prescription drugs</u>	<u>- Chapter reviewer</u>
<u>Annals of Pharmacotherapy</u>	<u>- Journal referee</u>

- 3. List any grants received during the past 12 months, including name of granting entity and purpose and/or scope of grant.

Organization	Grant Purpose/Scope
<u>Ø</u>	

4. List the sources for scholarships, awards, gifts, honoraria, monies or other benefits, which exceed \$10,000 or ten percent of your gross annual income, received during the past 12 months from activities, services, retainers or consultancies (include the name of the paying entity, and a description of your service) that might give rise to a conflict of interest with ASHP.

Organization

Service/Activity

Ø

5. Describe, to the best of your knowledge, any financial interest which exceeds ten percent of your gross annual income or a ten percent equity interest, or other significant interest of yourself or an immediate family relative, such as a spouse, child or parent, in any outside activity or entity which does substantial business with or is in direct competition with ASHP.

Ø

6. Describe, to the best of your knowledge, any other transactions or actions in the past 12 months in which you or an immediate family member has a personal interest or in which you competed, directly or indirectly, with the interests of ASHP.

Ø

Philip J. Schneider
Name

[Signature]
Signature

Date



TO: Henri R. Manasse, Jr.
Secretary, Board of Directors

FROM: Kevin Colgan

SUBJECT: Disclosure Report

DATE: MARCH 31, 2006

Having read and understood the "ASHP Policy on Disclosure of Outside Activities," and the "ASHP Policy on External Professional and Business Activities," I hereby make the following disclosure pursuant to those policies. I understand that disclosure is a continuing obligation and that in addition to the annual completion of this form I will keep the Board updated at other meetings of the Board, and make additional disclosures in accord with Board policies.

- List any health-related board, advisory panel, regulatory body, office, committee or programs which you have participated in during the past 12 months (include the name of the entity, the position held).

Company/Agency	Activity/Service

- List any health-related publications, or products, excluding ASHP publications/products, which you contributed to in the past 12 months that might raise concerns that such outside activities are competing with ASHP products, services or other membership activities.

- Tapson V F, et al. Antithrombotic therapy Practices in US Hospitals in an era of guidelines. Arch Intern Med. 2005; 165: 1458-1464
- WADOAL, et al. Hospitalized Patients with atrial fibrillation and a high risk of Stroke are not being provided adequate Anticoagulation. J Am Coll Cardiol 2005; 46: 1729-36
- Caprini, JA, et al. TREATMENT OF Venous Thromboembolism: Adherence to guidelines and Impact of physician Knowledge, attitudes, and beliefs. J Vasc Surg 2005; 42: 726-733

- List any grants received during the past 12 months, including name of granting entity and purpose and/or scope of grant.

Organization	Grant Purpose/Scope
ABBOTT	HIV Research
AstraZeneca	Anticoagulation
AstraZeneca	Contraception
AstraZeneca	Bipolar Disorder
Genentech	Growth Hormone
Gilead	HIV Research
Novartis	ASTHMA Research
Novartis	ASTHMA Research
Roche	Hepatitis C
ABBOTT	Bipolar Research
ABBOTT	Hyperparathyroidism

C:\Documents and Settings\kevinc\Local Settings\Temporary Internet Files\OLK16\All.doc

- 4. List the sources for scholarships, awards, gifts, honoraria, monies or other benefits, which exceed \$10,000 or ten percent of your gross annual income, received during the past 12 months from activities, services, retainers or consultancies (include the name of the paying entity, and a description of your service) that might give rise to a conflict of interest with ASHP.

Organization	Service/Activity
NONE	

- 5. Describe, to the best of your knowledge, any financial interest which exceeds ten percent of your gross annual income or a ten percent equity interest, or other significant interest of yourself or an immediate family relative, such as a spouse, child or parent, in any outside activity or entity which does substantial business with or is in direct competition with ASHP.

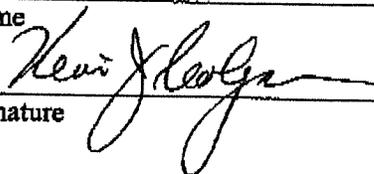
NONE

- 6. Describe, to the best of your knowledge, any other transactions or actions in the past 12 months in which you or an immediate family member has a personal interest or in which you competed, directly or indirectly, with the interests of ASHP.

My firm has a confidential non disclosure agreement with Gold Standard Related for co-development of products utilizing e-prescribing technology from Informed Decisions, a subsidiary of Gold Standard.

Kevin COLGAN

Name

Signature 

3/31/06
Date

Revision Approved by Board of Directors April 24, 2001

Previously
filled.



TO: Henri R. Manasse, Jr.
Secretary, Board of Directors

FROM: JANET SILVESTER

SUBJECT: Disclosure Report

DATE: 3/19/06

Having read and understood the "ASHP Policy on Disclosure of Outside Activities," and the "ASHP Policy on External Professional and Business Activities," I hereby make the following disclosure pursuant to those policies. I understand that disclosure is a continuing obligation and that in addition to the annual completion of this form I will keep the Board updated at other meetings of the Board, and make additional disclosures in accord with Board policies.

1. List any health-related board, advisory panel, regulatory body, office, committee or programs which you have participated in during the past 12 months (include the name of the entity, the position held).

Company/Agency	Activity/Service
<u>VSHP</u>	<u>STATE AFFILIATE</u>
<u>VIPC</u>	<u>SECRETARY</u>
<u>NOVATION</u>	<u>EXECUTIVE PHARMACY COUNCIL</u>

2. List any health-related publications, or products, excluding ASHP publications/products, which you contributed to in the past 12 months that might raise concerns that such outside activities are competing with ASHP products, services or other membership activities.

NONE

3. List any grants received during the past 12 months, including name of granting entity and purpose and/or scope of grant.

Organization	Grant Purpose/Scope
<u>NONE</u>	

4. List the sources for scholarships, awards, gifts, honoraria, monies or other benefits, which exceed \$10,000 or ten percent of your gross annual income, received during the past 12 months from activities, services, retainers or consultancies (include the name of the paying entity, and a description of your service) that might give rise to a conflict of interest with ASHP.

Organization

Service, Activity

NONE THAT QUALIFY

5. Describe, to the best of your knowledge, any financial interest which exceeds ten percent of your gross annual income or a ten percent equity interest, or other significant interest of yourself or an immediate family relative, such as a spouse, child or parent, in any outside activity or entity which does substantial business with or is in direct competition with ASHP.

NONE

6. Describe, to the best of your knowledge, any other transactions or actions in the past 12 months in which you or an immediate family member has a personal interest or in which you competed, directly or indirectly, with the interests of ASHP.

NONE

JANET A. SILVESTER

Name

Janet A. Silvester

Signature

5/19/06

Date

FEB 23 2006



TO: Henri R. Manasse, Jr.
 Secretary, Board of Directors

FROM: Cindi Brennan

SUBJECT: Disclosure Report

DATE: 2/17/06

Having read and understood the "ASHP Policy on Disclosure of Outside Activities," and the "ASHP Policy on External Professional and Business Activities," I hereby make the following disclosure pursuant to those policies. I understand that disclosure is a continuing obligation and that in addition to the annual completion of this form I will keep the Board updated at other meetings of the Board, and make additional disclosures in accord with Board policies.

1. List any health-related board, advisory panel, regulatory body, office, committee or programs which you have participated in during the past 12 months (include the name of the entity, the position held).

Company/Agency	Activity/Service
<u>Qualis Health (Q10)</u>	<u>Consultant, Pharmacist QI Project</u>
<u>River Sound Health Alliance</u>	<u>Cardiovascular Clinical Improvement Team</u>

2. List any health-related publications, or products, excluding ASHP publications/products, which you contributed to in the past 12 months that might raise concerns that such outside activities are competing with ASHP products, services or other membership activities.

[Signature]

3. List any grants received during the past 12 months, including name of granting entity and purpose and/or scope of grant.

Organization	Grant Purpose/Scope
<u>[Signature]</u>	

4. List the sources for scholarships, awards, gifts, honoraria, monies or other benefits, which exceed \$10,000 or ten percent of your gross annual income, received during the past 12 months from activities, services, retainers or consultancies (include the name of the paying entity, and a description of your service) that might give rise to a conflict of interest with ASHP.

Organization

Service Activity

5. Describe, to the best of your knowledge, any financial interest which exceeds ten percent of your gross annual income or a ten percent equity interest, or other significant interest of yourself or an immediate family relative, such as a spouse, child or parent, in any outside activity or entity which does substantial business with or is in direct competition with ASHP.

6. Describe, to the best of your knowledge, any other transactions or actions in the past 12 months in which you or an immediate family member has a personal interest or in which you competed, directly or indirectly, with the interests of ASHP.

Cynthia Brennan
Name

Cynthia Brennan
Signature

2/17/06
Date



TO: Henri R. Manasse, Jr.
Secretary, Board of Directors

FROM: Diane Ginsburg

SUBJECT: Disclosure Report

DATE: 3/3/02

Having read and understood the "ASHP Policy on Disclosure of Outside Activities," and the "ASHP Policy on External Professional and Business Activities," I hereby make the following disclosure pursuant to those policies. I understand that disclosure is a continuing obligation and that in addition to the annual completion of this form I will keep the Board updated at other meetings of the Board, and make additional disclosures in accord with Board policies.

1. List any health-related board, advisory panel, regulatory body, office, committee or programs which you have participated in during the past 12 months (include the name of the entity, the position held).

Company/Agency	Activity/Service
<u>∅</u>	

2. List any health-related publications, or products, excluding ASHP publications/products, which you contributed to in the past 12 months that might raise concerns that such outside activities are competing with ASHP products, services or other membership activities.

<u>∅</u>

3. List any grants received during the past 12 months, including name of granting entity and purpose and/or scope of grant.

Organization	Grant Purpose/Scope
<u>∅</u>	

4. List the sources for scholarships, awards, gifts, honoraria, monies or other benefits, which exceed \$10,000 or ten percent of your gross annual income, received during the past 12 months from activities, services, retainers or consultancies (include the name of the paying entity, and a description of your service) that might give rise to a conflict of interest with ASHP.

Organization

Service Activity

~~Ø~~

5. Describe, to the best of your knowledge, any financial interest which exceeds ten percent of your gross annual income or a ten percent equity interest, or other significant interest of yourself or an immediate family relative, such as a spouse, child or parent, in any outside activity or entity which does substantial business with or is in direct competition with ASHP.

~~Ø~~

6. Describe, to the best of your knowledge, any other transactions or actions in the past 12 months in which you or an immediate family member has a personal interest or in which you competed, directly or indirectly, with the interests of ASHP.

~~Ø~~

Name

Signature

Date

Revision Approved by Board of Directors April 24, 2001

P:\Board of Directors\Correspondence\Statements\All.doc

Karen Ginsburg

[Signature]

3/3/06



TO: Henri R. Manasse, Jr.
Secretary, Board of Directors

FROM: STAN KONT

SUBJECT: Disclosure Report

DATE: 3-7-06

Having read and understood the "ASHP Policy on Disclosure of Outside Activities," and the "ASHP Policy on External Professional and Business Activities," I hereby make the following disclosure pursuant to those policies. I understand that disclosure is a continuing obligation and that in addition to the annual completion of this form I will keep the Board updated at other meetings of the Board, and make additional disclosures in accord with Board policies.

- 1. List any health-related board, advisory panel, regulatory body, office, committee or programs which you have participated in during the past 12 months (include the name of the entity, the position held).

Company/Agency	Activity/Service
LILLY	ADVISORY PANEL

- 2. List any health-related publications, or products, excluding ASHP publications/products, which you contributed to in the past 12 months that might raise concerns that such outside activities are competing with ASHP products, services or other membership activities.

NONE

- 3. List any grants received during the past 12 months, including name of granting entity and purpose and/or scope of grant.

Organization	Grant Purpose/Scope
NONE	

4. List the sources for scholarships, awards, gifts, honoraria, monies or other benefits, which exceed \$10,000 or ten percent of your gross annual income, received during the past 12 months from activities, services, retainers or consultancies (include the name of the paying entity, and a description of your service) that might give rise to a conflict of interest with ASHP.

Organization

Service, Activity

NONE

5. Describe, to the best of your knowledge, any financial interest which exceeds ten percent of your gross annual income or a ten percent equity interest, or other significant interest of yourself or an immediate family relative, such as a spouse, child or parent, in any outside activity or entity which does substantial business with or is in direct competition with ASHP.

NONE

6. Describe, to the best of your knowledge, any other transactions or actions in the past 12 months in which you or an immediate family member has a personal interest or in which you competed, directly or indirectly, with the interests of ASHP.

NONE

STAN KENT

Name

Stan Kent

Signature

3-7-06

Date



TO: Henri R. Manasse, Jr.
 Secretary, Board of Directors

FROM: Sheila Mitchell

SUBJECT: Disclosure Report

DATE: 3-13-06

Having read and understood the "ASHP Policy on Disclosure of Outside Activities," and the "ASHP Policy on External Professional and Business Activities," I hereby make the following disclosure pursuant to those policies. I understand that disclosure is a continuing obligation and that in addition to the annual completion of this form I will keep the Board updated at other meetings of the Board, and make additional disclosures in accord with Board policies.

- List any health-related board, advisory panel, regulatory body, office, committee or programs which you have participated in during the past 12 months (include the name of the entity, the position held).

Company/Agency	Activity/Service
Tennessee Board of Pharmacy	
Tenn. Pharmacists Asso.	Exec Board of Directors
Nat. Asso. Boards of Pharmacy	Task Force on USA-797

- List any health-related publications, or products, excluding ASHP publications/products, which you contributed to in the past 12 months that might raise concerns that such outside activities are competing with ASHP products, services or other membership activities.

None

- List any grants received during the past 12 months, including name of granting entity and purpose and/or scope of grant.

Organization	Grant Purpose/Scope
<u>None</u>	

4. List the sources for scholarships, awards, gifts, honoraria, monies or other benefits, which exceed \$10,000 or ten percent of your gross annual income, received during the past 12 months from activities, services, retainers or consultancies (include the name of the paying entity, and a description of your service) that might give rise to a conflict of interest with ASHP.

Organization

Service, Activity

None

5. Describe, to the best of your knowledge, any financial interest which exceeds ten percent of your gross annual income or a ten percent equity interest, or other significant interest of yourself or an immediate family relative, such as a spouse, child or parent, in any outside activity or entity which does substantial business with or is in direct competition with ASHP.

None

6. Describe, to the best of your knowledge, any other transactions or actions in the past 12 months in which you or an immediate family member has a personal interest or in which you competed, directly or indirectly, with the interests of ASHP.

None

Sheila Mitchell

Name

Sheila Mitchell

Signature

3-13-06

Date



TO: Henri R. Manasse, Jr.
Secretary, Board of Directors

FROM: Lynne M Mahoney

SUBJECT: Disclosure Report

DATE: _____

Having read and understood the "ASHP Policy on Disclosure of Outside Activities," and the "ASHP Policy on External Professional and Business Activities," I hereby make the following disclosure pursuant to those policies. I understand that disclosure is a continuing obligation and that in addition to the annual completion of this form I will keep the Board updated at other meetings of the Board, and make additional disclosures in accord with Board policies.

1. List any health-related board, advisory panel, regulatory body, office, committee or programs which you have participated in during the past 12 months (include the name of the entity, the position held).

Company/Agency	Activity/Service
<u>VA</u>	<u>Pharmacy Strategic Planning Committee - member</u>
_____	_____
_____	_____

2. List any health-related publications, or products, excluding ASHP publications/products, which you contributed to in the past 12 months that might raise concerns that such outside activities are competing with ASHP products, services or other membership activities.

None

3. List any grants received during the past 12 months, including name of granting entity and purpose and/or scope of grant.

Organization	Grant Purpose/Scope
<u>None</u>	
_____	_____
_____	_____

4. List the sources for scholarships, awards, gifts, honoraria, monies or other benefits, which exceed \$10,000 or ten percent of your gross annual income, received during the past 12 months from activities, services, retainers or consultancies (include the name of the paying entity, and a description of your service) that might give rise to a conflict of interest with ASHP.

Organization	Service/Activity
<i>None</i>	

5. Describe, to the best of your knowledge, any financial interest which exceeds ten percent of your gross annual income or a ten percent equity interest, or other significant interest of yourself or an immediate family relative, such as a spouse, child or parent, in any outside activity or entity which does substantial business with or is in direct competition with ASHP.

None

6. Describe, to the best of your knowledge, any other transactions or actions in the past 12 months in which you or an immediate family member has a personal interest or in which you competed, directly or indirectly, with the interests of ASHP.

*Contract consultant with Vizante Inc,
Subcontractor for Corman Health Group.
\$10,000 or 10% of gross annual income*

Lynnae M Mahoney

Name

Lynnae M Mahoney

Signature

2/16/04

Date



TO: Henri R. Manasse, Jr.
Secretary, Board of Directors

FROM: Agatha Nolen

SUBJECT: Disclosure Report

DATE: 3/3/06

Having read and understood the "ASHP Policy on Disclosure of Outside Activities," and the "ASHP Policy on External Professional and Business Activities," I hereby make the following disclosure pursuant to those policies. I understand that disclosure is a continuing obligation and that in addition to the annual completion of this form I will keep the Board updated at other meetings of the Board, and make additional disclosures in accord with Board policies.

- 1. List any health-related board, advisory panel, regulatory body, office, committee or programs which you have participated in during the past 12 months (include the name of the entity, the position held).

Company/Agency

Activity/Service

none

- 2. List any health-related publications, or products, excluding ASHP publications/products, which you contributed to in the past 12 months that might raise concerns that such outside activities are competing with ASHP products, services or other membership activities.

none

- 3. List any grants received during the past 12 months, including name of granting entity and purpose and/or scope of grant.

Organization

Grant Purpose/Scope

none

4. List the sources for scholarships, awards, gifts, honoraria, monies or other benefits, which exceed \$10,000 or ten percent of your gross annual income, received during the past 12 months from activities, services, retainers or consultancies (include the name of the paying entity, and a description of your service) that might give rise to a conflict of interest with ASHP.

Organization

Service/Activity

none

5. Describe, to the best of your knowledge, any financial interest which exceeds ten percent of your gross annual income or a ten percent equity interest, or other significant interest of yourself or an immediate family relative, such as a spouse, child or parent, in any outside activity or entity which does substantial business with or is in direct competition with ASHP.

none

6. Describe, to the best of your knowledge, any other transactions or actions in the past 12 months in which you or an immediate family member has a personal interest or in which you competed, directly or indirectly, with the interests of ASHP.

none

Agatha L. Nolen

Name

Agatha L. Nolen

Signature

3/3/06

Date



TO: Henri R. Manasse, Jr.
 Secretary, Board of Directors

FROM: MARTORIE PHILLIPS

SUBJECT: Disclosure Report

DATE: MARCH 5, 2006

Having read and understood the "ASHP Policy on Disclosure of Outside Activities," and the "ASHP Policy on External Professional and Business Activities," I hereby make the following disclosure pursuant to those policies. I understand that disclosure is a continuing obligation and that in addition to the annual completion of this form I will keep the Board updated at other meetings of the Board, and make additional disclosures in accord with Board policies.

1. List any health-related board, advisory panel, regulatory body, office, committee or programs which you have participated in during the past 12 months (include the name of the entity, the position held).

Company/Agency	Activity/Service
<u>USP-SAFE MEDICATION USE</u>	<u>EXPERT COMMITTEE (2005-2010) VICE CHAIR</u>
<u>SOUTHEASTERN RESIDENCY CONFERENCE, INC.</u>	<u>TREASURER THROUGH 5/05 FUNDRAISING CHAIR 5/05 - PRESENT</u>
<u>GSHP - GA SOCIETY OF HEALTH-SYSTEM PHARMACY</u>	<u>RESIDENT & STUDENT COMMITTEE</u>

2. List any health-related publications, or products, excluding ASHP publications/products, which you contributed to in the past 12 months that might raise concerns that such outside activities are competing with ASHP products, services or other membership activities.

- NONE -

3. List any grants received during the past 12 months, including name of granting entity and purpose and/or scope of grant.

Organization	Grant Purpose/Scope
<u>- NONE -</u>	

4. List the sources for scholarships, awards, gifts, honoraria, monies or other benefits, which exceed \$10,000 or ten percent of your gross annual income, received during the past 12 months from activities, services, retainers or consultancies (include the name of the paying entity, and a description of your service) that might give rise to a conflict of interest with ASHP.

Organization

Service/Activity

NONE

5. Describe, to the best of your knowledge, any financial interest which exceeds ten percent of your gross annual income or a ten percent equity interest, or other significant interest of yourself or an immediate family relative, such as a spouse, child or parent, in any outside activity or entity which does substantial business with or is in direct competition with ASHP.

NONE

6. Describe, to the best of your knowledge, any other transactions or actions in the past 12 months in which you or an immediate family member has a personal interest or in which you competed, directly or indirectly, with the interests of ASHP.

NONE

MARJORIE A. SNAW PHILLIPS

Name

Marjorie A. Phillips

Signature

5 MARCH 2006

Date



TO: Henri R. Manasse, Jr.
Secretary, Board of Directors

FROM: Jim Martin

SUBJECT: Disclosure Report

DATE: 3/30/06

Having read and understood the "ASHP Policy on Disclosure of Outside Activities," and the "ASHP Policy on External Professional and Business Activities," I hereby make the following disclosure pursuant to those policies. I understand that disclosure is a continuing obligation and that in addition to the annual completion of this form I will keep the Board updated at other meetings of the Board, and make additional disclosures in accord with Board policies.

- 1. List any health-related board, advisory panel, regulatory body, office, committee or programs which you have participated in during the past 12 months (include the name of the entity, the position held).

Company/Agency	Activity/Service
<u> </u>	<u> </u>
<u>TMB Consultant</u>	<u>Review Transplant Programs</u>
<u> </u>	<u> </u>

- 2. List any health-related publications, or products, excluding ASHP publications/products, which you contributed to in the past 12 months that might raise concerns that such outside activities are competing with ASHP products, services or other membership activities.

- 3. List any grants received during the past 12 months, including name of granting entity and purpose and/or scope of grant.

Organization	Grant Purpose/Scope
<u> </u>	<u> </u>
<u> </u>	<u> </u>
<u> </u>	<u> </u>

4. List the sources for scholarships, awards, gifts, honoraria, monies or other benefits, which exceed \$10,000 or ten percent of your gross annual income, received during the past 12 months from activities, services, retainers or consultancies (include the name of the paying entity, and a description of your service) that might give rise to a conflict of interest with ASHP.

Organization

Service/Activity

0

5. Describe, to the best of your knowledge, any financial interest which exceeds ten percent of your gross annual income or a ten percent equity interest, or other significant interest of yourself or an immediate family relative, such as a spouse, child or parent, in any outside activity or entity which does substantial business with or is in direct competition with ASHP.

0

6. Describe, to the best of your knowledge, any other transactions or actions in the past 12 months in which you or an immediate family member has a personal interest or in which you competed, directly or indirectly, with the interests of ASHP.

0

Jill Martin
Name

Jill Martin
Signature

3/30/06
Date

Revision Approved by Board of Directors April 24, 2001

P:\Board of Directors\Correspondence\Statements\All.doc

FEB 23 2006



TO: Henri R. Manasse, Jr.
 Secretary, Board of Directors

FROM: Cindi Brennan

SUBJECT: Disclosure Report

DATE: 2/17/06

Having read and understood the "ASHP Policy on Disclosure of Outside Activities," and the "ASHP Policy on External Professional and Business Activities," I hereby make the following disclosure pursuant to those policies. I understand that disclosure is a continuing obligation and that in addition to the annual completion of this form I will keep the Board updated at other meetings of the Board, and make additional disclosures in accord with Board policies.

1. List any health-related board, advisory panel, regulatory body, office, committee or programs which you have participated in during the past 12 months (include the name of the entity, the position held).

Company/Agency	Activity/Service
<u>Qualis Health (Q10)</u>	<u>Consultant, Pharmacist QI Project</u>
<u>Plyt Sound Health Alliance</u>	<u>Cardiovascular Clinical Improvement Team</u>

2. List any health-related publications, or products, excluding ASHP publications/products, which you contributed to in the past 12 months that might raise concerns that such outside activities are competing with ASHP products, services or other membership activities.

[Signature]

3. List any grants received during the past 12 months, including name of granting entity and purpose and/or scope of grant.

Organization	Grant Purpose, Scope
<u>[Signature]</u>	

4. List the sources for scholarships, awards, gifts, honoraria, monies or other benefits, which exceed \$10,000 or ten percent of your gross annual income, received during the past 12 months from activities, services, retainers or consultancies (include the name of the paying entity, and a description of your service) that might give rise to a conflict of interest with ASHP.

Organization

Service Activity

5. Describe, to the best of your knowledge, any financial interest which exceeds ten percent of your gross annual income or a ten percent equity interest, or other significant interest of yourself or an immediate family relative, such as a spouse, child or parent, in any outside activity or entity which does substantial business with or is in direct competition with ASHP.

6. Describe, to the best of your knowledge, any other transactions or actions in the past 12 months in which you or an immediate family member has a personal interest or in which you competed, directly or indirectly, with the interests of ASHP.

Cynthia Brennan
Name

Cynthia Brennan
Signature

2/17/06
Date

301-634-5768



TO: Henri R. Manasse, Jr.
Secretary, Board of Directors

FROM: Mark Woods

SUBJECT: Disclosure Report

DATE: 4/4/06

Having read and understood the "ASHP Policy on Disclosure of Outside Activities," and the "ASHP Policy on External Professional and Business Activities," I hereby make the following disclosure pursuant to those policies. I understand that disclosure is a continuing obligation and that in addition to the annual completion of this form I will keep the Board updated at other meetings of the Board, and make additional disclosures in accord with Board policies.

1. List any health-related board, advisory panel, regulatory body, office, committee or programs which you have participated in during the past 12 months (include the name of the entity, the position held).

Company/Agency	Activity/Service
<u>none</u>	

2. List any health-related publications, or products, excluding ASHP publications/products, which you contributed to in the past 12 months that might raise concerns that such outside activities are competing with ASHP products, services or other membership activities.

<u>none</u>

3. List any grants received during the past 12 months, including name of granting entity and purpose and/or scope of grant.

Organization	Grant Purpose/Scope
<u>none</u>	

- 4. List the sources for scholarships, awards, gifts, honoraria, monies or other benefits, which exceed \$10,000 or ten percent of your gross annual income, received during the past 12 months from activities, services, retainers or consultancies (include the name of the paying entity, and a description of your service) that might give rise to a conflict of interest with ASHP.

Organization

Service/Activity

none - All honoraria have been given to the ASHP Foundation

- 5. Describe, to the best of your knowledge, any financial interest which exceeds ten percent of your gross annual income or a ten percent equity interest, or other significant interest of yourself or an immediate family relative, such as a spouse, child or parent, in any outside activity or entity which does substantial business with or is in direct competition with ASHP.

none

- 6. Describe, to the best of your knowledge, any other transactions or actions in the past 12 months in which you or an immediate family member has a personal interest or in which you competed, directly or indirectly, with the interests of ASHP.

none

Mark Woods
Name

Mark Woods
Signature

4/4/06
Date

Revision Approved by Board of Directors April 24, 2001



TO: Henri R. Manasse, Jr.
Secretary, Board of Directors

FROM: Marianne F. Ivey

SUBJECT: Disclosure Report

DATE: March 22, 2006

Having read and understood the "ASHP Policy on Disclosure of Outside Activities," and the "ASHP Policy on External Professional and Business Activities," I hereby make the following disclosure pursuant to those policies. I understand that disclosure is a continuing obligation and that in addition to the annual completion of this form I will keep the Board updated at other meetings of the Board, and make additional disclosures in accord with Board policies.

1. List any health-related board, advisory panel, regulatory body, office, committee or programs which you have participated in during the past 12 months (include the name of the entity, the position held).

Company/Agency	Activity/Service
AmerisourceBergen	Executive Leadership Meeting
McKesson	Best Practices Document
VSHP	Presentation (Oct 2005)
TSHP	Presentation (Apr 2006)
American Heart Assoc	Heart Ball Committee
Cincinnati Medical Heritage Center	Board of Directors

2. List any health-related publications, or products, excluding ASHP publications/products, which you contributed to in the past 12 months that might raise concerns that such outside activities are competing with ASHP products, services or other membership activities.

3. List any grants received during the past 12 months, including name of granting entity and purpose and/or scope of grant.

Organization	Grant Purpose/Scope

4. List the sources for scholarships, awards, gifts, honoraria, monies or other benefits, which exceed \$10,000 or ten percent of your gross annual income, received during the past 12 months from activities, services, retainers or consultancies (include the name of the paying entity, and a description of your service) that might give rise to a conflict of interest with ASHP.

Organization

Service/Activity

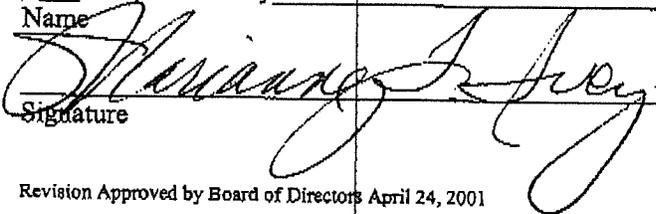
5. Describe, to the best of your knowledge, any financial interest which exceeds ten percent of your gross annual income or a ten percent equity interest, or other significant interest of yourself or an immediate family relative, such as a spouse, child or parent, in any outside activity or entity which does substantial business with or is in direct competition with ASHP.

6. Describe, to the best of your knowledge, any other transactions or actions in the past 12 months in which you or an immediate family member has a personal interest or in which you competed, directly or indirectly, with the interests of ASHP.

Marianne F. Ivey

Name

Signature



March 22, 2006

Date

Revision Approved by Board of Directors April 24, 2001

H:\ASHP\DisclosurePolicy&Form06.doc

Exhibit L

Disclosure Report Forms from the ASHP Board of Directors

2007 Board of Directors



TO: Henri R. Manasse, Jr.
Secretary, Board of Directors

FROM: Janet military

SUBJECT: Disclosure Report

DATE: 9/24/2007

Having read and understood the "ASHP Policy on Disclosure of Outside Activities," and the "ASHP Policy on External Professional and Business Activities," I hereby make the following disclosure pursuant to those policies. I understand that disclosure is a continuing obligation and that in addition to the annual completion of this form I will keep the Board updated at other meetings of the Board, and make additional disclosures in accord with Board policies.

- 1. List any health-related board, advisory panel, regulatory body, office, committee or programs which you have participated in during the past 12 months (include the name of the entity, the position held).

Company/Agency

Activity/Service

none

- 2. List any health-related publications, or products, excluding ASHP publications/products, which you contributed to in the past 12 months that might raise concerns that such outside activities are competing with ASHP products, services or other membership activities.

none

- 3. List any grants received during the past 12 months, including name of granting entity and purpose and/or scope of grant.

Organization

Grant Purpose/Scope

none

4. List the sources for scholarships, awards, gifts, honoraria, monies or other benefits, which exceed \$10,000 or ten percent of your gross annual income, received during the past 12 months from activities, services, retainers or consultancies (include the name of the paying entity, and a description of your service) that might give rise to a conflict of interest with ASHP.

Organization

Service/Activity

None

5. Describe, to the best of your knowledge, any financial interest which exceeds ten percent of your gross annual income or a ten percent equity interest, or other significant interest of yourself or an immediate family relative, such as a spouse, child or parent, in any outside activity or entity which does substantial business with or is in direct competition with ASHP.

None

6. Describe, to the best of your knowledge, any other transactions or actions in the past 12 months in which you or an immediate family member has a personal interest or in which you competed, directly or indirectly, with the interests of ASHP.

None

Janet MIGHTY
Name

Janet Mighty
Signature

9/24/2007
Date



TO: Henri R. Manasse, Jr.
Secretary, Board of Directors

FROM: JANET SILVESTER

SUBJECT: Disclosure Report

DATE: MARCH 20, 2007

Having read and understood the "ASHP Policy on Disclosure of Outside Activities," and the "ASHP Policy on External Professional and Business Activities," I hereby make the following disclosure pursuant to those policies. I understand that disclosure is a continuing obligation and that in addition to the annual completion of this form I will keep the Board updated at other meetings of the Board, and make additional disclosures in accord with Board policies.

- List any health-related board, advisory panel, regulatory body, office, committee or programs which you have participated in during the past 12 months (include the name of the entity, the position held).

Company/Agency	Activity/Service
<u>NOVATION EXECUTIVE PHARMACY COUNCIL</u>	<u>BOARD MEMBER</u>
<u>VEU NATIONAL ADVISORY COUNCIL (SCHOOL OF PHARMACY)</u>	<u>MEMBER</u>
<u>VIRGINIA INSTITUTE FOR PHARMACEUTICAL CARE</u>	<u>SECRETARY</u>

- List any health-related publications, or products, excluding ASHP publications/products, which you contributed to in the past 12 months that might raise concerns that such outside activities are competing with ASHP products, services or other membership activities.

NONE

- List any grants received during the past 12 months, including name of granting entity and purpose and/or scope of grant.

Organization	Grant Purpose/Scope
<u>NONE</u>	

4. List the sources for scholarships, awards, gifts, honoraria, monies or other benefits, which exceed \$10,000 or ten percent of your gross annual income, received during the past 12 months from activities, services, retainers or consultancies (include the name of the paying entity, and a description of your service) that might give rise to a conflict of interest with ASHP.

Organization

Service/Activity

NONE

5. Describe, to the best of your knowledge, any financial interest which exceeds ten percent of your gross annual income or a ten percent equity interest, or other significant interest of yourself or an immediate family relative, such as a spouse, child or parent, in any outside activity or entity which does substantial business with or is in direct competition with ASHP.

NONE

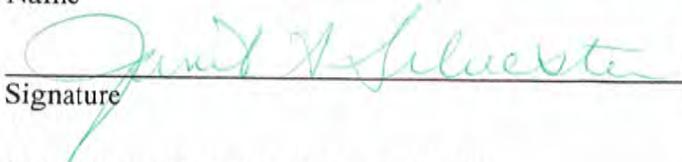
6. Describe, to the best of your knowledge, any other transactions or actions in the past 12 months in which you or an immediate family member has a personal interest or in which you competed, directly or indirectly, with the interests of ASHP.

NONE

Name

JANET A. SILVESTER

Signature



Date

3/20/07

Revision Approved by Board of Directors April 24, 2001

P:\Board of Directors\Correspondence\Statements\All.doc



TO: Henri R. Manasse, Jr.
 Secretary, Board of Directors

FROM: Cynthia Brennan

SUBJECT: Disclosure Report

DATE: 2/28/07

Having read and understood the "ASHP Policy on Disclosure of Outside Activities," and the "ASHP Policy on External Professional and Business Activities," I hereby make the following disclosure pursuant to those policies. I understand that disclosure is a continuing obligation and that in addition to the annual completion of this form I will keep the Board updated at other meetings of the Board, and make additional disclosures in accord with Board policies.

1. List any health-related board, advisory panel, regulatory body, office, committee or programs which you have participated in during the past 12 months (include the name of the entity, the position held).

Company/Agency	Activity/Service
<u>N/A</u>	

2. List any health-related publications, or products, excluding ASHP publications/products, which you contributed to in the past 12 months that might raise concerns that such outside activities are competing with ASHP products, services or other membership activities.

<u>N/A</u>

3. List any grants received during the past 12 months, including name of granting entity and purpose and/or scope of grant.

Organization	Grant Purpose/Scope
<u>N/A</u>	

4. List the sources for scholarships, awards, gifts, honoraria, monies or other benefits, which exceed \$10,000 or ten percent of your gross annual income, received during the past 12 months from activities, services, retainers or consultancies (include the name of the paying entity, and a description of your service) that might give rise to a conflict of interest with ASHP.

Organization

Service/Activity

N/A

5. Describe, to the best of your knowledge, any financial interest which exceeds ten percent of your gross annual income or a ten percent equity interest, or other significant interest of yourself or an immediate family relative, such as a spouse, child or parent, in any outside activity or entity which does substantial business with or is in direct competition with ASHP.

N/A

6. Describe, to the best of your knowledge, any other transactions or actions in the past 12 months in which you or an immediate family member has a personal interest or in which you competed, directly or indirectly, with the interests of ASHP.

N/A

Cynthia Brennan
Name

Cynthia Brennan
Signature

2/28/07
Date



TO: Henri R. Manasse, Jr.
 Secretary, Board of Directors

FROM: Diane Ginsburg

SUBJECT: Disclosure Report

DATE: 2/27/07

Having read and understood the "ASHP Policy on Disclosure of Outside Activities," and the "ASHP Policy on External Professional and Business Activities," I hereby make the following disclosure pursuant to those policies. I understand that disclosure is a continuing obligation and that in addition to the annual completion of this form I will keep the Board updated at other meetings of the Board, and make additional disclosures in accord with Board policies.

1. List any health-related board, advisory panel, regulatory body, office, committee or programs which you have participated in during the past 12 months (include the name of the entity, the position held).

Company/Agency	Activity/Service
<u>Vice President for Programs - ASHP R: E Foundation</u>	

2. List any health-related publications, or products, excluding ASHP publications/products, which you contributed to in the past 12 months that might raise concerns that such outside activities are competing with ASHP products, services or other membership activities.

<u>Ø</u>	

3. List any grants received during the past 12 months, including name of granting entity and purpose and/or scope of grant.

Organization	Grant Purpose/Scope
<u>Ø</u>	

4. List the sources for scholarships, awards, gifts, honoraria, monies or other benefits, which exceed \$10,000 or ten percent of your gross annual income, received during the past 12 months from activities, services, retainers or consultancies (include the name of the paying entity, and a description of your service) that might give rise to a conflict of interest with ASHP.

Organization

Service/Activity

Ø

5. Describe, to the best of your knowledge, any financial interest which exceeds ten percent of your gross annual income or a ten percent equity interest, or other significant interest of yourself or an immediate family relative, such as a spouse, child or parent, in any outside activity or entity which does substantial business with or is in direct competition with ASHP.

Ø

6. Describe, to the best of your knowledge, any other transactions or actions in the past 12 months in which you or an immediate family member has a personal interest or in which you competed, directly or indirectly, with the interests of ASHP.

Ø

Name

Signature

Date

Revision Approved by Board of Directors April 24, 2001

P:\Board of Directors\Correspondence\Statements\All.doc



TO: Henri R. Manasse, Jr.
Secretary, Board of Directors

FROM: Teresa Hudson _____

SUBJECT: Disclosure Report

DATE: 3-27-07

Having read and understood the "ASHP Policy on Disclosure of Outside Activities," and the "ASHP Policy on External Professional and Business Activities," I hereby make the following disclosure pursuant to those policies. I understand that disclosure is a continuing obligation and that in addition to the annual completion of this form I will keep the Board updated at other meetings of the Board, and make additional disclosures in accord with Board policies.

1. List any health-related board, advisory panel, regulatory body, office, committee or programs which you have participated in during the past 12 months (include the name of the entity, the position held).

Company/Agency

Activity/Service

_AR Medicaid Retrospective Drug Utilization Review Committee: Attend monthly meeting to review profiles for quality edits. _____

2. List any health-related publications, or products, excluding ASHP publications/products, which you contributed to in the past 12 months that might raise concerns that such outside activities are competing with ASHP products, services or other membership activities.

_____none_____

3. List any grants received during the past 12 months, including name of granting entity and purpose and/or scope of grant.

Organization

Grant Purpose/Scope

_____no new grants_____

4. List the sources for scholarships, awards, gifts, honoraria, monies or other benefits, which exceed \$10,000 or ten percent of your gross annual income, received during the past 12 months from activities, services, retainers or consultancies (include the name of the paying entity, and a description of your service) that might give rise to a conflict of interest with ASHP.

Organization

Service/Activity

none

5. Describe, to the best of your knowledge, any financial interest which exceeds ten percent of your gross annual income or a ten percent equity interest, or other significant interest of yourself or an immediate family relative, such as a spouse, child or parent, in any outside activity or entity which does substantial business with or is in direct competition with ASHP.

none

6. Describe, to the best of your knowledge, any other transactions or actions in the past 12 months in which you or an immediate family member has a personal interest or in which you competed, directly or indirectly, with the interests of ASHP.

none

Teresa Hudson
Name _____
Teresa Hudson
Signature _____

3/27/07
Date _____



TO: Henri R. Manasse, Jr.
Secretary, Board of Directors

FROM: STAN KENT

SUBJECT: Disclosure Report

DATE: 2/28/07

Having read and understood the "ASHP Policy on Disclosure of Outside Activities," and the "ASHP Policy on External Professional and Business Activities," I hereby make the following disclosure pursuant to those policies. I understand that disclosure is a continuing obligation and that in addition to the annual completion of this form I will keep the Board updated at other meetings of the Board, and make additional disclosures in accord with Board policies.

- 1. List any health-related board, advisory panel, regulatory body, office, committee or programs which you have participated in during the past 12 months (include the name of the entity, the position held).

Company/Agency	Activity/Service
<u>NONE</u>	

- 2. List any health-related publications, or products, excluding ASHP publications/products, which you contributed to in the past 12 months that might raise concerns that such outside activities are competing with ASHP products, services or other membership activities.

<u>NONE</u>

- 3. List any grants received during the past 12 months, including name of granting entity and purpose and/or scope of grant.

Organization	Grant Purpose/Scope
<u>NONE</u>	

4. List the sources for scholarships, awards, gifts, honoraria, monies or other benefits, which exceed \$10,000 or ten percent of your gross annual income, received during the past 12 months from activities, services, retainers or consultancies (include the name of the paying entity, and a description of your service) that might give rise to a conflict of interest with ASHP.

Organization

Service/Activity

NONE

5. Describe, to the best of your knowledge, any financial interest which exceeds ten percent of your gross annual income or a ten percent equity interest, or other significant interest of yourself or an immediate family relative, such as a spouse, child or parent, in any outside activity or entity which does substantial business with or is in direct competition with ASHP.

NONE

6. Describe, to the best of your knowledge, any other transactions or actions in the past 12 months in which you or an immediate family member has a personal interest or in which you competed, directly or indirectly, with the interests of ASHP.

NONE

STAN KENT

Name



Signature

2/28/07

Date



TO: Henri R. Manasse, Jr.
 Secretary, Board of Directors

FROM: Lynne Mahaney

SUBJECT: Disclosure Report

DATE: 3/12/07

Having read and understood the "ASHP Policy on Disclosure of Outside Activities," and the "ASHP Policy on External Professional and Business Activities," I hereby make the following disclosure pursuant to those policies. I understand that disclosure is a continuing obligation and that in addition to the annual completion of this form I will keep the Board updated at other meetings of the Board, and make additional disclosures in accord with Board policies.

1. List any health-related board, advisory panel, regulatory body, office, committee or programs which you have participated in during the past 12 months (include the name of the entity, the position held).

Company/Agency	Activity/Service
<u>VA</u>	<u>Presentation at VA Pharmacy Meeting</u>
	<u>Sept 06, Dallas TX - Prof.</u>
	<u>Demographics</u>

2. List any health-related publications, or products, excluding ASHP publications/products, which you contributed to in the past 12 months that might raise concerns that such outside activities are competing with ASHP products, services or other membership activities.

None

3. List any grants received during the past 12 months, including name of granting entity and purpose and/or scope of grant.

Organization	Grant Purpose/Scope
<u>None</u>	

4. List the sources for scholarships, awards, gifts, honoraria, monies or other benefits, which exceed \$10,000 or ten percent of your gross annual income, received during the past 12 months from activities, services, retainers or consultancies (include the name of the paying entity, and a description of your service) that might give rise to a conflict of interest with ASHP.

Organization	Service/Activity
<u>XXR Solutions LLC</u>	<u>Personal Business - Consulting</u>
	<u>to Visante Inc re: Medicare Part D</u>
	<u>> \$10,000 or 10% gross annual income</u>

5. Describe, to the best of your knowledge, any financial interest which exceeds ten percent of your gross annual income or a ten percent equity interest, or other significant interest of yourself or an immediate family relative, such as a spouse, child or parent, in any outside activity or entity which does substantial business with or is in direct competition with ASHP.

None

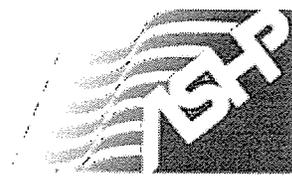
6. Describe, to the best of your knowledge, any other transactions or actions in the past 12 months in which you or an immediate family member has a personal interest or in which you competed, directly or indirectly, with the interests of ASHP.

None

Lynnae M Mahoney
Name


Signature

3/12/07
Date



TO: Henri R. Manasse, Jr.
Secretary, Board of Directors

FROM: HENRI R. MANASSE, JR

SUBJECT: Disclosure Report

DATE: 2 APRIL 2007

Having read and understood the "ASHP Policy on Disclosure of Outside Activities," and the "ASHP Policy on External Professional and Business Activities," I hereby make the following disclosure pursuant to those policies. I understand that disclosure is a continuing obligation and that in addition to the annual completion of this form I will keep the Board updated at other meetings of the Board, and make additional disclosures in accord with Board policies.

1. List any health-related board, advisory panel, regulatory body, office, committee or programs which you have participated in during the past 12 months (include the name of the entity, the position held).

Company/Agency	Activity/Service
<u>INTL PHARMACEUTICAL FEDERATION</u>	<u>PROFESSIONAL SECRETARY</u>
<u>JOINT COMMISSION</u>	<u>(1) SENTINEL EVENTS (2) ROUNDTABLE FOR HOSPITAL OF THE FUTURE</u>
<u>NATIONAL QUALITY FORUM</u>	<u>(1) ADVISORY COMMITTEE ON EXEC. LEADERSHIP</u>
<u>NATIONAL PATIENT SAFETY FOUNDATION</u>	<u>CHAIR, BOARD OF GOVERNORS</u>
<u>U.S. FOOD & DRUG ADMIN</u>	<u>DRUG SAFETY AND RISK MGT. ADVISORY COMMITTEE</u>

2. List any health-related publications, or products, excluding ASHP publications/products, which you contributed to in the past 12 months that might raise concerns that such outside activities are competing with ASHP products, services or other membership activities.

NONE

3. List any grants received during the past 12 months, including name of granting entity and purpose and/or scope of grant.

Organization	Grant Purpose/Scope
<u>NONE</u>	

4. List the sources for scholarships, awards, gifts, honoraria, monies or other benefits, which exceed \$10,000 or ten percent of your gross annual income, received during the past 12 months from activities, services, retainers or consultancies (include the name of the paying entity, and a description of your service) that might give rise to a conflict of interest with ASHP.

Organization

Service/Activity

NONE

5. Describe, to the best of your knowledge, any financial interest which exceeds ten percent of your gross annual income or a ten percent equity interest, or other significant interest of yourself or an immediate family relative, such as a spouse, child or parent, in any outside activity or entity which does substantial business with or is in direct competition with ASHP.

NONE

6. Describe, to the best of your knowledge, any other transactions or actions in the past 12 months in which you or an immediate family member has a personal interest or in which you competed, directly or indirectly, with the interests of ASHP.

NONE

HENRI R. MANASSE, JR.

Name



Signature

Date

4/2/07

Revision Approved by Board of Directors April 24, 2001

P:\Board of Directors\Correspondence\Statements\All.doc



TO: **Henri R. Manasse, Jr.**
Secretary, Board of Directors

FROM: Sheila Mitchell

SUBJECT: **Disclosure Report**

DATE: 3-10-07

Having read and understood the "ASHP Policy on Disclosure of Outside Activities," and the "ASHP Policy on External Professional and Business Activities," I hereby make the following disclosure pursuant to those policies. I understand that disclosure is a continuing obligation and that in addition to the annual completion of this form I will keep the Board updated at other meetings of the Board, and make additional disclosures in accord with Board policies.

1. List any health-related board, advisory panel, regulatory body, office, committee or programs which you have participated in during the past 12 months (include the name of the entity, the position held).

Company/Agency	Activity/Service
<u>TENN. BOARD OF PHARMACY</u>	<u>PRESIDENT</u>
<u>NABP</u>	<u>CHAIR, COMMITTEE ON LEGISLATION/ LAW ENFORCEMENT</u>
<u>TSNP EXECUTIVE BOARD OF DIRECTORS</u>	<u>(PAST PRESIDENT)</u>

2. List any health-related publications, or products, excluding ASHP publications/products, which you contributed to in the past 12 months that might raise concerns that such outside activities are competing with ASHP products, services or other membership activities.

NONE

3. List any grants received during the past 12 months, including name of granting entity and purpose and/or scope of grant.

Organization	Grant Purpose/Scope
<u>NONE</u>	

4. List the sources for scholarships, awards, gifts, honoraria, monies or other benefits, which exceed \$10,000 or ten percent of your gross annual income, received during the past 12 months from activities, services, retainers or consultancies (include the name of the paying entity, and a description of your service) that might give rise to a conflict of interest with ASHP.

Organization

Service/Activity

NONE

5. Describe, to the best of your knowledge, any financial interest which exceeds ten percent of your gross annual income or a ten percent equity interest, or other significant interest of yourself or an immediate family relative, such as a spouse, child or parent, in any outside activity or entity which does substantial business with or is in direct competition with ASHP.

NONE

6. Describe, to the best of your knowledge, any other transactions or actions in the past 12 months in which you or an immediate family member has a personal interest or in which you competed, directly or indirectly, with the interests of ASHP.

NONE

Sheila Mitchell

Name

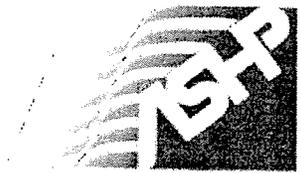
Signature

Revision Approved by Board of Directors April 24, 2001

P:\Board of Directors\Correspondence\Statements\All.doc

Date

3-10-07



TO: **Henri R. Manasse, Jr.**
Secretary, Board of Directors

FROM: Kathryn Schultz

SUBJECT: **Disclosure Report**

DATE: 2/27/07

Having read and understood the "ASHP Policy on Disclosure of Outside Activities," and the "ASHP Policy on External Professional and Business Activities," I hereby make the following disclosure pursuant to those policies. I understand that disclosure is a continuing obligation and that in addition to the annual completion of this form I will keep the Board updated at other meetings of the Board, and make additional disclosures in accord with Board policies.

1. List any health-related board, advisory panel, regulatory body, office, committee or programs which you have participated in during the past 12 months (include the name of the entity, the position held).

Company/Agency	Activity/Service
<u>Sanofi Aventis</u> <u>vaccine division</u>	<u>local advisory board member</u>

2. List any health-related publications, or products, excluding ASHP publications/products, which you contributed to in the past 12 months that might raise concerns that such outside activities are competing with ASHP products, services or other membership activities.

None

3. List any grants received during the past 12 months, including name of granting entity and purpose and/or scope of grant.

Organization	Grant Purpose/Scope
<u>None</u>	

4. List the sources for scholarships, awards, gifts, honoraria, monies or other benefits, which exceed \$10,000 or ten percent of your gross annual income, received during the past 12 months from activities, services, retainers or consultancies (include the name of the paying entity, and a description of your service) that might give rise to a conflict of interest with ASHP.

Organization

Service/Activity

None

5. Describe, to the best of your knowledge, any financial interest which exceeds ten percent of your gross annual income or a ten percent equity interest, or other significant interest of yourself or an immediate family relative, such as a spouse, child or parent, in any outside activity or entity which does substantial business with or is in direct competition with ASHP.

None

6. Describe, to the best of your knowledge, any other transactions or actions in the past 12 months in which you or an immediate family member has a personal interest or in which you competed, directly or indirectly, with the interests of ASHP.

None

Kathryn Schuetz
Name

Kathryn Schuetz
Signature

2/2/07
Date

Revision Approved by Board of Directors April 24, 2001

P:\Board of Directors\Correspondence\Statements\All.doc



TO: Henri R. Manasse, Jr.
Secretary, Board of Directors

FROM: JAMES STEVENSON

SUBJECT: Disclosure Report

DATE: APRIL 2, 2007

Having read and understood the "ASHP Policy on Disclosure of Outside Activities," and the "ASHP Policy on External Professional and Business Activities," I hereby make the following disclosure pursuant to those policies. I understand that disclosure is a continuing obligation and that in addition to the annual completion of this form I will keep the Board updated at other meetings of the Board, and make additional disclosures in accord with Board policies.

- List any health-related board, advisory panel, regulatory body, office, committee or programs which you have participated in during the past 12 months (include the name of the entity, the position held).

Company/Agency	Activity/Service	
MGE	ADVISORY BOARD	} IN CAPACITY AS UNIV. OF MICHIGAN PHARMACY DIRECTOR.
GENENTECH	ADVISORY BOARD	
AMGEN	ADVISORY BOARD	
AMESIVA	ADVISORY BOARD	
ALLERGAN	ADVISORY BOARD	
BOEHRINGER INGELHEIM	ADVISORY BOARD	

- List any health-related publications, or products, excluding ASHP publications/products, which you contributed to in the past 12 months that might raise concerns that such outside activities are competing with ASHP products, services or other membership activities.

NONE

- List any grants received during the past 12 months, including name of granting entity and purpose and/or scope of grant.

Organization	Grant Purpose/Scope
<u>NONE</u>	

4. List the sources for scholarships, awards, gifts, honoraria, monies or other benefits, which exceed \$10,000 or ten percent of your gross annual income, received during the past 12 months from activities, services, retainers or consultancies (include the name of the paying entity, and a description of your service) that might give rise to a conflict of interest with ASHP.

Organization

Service/Activity

NONE

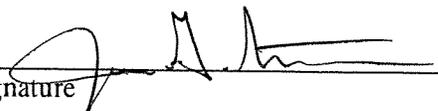
5. Describe, to the best of your knowledge, any financial interest which exceeds ten percent of your gross annual income or a ten percent equity interest, or other significant interest of yourself or an immediate family relative, such as a spouse, child or parent, in any outside activity or entity which does substantial business with or is in direct competition with ASHP.

NONE

6. Describe, to the best of your knowledge, any other transactions or actions in the past 12 months in which you or an immediate family member has a personal interest or in which you competed, directly or indirectly, with the interests of ASHP.

NONE

JAMES C. STEVENSON
Name


Signature

4/2/07
Date

Revision Approved by Board of Directors April 24, 2001

P:\Board of Directors\Correspondence\Statements\All.doc



TO: Henri R. Manasse, Jr.
Secretary, Board of Directors

FROM: Kevin Colgan

SUBJECT: Disclosure Report

DATE: September 24, 2007

Having read and understood the "ASHP Policy on Disclosure of Outside Activities," and the "ASHP Policy on External Professional and Business Activities," I hereby make the following disclosure pursuant to those policies. I understand that disclosure is a continuing obligation and that in addition to the annual completion of this form I will keep the Board updated at other meetings of the Board, and make additional disclosures in accord with Board policies.

1. List any health-related board, advisory panel, regulatory body, office, committee or programs which you have participated in during the past 12 months (include the name of the entity, the position held).

Company/Agency

Activity/Service

A) The GMR Group/Boehringer Ingelheim

I participated in an advisory board and follow-up meetings concerning dabigatran research. The advisory board was attended by both hospital and managed care pharmacists. Another advisory board meeting is scheduled for October 14th. Our firm has a history of working collaboratively with the GMR group to identify research programs that involve both managed care and hospital markets.

B) AstraZeneca

I participated in two advisory boards for AstraZeneca and presented research information in both meetings. One advisory board meeting included Cardiothoracic Surgeons, Interventional Cardiologists, and Anesthesiologists to discuss the effect of thienopyridines on CABG surgery. I presented our research data that has been accepted for publication in Pharmacotherapy. However, my name is not included in the author list. I participated in a second advisory board meeting with cardiologists, hospitalists, anesthesiologists, internists, and surgeons. I provided an update of research concerning drug-eluting stents and timing of non-cardiac surgery. This is conjunction with a research project we hope to perform for the sponsor.

2. List any health-related publications, or products, excluding ASHP publications/products, which you contributed to in the past 12 months that might raise concerns that such outside activities are competing with ASHP products, services or other membership activities.

I have not personally been a listed author, but I did participate in publications as an internal reviewer and peer advisor. We have also provided minor medical writing services to Elsevier Health. However, that was a pilot program which probably will grow over the next year. The product we are supporting is new and not in any of the same market space as ASHP's products to my knowledge. If it is bundled with their Pharmacotherapy product, then it would compete indirectly with ASHP. However, I have no knowledge that it will or will not be used in that manner. Further, we have a vendor relationship at this time with Elsevier Health – basically we bid on RFP's they send us.

3. List any grants received during the past 12 months, including name of granting entity and purpose and/or scope of grant.

Organization	Grant Purpose/Scope
Abbott	HIV Research
AstraZeneca	Anticoagulation, Antiplatelet Research
AstraZeneca, Dr. Kessler (Harvard), WHO	Prediction Instrument for Specific Mental Illnesses
Genentech	National Cooperative Growth Study
Gilead	HIV Research
IVAX	Asthma Research
Novartis	Asthma & Transplant Research
Reckitt Benckiser	Model for Opioid Dependence
Others in Progress	
Affymax	ESA Research
Boehringer Ingelheim	Anticoagulation Research
Cephalon	Pain Research
GlaxoSmithKline	Anticoagulation Research, BPH Research
Ortho McNeil	Infectious Disease Research
Pfizer	Outcomes Research for key brands
The Medicines Company	Hypertension Research

List the sources for scholarships, awards, gifts, honoraria, monies or other benefits, which exceed \$10,000 or ten percent of your gross annual income, received during the past 12 months from activities, services, retainers or consultancies (include the name of the paying entity, and a description of your service) that might give rise to a conflict of interest with ASHP.

Organization

Service/Activity

All honoraria provided for my services are paid directly to EPI-Q. I am a partner in EPI-Q and own approximately 16% of the company.

4. Describe, to the best of your knowledge, any financial interest which exceeds ten percent of your gross annual income or a ten percent equity interest, or other significant interest of yourself or an immediate family relative, such as a spouse, child or parent, in any outside activity or entity which does substantial business with or is in direct competition with ASHP.

Our firm shares strategic partnerships with four companies. They are Solara, The GMR Group, The Gorman Group, and Informed Decisions. Solara and The GMR Group are managed markets consulting firms that also provide medical education services and both branded and non-branded enduring product promotional materials. They refer us for outcomes research studies, clinical benchmarking, and budget impact modeling services. Likewise, we refer them if a client has need for managed care consulting services. They would compete in the medical education market space with ASHP Advantage. For example, all three companies host seminars at the Academy of Managed Care meetings.

We are currently engaged with the Gorman Group and Informed Decisions in developing outcomes and patient management products for commercial and public managed care providers. In addition, we have submitted joint proposals for medication monitoring services to public providers. Informed Decisions is a subsidiary of Gold Standard, which is a direct competitor of ASHP drug information products. However, the work our firms are doing together does not compete with ASHP products.

5. Describe, to the best of your knowledge, any other transactions or actions in the past 12 months in which you or an immediate family member has a personal interest or in which you competed, directly or indirectly, with the interests of ASHP.

None

Kevin J. Cogan
Name

Kevin J. Cogan
Signature

9/22/07
Date

Revision Approved by Board of Directors April 24, 2001

Updated 9-6-07



TO: Henri R. Manasse, Jr.
Secretary, Board of Directors
FROM: PAUL ABRAMOWITZ
SUBJECT: Disclosure Report
DATE: 9-6-07

Having read and understood the "ASHP Policy on Disclosure of Outside Activities," and the "ASHP Policy on External Professional and Business Activities," I hereby make the following disclosure pursuant to those policies. I understand that disclosure is a continuing obligation and that in addition to the annual completion of this form I will keep the Board updated at other meetings of the Board, and make additional disclosures in accord with Board policies.

1. List any health-related board, advisory panel, regulatory body, office, committee or programs which you have participated in during the past 12 months (include the name of the entity, the position held).

- | Company/Agency | Activity/Service |
|---|--|
| ① Iowa Board of Pharmacy | Member and Chair of the Board |
| ② Iowa State-wide Poison Control Center | Vice Chair of the Board of Directors |
| ③ University Health System Consortium Pharmacy Council | Chair / Immediate Past Chair |
| ④ Wellmark Blue Cross / Blue Shield of Iowa | Member, Pharmacy and Ther. Committee |
| ⑤ Health Information Security and Privacy Collaboration | Steering Committee - Iowa Foundation for Medical Ed. |
| ⑥ - See Page 2 - last | |

2. List any health-related publications, or products, excluding ASHP publications/products, which you contributed to in the past 12 months that might raise concerns that such outside activities are competing with ASHP products, services or other membership activities.

No Pub's, products or services.

3. List any grants received during the past 12 months, including name of granting entity and purpose and/or scope of grant.

- | Organization | Grant Purpose/Scope |
|---|---|
| ① ASHP R&E Foundation | Study impact of bedside barcode med. scanning |
| ② University of Iowa Healthcare - SARA as above | on ADE's in an NICU |
| ③ NIH | - Impact of Continuity of Care on Medication Safety (Barry Carter - Principle Investigator) |

4. List the sources for scholarships, awards, gifts, honoraria, monies or other benefits, which exceed \$10,000 or ten percent of your gross annual income, received during the past 12 months from activities, services, retainers or consultancies (include the name of the paying entity, and a description of your service) that might give rise to a conflict of interest with ASHP.

Organization

Service/Activity

None

5. Describe, to the best of your knowledge, any financial interest which exceeds ten percent of your gross annual income or a ten percent equity interest, or other significant interest of yourself or an immediate family relative, such as a spouse, child or parent, in any outside activity or entity which does substantial business with or is in direct competition with ASHP.

PSizer Stock - 1000 shares

6. Describe, to the best of your knowledge, any other transactions or actions in the past 12 months in which you or an immediate family member has a personal interest or in which you competed, directly or indirectly, with the interests of ASHP.

① I serve on the Advisory Committee for CEI (The Collaborative Education Institute). This organization is a partnership between DTP University of Iowa College of Pharmacy, Drake Univ. College of Pharmacy and the Iowa Pharmacy Association which provides Continuing Education Programs, ~~and~~ Continuing Professional Development, Certificate Programs, self study programs and other to Pharmacists, Technicians, and educators.

PAUL ABRAMOWITZ

Name

Signature

9-06-07

Date



TO: **Henri R. Manasse, Jr.**
Secretary, Board of Directors

FROM: John A. Armitstead

SUBJECT: **Disclosure Report**

DATE: Sept 24, 2007

Having read and understood the "ASHP Policy on Disclosure of Outside Activities," and the "ASHP Policy on External Professional and Business Activities," I hereby make the following disclosure pursuant to those policies. I understand that disclosure is a continuing obligation and that in addition to the annual completion of this form I will keep the Board updated at other meetings of the Board, and make additional disclosures in accord with Board policies.

1. List any health-related board, advisory panel, regulatory body, office, committee or programs which you have participated in during the past 12 months (include the name of the entity, the position held).

Company/Agency	Activity/Service
<u>Takeda Pharmaceuticals</u>	<u>Consultant</u>
<u>Kentucky SHP</u>	<u>Imm. Past President</u>

2. List any health-related publications, or products, excluding ASHP publications/products, which you contributed to in the past 12 months that might raise concerns that such outside activities are competing with ASHP products, services or other membership activities.

University of Kentucky Pharmacy Continuing Education

3. List any grants received during the past 12 months, including name of granting entity and purpose and/or scope of grant.

Organization	Grant Purpose/Scope
<u>Dept of Health + Human Services - University of Louisville,</u>	
<u>University of Kentucky - Bioterrorism Preparedness</u>	

4. List the sources for scholarships, awards, gifts, honoraria, monies or other benefits, which exceed \$10,000 or ten percent of your gross annual income, received during the past 12 months from activities, services, retainers or consultancies (include the name of the paying entity, and a description of your service) that might give rise to a conflict of interest with ASHP.

Organization

Service/Activity

None

5. Describe, to the best of your knowledge, any financial interest which exceeds ten percent of your gross annual income or a ten percent equity interest, or other significant interest of yourself or an immediate family relative, such as a spouse, child or parent, in any outside activity or entity which does substantial business with or is in direct competition with ASHP.

None

6. Describe, to the best of your knowledge, any other transactions or actions in the past 12 months in which you or an immediate family member has a personal interest or in which you competed, directly or indirectly, with the interests of ASHP.

Wife - Pharmacist - Kroger (Regional Supermarket)

John A. Armistead

Name

John A. Armistead

Signature

9/24/07

Date

Exhibit L

Disclosure Report Forms from the ASHP Board of Directors

2008 Board of Directors



TO: Henri R. Manasse, Jr.
Secretary, Board of Directors

FROM: Lynne M Mahoney

SUBJECT: Disclosure Report

DATE: _____

Having read and understood the "ASHP Policy on Disclosure of Outside Activities," and the "ASHP Policy on External Professional and Business Activities," I hereby make the following disclosure pursuant to those policies. I understand that disclosure is a continuing obligation and that in addition to the annual completion of this form I will keep the Board updated at other meetings of the Board, and make additional disclosures in accord with Board policies.

1. List any health-related board, advisory panel, regulatory body, office, committee or programs which you have participated in during the past 12 months (include the name of the entity, the position held).

Company/Agency

Activity/Service

None

2. List any health-related publications, or products, excluding ASHP publications/products, which you contributed to in the past 12 months that might raise concerns that such outside activities are competing with ASHP products, services or other membership activities.

3. List any grants received during the past 12 months, including name of granting entity and purpose and/or scope of grant.

Organization

Grant Purpose/Scope

None

4. List the sources for scholarships, awards, gifts, honoraria, monies or other benefits, which exceed \$10,000 or ten percent of your gross annual income, received during the past 12 months from activities, services, retainers or consultancies (include the name of the paying entity, and a description of your service) that might give rise to a conflict of interest with ASHP.

Organization

Service/Activity

None

5. Describe, to the best of your knowledge, any financial interest which exceeds ten percent of your gross annual income or a ten percent equity interest, or other significant interest of yourself or an immediate family relative, such as a spouse, child or parent, in any outside activity or entity which does substantial business with or is in direct competition with ASHP.

None

6. Describe, to the best of your knowledge, any other transactions or actions in the past 12 months in which you or an immediate family member has a personal interest or in which you competed, directly or indirectly, with the interests of ASHP.

Consultant for Visante Inc, Principal Mike Flaggstad
< \$10,000/year income Medicare Part D focus

Lynnae M Mahaney
Name

Lynnae M Mahaney
Signature

9/9/08
Date



TO: Henri R. Manasse, Jr.
Secretary, Board of Directors

FROM: Lynnae M Mahoney

SUBJECT: Disclosure Report

DATE: 2/12/08

Having read and understood the "ASHP Policy on Disclosure of Outside Activities," and the "ASHP Policy on External Professional and Business Activities," I hereby make the following disclosure pursuant to those policies. I understand that disclosure is a continuing obligation and that in addition to the annual completion of this form I will keep the Board updated at other meetings of the Board, and make additional disclosures in accord with Board policies.

1. List any health-related board, advisory panel, regulatory body, office, committee or programs which you have participated in during the past 12 months (include the name of the entity, the position held).

Company/Agency

Activity/Service

VHA Recruitment & Retention Pharmacy Advisory Board

2. List any health-related publications, or products, excluding ASHP publications/products, which you contributed to in the past 12 months that might raise concerns that such outside activities are competing with ASHP products, services or other membership activities.

None

3. List any grants received during the past 12 months, including name of granting entity and purpose and/or scope of grant.

Organization

Grant Purpose/Scope

None

4. List the sources for scholarships, awards, gifts, honoraria, monies or other benefits, which exceed \$10,000 or ten percent of your gross annual income, received during the past 12 months from activities, services, retainers or consultancies (include the name of the paying entity, and a description of your service) that might give rise to a conflict of interest with ASHP.

Organization

Service/Activity

None

5. Describe, to the best of your knowledge, any financial interest which exceeds ten percent of your gross annual income or a ten percent equity interest, or other significant interest of yourself or an immediate family relative, such as a spouse, child or parent, in any outside activity or entity which does substantial business with or is in direct competition with ASHP.

None > 10% gross annual income
consultant for Visdate Inc - currently working
with Chamberlain Research re: patient satisfaction project
development for hospital

6. Describe, to the best of your knowledge, any other transactions or actions in the past 12 months in which you or an immediate family member has a personal interest or in which you competed, directly or indirectly, with the interests of ASHP.

Lynnae M Mahoney
Name

Lynnae M Mahoney
Signature

2/12/08
Date



TO: Henri R. Manasse, Jr.
Secretary, Board of Directors

FROM: LISA GARSEMA

SUBJECT: Disclosure Report

DATE: 9/23/08

Having read and understood the "ASHP Policy on Disclosure of Outside Activities," and the "ASHP Policy on External Professional and Business Activities," I hereby make the following disclosure pursuant to those policies. I understand that disclosure is a continuing obligation and that in addition to the annual completion of this form I will keep the Board updated at other meetings of the Board, and make additional disclosures in accord with Board policies.

1. List any health-related board, advisory panel, regulatory body, office, committee or programs which you have participated in during the past 12 months (include the name of the entity, the position held).

Company/Agency

Activity/Service

2. List any health-related publications, or products, excluding ASHP publications/products, which you contributed to in the past 12 months that might raise concerns that such outside activities are competing with ASHP products, services or other membership activities.

3. List any grants received during the past 12 months, including name of granting entity and purpose and/or scope of grant.

Organization

Grant Purpose/Scope

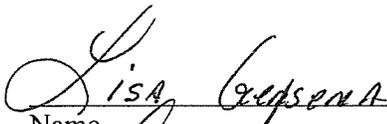
4. List the sources for scholarships, awards, gifts, honoraria, monies or other benefits, which exceed \$10,000 or ten percent of your gross annual income, received during the past 12 months from activities, services, retainers or consultancies (include the name of the paying entity, and a description of your service) that might give rise to a conflict of interest with ASHP.

Organization

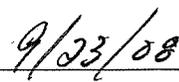
Service/Activity

5. Describe, to the best of your knowledge, any financial interest which exceeds ten percent of your gross annual income or a ten percent equity interest, or other significant interest of yourself or an immediate family relative, such as a spouse, child or parent, in any outside activity or entity which does substantial business with or is in direct competition with ASHP.

6. Describe, to the best of your knowledge, any other transactions or actions in the past 12 months in which you or an immediate family member has a personal interest or in which you competed, directly or indirectly, with the interests of ASHP.


Name


Signature


Date



TO: Henri R. Manasse, Jr.
Secretary, Board of Directors

FROM: JANET A. SILVESTER

SUBJECT: Disclosure Report

DATE: 3/7/08

Having read and understood the "ASHP Policy on Disclosure of Outside Activities," and the "ASHP Policy on External Professional and Business Activities," I hereby make the following disclosure pursuant to those policies. I understand that disclosure is a continuing obligation and that in addition to the annual completion of this form I will keep the Board updated at other meetings of the Board, and make additional disclosures in accord with Board policies.

1. List any health-related board, advisory panel, regulatory body, office, committee or programs which you have participated in during the past 12 months (include the name of the entity, the position held).

Company/Agency

Activity/Service

DEAN'S NATIONAL ADVISORY COUNCIL MEMBER - VCU SCHOOL OF PHARMACY

2. List any health-related publications, or products, excluding ASHP publications/products, which you contributed to in the past 12 months that might raise concerns that such outside activities are competing with ASHP products, services or other membership activities.

NONE

3. List any grants received during the past 12 months, including name of granting entity and purpose and/or scope of grant.

Organization

Grant Purpose/Scope

NONE

4. List the sources for scholarships, awards, gifts, honoraria, monies or other benefits, which exceed \$10,000 or ten percent of your gross annual income, received during the past 12 months from activities, services, retainers or consultancies (include the name of the paying entity, and a description of your service) that might give rise to a conflict of interest with ASHP.

Organization

Service/Activity

NONE

5. Describe, to the best of your knowledge, any financial interest which exceeds ten percent of your gross annual income or a ten percent equity interest, or other significant interest of yourself or an immediate family relative, such as a spouse, child or parent, in any outside activity or entity which does substantial business with or is in direct competition with ASHP.

NONE

6. Describe, to the best of your knowledge, any other transactions or actions in the past 12 months in which you or an immediate family member has a personal interest or in which you competed, directly or indirectly, with the interests of ASHP.

NONE

JANET A. SILVESTER

Name

Janet A. Silvester

Signature

3/7/08

Date

Revision Approved by Board of Directors April 24, 2001



TO: Henri R. Manasse, Jr.
Secretary, Board of Directors

FROM: Kevin Colgan

SUBJECT: Disclosure Report

DATE: March 17, 2008

Having read and understood the "ASHP Policy on Disclosure of Outside Activities," and the "ASHP Policy on External Professional and Business Activities," I hereby make the following disclosure pursuant to those policies. I understand that disclosure is a continuing obligation and that in addition to the annual completion of this form I will keep the Board updated at other meetings of the Board, and make additional disclosures in accord with Board policies.

1. List any health-related board, advisory panel, regulatory body, office, committee or programs which you have participated in during the past 12 months (include the name of the entity, the position held).

Company/Agency

Activity/Service

A) The GMR Group/Boehringer Ingelheim

I participated in an advisory board and follow-up meetings concerning dabigatran research. The advisory board was attended by both hospital and managed care pharmacists. My position for the advisory board meeting on October 14, 2007 was given to another EPI-Q colleague. Our firm has a history of working collaboratively with the GMR group to identify research programs that involve both managed care and hospital markets.

B) AstraZeneca

I participated in one advisory boards for AstraZeneca and presented our research information during the meeting. I presented our research data that has been published in Pharmacotherapy (EPI-Q author = Carla Frye, Pharm D). I also provided an update of research concerning drug-eluting stents and timing of non-cardiac surgery. This is conjunction with a research project we continue to discuss with the sponsor.

2. List any health-related publications, or products, excluding ASHP publications/products, which you contributed to in the past 12 months that might raise concerns that such outside activities are competing with ASHP products, services or other membership activities.

I have not personally been a listed author, but I did participate in publications as an internal reviewer and peer advisor. We have also provided minor medical writing services to Elsevier Health. However, that was a pilot program which will not be continued.

3. List any grants received during the past 12 months, including name of granting entity and purpose and/or scope of grant.

Organization	Grant Purpose/Scope
Abbott	HIV Research, VDRA Research pending, Asthma Research pending
Affymax/Takeda	ESA Research
AstraZeneca	Antiplatelet Research
AstraZeneca, Dr. Kessler (Harvard), WHO	Prediction Instrument for Specific Mental Illnesses
Exelixis	Oncology Research
Genentech	National Cooperative Growth Study
Gilead	HIV Research
IVAX	Asthma Research
Merck	CHF Research pending
Novartis	Asthma & Transplant Research
Pfizer	General Anxiety Disorder Research, Value-Based Benefits Design, Anticoagulation Research with Duke Clinical Research Institute pending
Reckitt Benckiser	Model for Opioid Dependence
Sanofi Aventis, Dr. Kessler (Harvard)	Insomnia Research

List the sources for scholarships, awards, gifts, honoraria, monies or other benefits, which exceed \$10,000 or ten percent of your gross annual income, received during the past 12 months from activities, services, retainers or consultancies (include the name of the paying entity, and a description of your service) that might give rise to a conflict of interest with ASHP.

Organization

Service/Activity

All honoraria provided for my services are paid directly to EPI-Q. I am a partner in EPI-Q and own approximately 16% of the company.

4. Describe, to the best of your knowledge, any financial interest which exceeds ten percent of your gross annual income or a ten percent equity interest, or other significant interest of yourself or an immediate family relative, such as a spouse, child or parent, in any outside activity or entity which does substantial business with or is in direct competition with ASHP.

Our firm shares strategic partnerships with three companies. They are Solara, The GMR Group, and The Gorman Group. Solara and The GMR Group are managed markets consulting firms that also provide medical education services and both branded and non-branded enduring product promotional materials. They refer us for outcomes research studies, clinical benchmarking, and budget impact modeling services. Likewise, we refer them if a client has need for managed care consulting services. They would compete in the medical education market space with ASHP Advantage. For example, all three companies host seminars at the Academy of Managed Care meetings.

We are not currently engaged with the Gorman Group. However, we have worked collaboratively in the past and this work does not compete with ASHP products.

5. Describe, to the best of your knowledge, any other transactions or actions in the past 12 months in which you or an immediate family member has a personal interest or in which you competed, directly or indirectly, with the interests of ASHP.

None

Kevin Coleman

Name

Kevin J. Coleman

Signature

March 17, 2008

Date

Revision Approved by Board of Directors April 24, 2001



TO: Henri R. Manasse, Jr.
Secretary, Board of Directors

FROM: Cindi Brennan

SUBJECT: Disclosure Report

DATE: 3/18/08

Having read and understood the "ASHP Policy on Disclosure of Outside Activities," and the "ASHP Policy on External Professional and Business Activities," I hereby make the following disclosure pursuant to those policies. I understand that disclosure is a continuing obligation and that in addition to the annual completion of this form I will keep the Board updated at other meetings of the Board, and make additional disclosures in accord with Board policies.

1. List any health-related board, advisory panel, regulatory body, office, committee or programs which you have participated in during the past 12 months (include the name of the entity, the position held).

Company/Agency	Activity/Service
<u>N/A</u>	

2. List any health-related publications, or products, excluding ASHP publications/products, which you contributed to in the past 12 months that might raise concerns that such outside activities are competing with ASHP products, services or other membership activities.

<u>N/A</u>

3. List any grants received during the past 12 months, including name of granting entity and purpose and/or scope of grant.

Organization	Grant Purpose/Scope
<u>N/A</u>	

4. List the sources for scholarships, awards, gifts, honoraria, monies or other benefits, which exceed \$10,000 or ten percent of your gross annual income, received during the past 12 months from activities, services, retainers or consultancies (include the name of the paying entity, and a description of your service) that might give rise to a conflict of interest with ASHP.

Organization

Service/Activity

N/A

5. Describe, to the best of your knowledge, any financial interest which exceeds ten percent of your gross annual income or a ten percent equity interest, or other significant interest of yourself or an immediate family relative, such as a spouse, child or parent, in any outside activity or entity which does substantial business with or is in direct competition with ASHP.

N/A

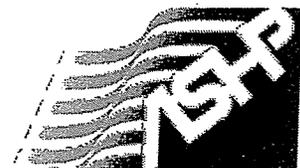
6. Describe, to the best of your knowledge, any other transactions or actions in the past 12 months in which you or an immediate family member has a personal interest or in which you competed, directly or indirectly, with the interests of ASHP.

N/A

Cynthia Brennan
Name

Cynthia Brennan
Signature

3/18/08
Date



TO: Henri R. Manasse, Jr.
Secretary, Board of Directors

FROM: PAUL ABRAMWITZ

SUBJECT: Disclosure Report

DATE: 2-29-08

Having read and understood the "ASHP Policy on Disclosure of Outside Activities," and the "ASHP Policy on External Professional and Business Activities," I hereby make the following disclosure pursuant to those policies. I understand that disclosure is a continuing obligation and that in addition to the annual completion of this form I will keep the Board updated at other meetings of the Board, and make additional disclosures in accord with Board policies.

1. List any health-related board, advisory panel, regulatory body, office, committee or programs which you have participated in during the past 12 months (include the name of the entity, the position held).

- | Company/Agency | Activity/Service |
|---|---|
| ① Iowa Board of Pharmacy | Chair of the Board - I complete my service in April, 2008 |
| ② Iowa State-wide Poison Control Center | Vice Chair of the Board of Directors |
| ③ University Health System Consortium Pharmacy Council | Immed. Past Chair - Service ended Dec, 07 |
| ④ Wellmark Blue Cross of Iowa Pharmacy and Therapeutics Committee | Service ended in 2007 |

2. List any health-related publications, or products, excluding ASHP publications/products, which you contributed to in the past 12 months that might raise concerns that such outside activities are competing with ASHP products, services or other membership activities.

- ① Submission to Lancet - Efficiency of barcode medication
administration scanning system in reducing adverse
drug events in an NICU (submitted for publication)

3. List any grants received during the past 12 months, including name of granting entity and purpose and/or scope of grant.

- | Organization | Grant Purpose/Scope |
|--------------|--|
| ① NIH | - Impact of Continuity of Care on Medication Safety
(Barry Center - Principle Investigator) - Ongoing Study |

4. List the sources for scholarships, awards, gifts, honoraria, monies or other benefits, which exceed \$10,000 or ten percent of your gross annual income, received during the past 12 months from activities, services, retainers or consultancies (include the name of the paying entity, and a description of your service) that might give rise to a conflict of interest with ASHP.

Organization

Service/Activity

① I will be doing consulting for INOVA Health-System in April, 2008 to review medication safety systems in place at two of their hospitals in Alexandria Virginia. ~~None~~

5. Describe, to the best of your knowledge, any financial interest which exceeds ten percent of your gross annual income or a ten percent equity interest, or other significant interest of yourself or an immediate family relative, such as a spouse, child or parent, in any outside activity or entity which does substantial business with or is in direct competition with ASHP.

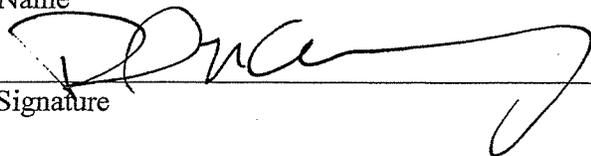
None

6. Describe, to the best of your knowledge, any other transactions or actions in the past 12 months in which you or an immediate family member has a personal interest or in which you competed, directly or indirectly, with the interests of ASHP.

None

PAUL ABRA MOWITZ

Name



Signature

2-29-08

Date



TO: Henri R. Manasse, Jr.
Secretary, Board of Directors

FROM: Diane Ginsburg

SUBJECT: Disclosure Report

DATE: 2/11/08

Having read and understood the "ASHP Policy on Disclosure of Outside Activities," and the "ASHP Policy on External Professional and Business Activities," I hereby make the following disclosure pursuant to those policies. I understand that disclosure is a continuing obligation and that in addition to the annual completion of this form I will keep the Board updated at other meetings of the Board, and make additional disclosures in accord with Board policies.

- 1. List any health-related board, advisory panel, regulatory body, office, committee or programs which you have participated in during the past 12 months (include the name of the entity, the position held).

Company/Agency

Activity/Service

ASHP R: E Foundation Vice President for Programs

- 2. List any health-related publications, or products, excluding ASHP publications/products, which you contributed to in the past 12 months that might raise concerns that such outside activities are competing with ASHP products, services or other membership activities.

Ø

- 3. List any grants received during the past 12 months, including name of granting entity and purpose and/or scope of grant.

Organization

Grant Purpose/Scope

Ø

4. List the sources for scholarships, awards, gifts, honoraria, monies or other benefits, which exceed \$10,000 or ten percent of your gross annual income, received during the past 12 months from activities, services, retainers or consultancies (include the name of the paying entity, and a description of your service) that might give rise to a conflict of interest with ASHP.

Organization

Service/Activity

Ø

5. Describe, to the best of your knowledge, any financial interest which exceeds ten percent of your gross annual income or a ten percent equity interest, or other significant interest of yourself or an immediate family relative, such as a spouse, child or parent, in any outside activity or entity which does substantial business with or is in direct competition with ASHP.

Ø

6. Describe, to the best of your knowledge, any other transactions or actions in the past 12 months in which you or an immediate family member has a personal interest or in which you competed, directly or indirectly, with the interests of ASHP.

Ø

Diane B. Ginsburg
Name

[Signature]
Signature

2/11/08
Date

Revision Approved by Board of Directors April 24, 2001



TO: Henri R. Manasse, Jr.
Secretary, Board of Directors

FROM: Teresa Hudson _____

SUBJECT: Disclosure Report

DATE: 3-20-08 _____

Having read and understood the "ASHP Policy on Disclosure of Outside Activities," and the "ASHP Policy on External Professional and Business Activities," I hereby make the following disclosure pursuant to those policies. I understand that disclosure is a continuing obligation and that in addition to the annual completion of this form I will keep the Board updated at other meetings of the Board, and make additional disclosures in accord with Board policies.

1. List any health-related board, advisory panel, regulatory body, office, committee or programs which you have participated in during the past 12 months (include the name of the entity, the position held).

Company/Agency	Activity/Service
<u>Arkansas R DUR Committee - member</u>	
<u>Central Arkansas Veterans Healthcare System Institutional Review Board and Research Development Committees</u>	

2. List any health-related publications, or products, excluding ASHP publications/products, which you contributed to in the past 12 months that might raise concerns that such outside activities are competing with ASHP products, services or other membership activities.

none

3. List any grants received during the past 12 months, including name of granting entity and purpose and/or scope of grant.

Organization	Grant Purpose/Scope
<u>VA HSR&D - (IIR)</u>	<u>TELEMEDICINE OUTREACH FOR PTSD (TOP) (CO-1)</u>
<u>VA HSR&D - (SHP) Rural/Urban Differences in Service Utilization among OIF/OEF Veterans (PI)</u>	
<u>VA HSR&D - (SHP) Management of Metabolic Side Effect of Antipsychotics in Six VISNs (CO-1)</u>	

List the sources for scholarships, awards, gifts, honoraria, monies or other benefits, which exceed \$10,000 or ten percent of your gross annual income, received during the past 12 months from activities, services, retainers or consultancies (include the name of the paying entity, and a description of your service) that might give rise to a conflict of interest with ASHP.

Organization

Service/Activity

none

4. Describe, to the best of your knowledge, any financial interest which exceeds ten percent of your gross annual income or a ten percent equity interest, or other significant interest of yourself or an immediate family relative, such as a spouse, child or parent, in any outside activity or entity which does substantial business with or is in direct competition with ASHP.

none

5. Describe, to the best of your knowledge, any other transactions or actions in the past 12 months in which you or an immediate family member has a personal interest or in which you competed, directly or indirectly, with the interests of ASHP.

none

Name

Signature

Date



TO: Henri R. Manasse, Jr.
Secretary, Board of Directors

FROM: STAN KENT

SUBJECT: Disclosure Report

DATE: 2/11/08

Having read and understood the "ASHP Policy on Disclosure of Outside Activities," and the "ASHP Policy on External Professional and Business Activities," I hereby make the following disclosure pursuant to those policies. I understand that disclosure is a continuing obligation and that in addition to the annual completion of this form I will keep the Board updated at other meetings of the Board, and make additional disclosures in accord with Board policies.

- 1. List any health-related board, advisory panel, regulatory body, office, committee or programs which you have participated in during the past 12 months (include the name of the entity, the position held).

Company/Agency	Activity/Service
<u>NOVATION</u>	<u>EXECUTIVE PHARMACY COUNCIL</u>

- 2. List any health-related publications, or products, excluding ASHP publications/products, which you contributed to in the past 12 months that might raise concerns that such outside activities are competing with ASHP products, services or other membership activities.

NONE

- 3. List any grants received during the past 12 months, including name of granting entity and purpose and/or scope of grant.

Organization	Grant Purpose/Scope
<u>NONE</u>	

4. List the sources for scholarships, awards, gifts, honoraria, monies or other benefits, which exceed \$10,000 or ten percent of your gross annual income, received during the past 12 months from activities, services, retainers or consultancies (include the name of the paying entity, and a description of your service) that might give rise to a conflict of interest with ASHP.

Organization

Service/Activity

NONE

5. Describe, to the best of your knowledge, any financial interest which exceeds ten percent of your gross annual income or a ten percent equity interest, or other significant interest of yourself or an immediate family relative, such as a spouse, child or parent, in any outside activity or entity which does substantial business with or is in direct competition with ASHP.

NONE

6. Describe, to the best of your knowledge, any other transactions or actions in the past 12 months in which you or an immediate family member has a personal interest or in which you competed, directly or indirectly, with the interests of ASHP.

NONE

STAN KENT

Name

Stan Kent

Signature

2/11/08

Date

Revision Approved by Board of Directors April 24, 2001



TO: Henri R. Manasse, Jr.
Secretary, Board of Directors

FROM:

SUBJECT: Disclosure Report

DATE:

Having read and understood the "ASHP Policy on Disclosure of Outside Activities," and the "ASHP Policy on External Professional and Business Activities," I hereby make the following disclosure pursuant to those policies. I understand that disclosure is a continuing obligation and that in addition to the annual completion of this form I will keep the Board updated at other meetings of the Board, and make additional disclosures in accord with Board policies.

1. List any health-related board, advisory panel, regulatory body, office, committee or programs which you have participated in during the past 12 months (include the name of the entity, the position held).

Company/Agency

Activity/Service

TN BOARD OF PHARMACY	PRESIDENT

2. List any health-related publications, or products, excluding ASHP publications/products, which you contributed to in the past 12 months that might raise concerns that such outside activities are competing with ASHP products, services or other membership activities.

NONE

3. List any grants received during the past 12 months, including name of granting entity and purpose and/or scope of grant.

Organization

Grant Purpose/Scope

NONE	

- 4. List the sources for scholarships, awards, gifts, honoraria, monies or other benefits, which exceed \$10,000 or ten percent of your gross annual income, received during the past 12 months from activities, services, retainers or consultancies (include the name of the paying entity, and a description of your service) that might give rise to a conflict of interest with ASHP.

Organization	Service/Activity
NONE	

- 5. Describe, to the best of your knowledge, any financial interest which exceeds ten percent of your gross annual income or a ten percent equity interest, or other significant interest of yourself or an immediate family relative, such as a spouse, child or parent, in any outside activity or entity which does substantial business with or is in direct competition with ASHP.

NONE

- 6. Describe, to the best of your knowledge, any other transactions or actions in the past 12 months in which you or an immediate family member has a personal interest or in which you competed, directly or indirectly, with the interests of ASHP.

NONE

Sheila Mitchell

Name

Sheila Mitchell

Signature

3-14-08

Date



TO: **Henri R. Manasse, Jr.**
Secretary, Board of Directors

FROM: Kathryn Schultz

SUBJECT: **Disclosure Report**

DATE: 2/12/08

Having read and understood the "ASHP Policy on Disclosure of Outside Activities," and the "ASHP Policy on External Professional and Business Activities," I hereby make the following disclosure pursuant to those policies. I understand that disclosure is a continuing obligation and that in addition to the annual completion of this form I will keep the Board updated at other meetings of the Board, and make additional disclosures in accord with Board policies.

1. List any health-related board, advisory panel, regulatory body, office, committee or programs which you have participated in during the past 12 months (include the name of the entity, the position held).

Company/Agency	Activity/Service
<u>NONE</u>	

2. List any health-related publications, or products, excluding ASHP publications/products, which you contributed to in the past 12 months that might raise concerns that such outside activities are competing with ASHP products, services or other membership activities.

<u>NONE</u>	

3. List any grants received during the past 12 months, including name of granting entity and purpose and/or scope of grant.

Organization	Grant Purpose/Scope
<u>NONE</u>	

4. List the sources for scholarships, awards, gifts, honoraria, monies or other benefits, which exceed \$10,000 or ten percent of your gross annual income, received during the past 12 months from activities, services, retainers or consultancies (include the name of the paying entity, and a description of your service) that might give rise to a conflict of interest with ASHP.

Organization

Service/Activity

NONE

5. Describe, to the best of your knowledge, any financial interest which exceeds ten percent of your gross annual income or a ten percent equity interest, or other significant interest of yourself or an immediate family relative, such as a spouse, child or parent, in any outside activity or entity which does substantial business with or is in direct competition with ASHP.

NONE

6. Describe, to the best of your knowledge, any other transactions or actions in the past 12 months in which you or an immediate family member has a personal interest or in which you competed, directly or indirectly, with the interests of ASHP.

NONE

Name

Kathryn Schultz

Signature

Kathryn Schultz

Date

2/12/08



TO: Henri R. Manasse, Jr.
Secretary, Board of Directors

FROM: James Stevenson_____

SUBJECT: Disclosure Report

DATE: March 20, 2008_____

Having read and understood the "ASHP Policy on Disclosure of Outside Activities," and the "ASHP Policy on External Professional and Business Activities," I hereby make the following disclosure pursuant to those policies. I understand that disclosure is a continuing obligation and that in addition to the annual completion of this form I will keep the Board updated at other meetings of the Board, and make additional disclosures in accord with Board policies.

- 1. List any health-related board, advisory panel, regulatory body, office, committee or programs which you have participated in during the past 12 months (include the name of the entity, the position held).

Company/Agency	Activity/Service
Amgen	NCCN Pharmacy Directors Advisory Board
Boehringer Ingelheim	Dabigitran Advisory Board

- 2. List any health-related publications, or products, excluding ASHP publications/products, which you contributed to in the past 12 months that might raise concerns that such outside activities are competing with ASHP products, services or other membership activities.

None

- 3. List any grants received during the past 12 months, including name of granting entity and purpose and/or scope of grant.

Organization	Grant Purpose/Scope
InformMed	Database Validation Project – validate accuracy of dosing limits created in medication safety technology product

- 4. List the sources for scholarships, awards, gifts, honoraria, monies or other benefits, which exceed \$10,000 or ten percent of your gross annual income, received during the past 12 months from activities, services, retainers or consultancies (include the name of the paying entity, and a description of your service) that might give rise to a conflict of interest with ASHP.

Organization

Service/Activity

None

- 5. Describe, to the best of your knowledge, any financial interest which exceeds ten percent of your gross annual income or a ten percent equity interest, or other significant interest of yourself or an immediate family relative, such as a spouse, child or parent, in any outside activity or entity which does substantial business with or is in direct competition with ASHP.

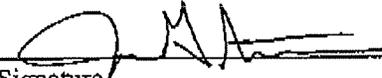
None

- 6. Describe, to the best of your knowledge, any other transactions or actions in the past 12 months in which you or an immediate family member has a personal interest or in which you competed, directly or indirectly, with the interests of ASHP.

None

JAMES B. STEVENSON

Name



Signature

3/20/08

Date

Revision Approved by Board of Directors April 24, 2001



TO: Henri R. Manasse, Jr.
Secretary, Board of Directors

FROM: HENRI R. MANASSE, JR.

SUBJECT: Disclosure Report

DATE: 2/14/08

Having read and understood the "ASHP Policy on Disclosure of Outside Activities," and the "ASHP Policy on External Professional and Business Activities," I hereby make the following disclosure pursuant to those policies. I understand that disclosure is a continuing obligation and that in addition to the annual completion of this form I will keep the Board updated at other meetings of the Board, and make additional disclosures in accord with Board policies.

1. List any health-related board, advisory panel, regulatory body, office, committee or programs which you have participated in during the past 12 months (include the name of the entity, the position held).

Company/Agency	Activity/Service
<u>NAT'L PATIENT SAFETY FOUNDATION</u>	<u>MEMBER, BOARD OF GOVERNORS</u>
<u>PHARMACY TECH. CERTIF. BOARD</u>	<u>MEMBER, BOARD OF GOVERNORS</u>
<u>NATIONAL QUALITY FORUM</u>	<u>EXECUTIVE LEADERSHIP ADV. CMTE</u>
<u>INTL. PHARM. FEDERATION & REF</u>	<u>PROF. SECY & MEMBER OF BOARD</u>

2. List any health-related publications, or products, excluding ASHP publications/products, which you contributed to in the past 12 months that might raise concerns that such outside activities are competing with ASHP products, services or other membership activities.

NONE

3. List any grants received during the past 12 months, including name of granting entity and purpose and/or scope of grant.

Organization	Grant Purpose/Scope
<u>NONE</u>	

4. List the sources for scholarships, awards, gifts, honoraria, monies or other benefits, which exceed \$10,000 or ten percent of your gross annual income, received during the past 12 months from activities, services, retainers or consultancies (include the name of the paying entity, and a description of your service) that might give rise to a conflict of interest with ASHP.

Organization

Service/Activity

NONE

5. Describe, to the best of your knowledge, any financial interest which exceeds ten percent of your gross annual income or a ten percent equity interest, or other significant interest of yourself or an immediate family relative, such as a spouse, child or parent, in any outside activity or entity which does substantial business with or is in direct competition with ASHP.

NONE

6. Describe, to the best of your knowledge, any other transactions or actions in the past 12 months in which you or an immediate family member has a personal interest or in which you competed, directly or indirectly, with the interests of ASHP.

NONE

HENRI R. MANASSE, JR.

Name



Signature

Date

2/14/07



TO: **Henri R. Manasse, Jr.**
Secretary, Board of Directors

FROM: John A. Armitstead

SUBJECT: **Disclosure Report**

DATE: 3/18/08

Having read and understood the "ASHP Policy on Disclosure of Outside Activities," and the "ASHP Policy on External Professional and Business Activities," I hereby make the following disclosure pursuant to those policies. I understand that disclosure is a continuing obligation and that in addition to the annual completion of this form I will keep the Board updated at other meetings of the Board, and make additional disclosures in accord with Board policies.

1. List any health-related board, advisory panel, regulatory body, office, committee or programs which you have participated in during the past 12 months (include the name of the entity, the position held).

Company/Agency	Activity/Service
<u>Gerson Lehrman Group</u>	<u>Consultant - Healthcare</u>
_____	_____
_____	_____

2. List any health-related publications, or products, excluding ASHP publications/products, which you contributed to in the past 12 months that might raise concerns that such outside activities are competing with ASHP products, services or other membership activities.

University of Kentucky - College of Pharmacy + Medicine
Continuing Education

Micromedex - Advisory Board

3. List any grants received during the past 12 months, including name of granting entity and purpose and/or scope of grant.

Organization	Grant Purpose/Scope
<u>Health + Human Services - Dept of Homeland Security</u>	<u>Counter Terrorism Grant</u>
_____	_____
_____	_____

4. List the sources for scholarships, awards, gifts, honoraria, monies or other benefits, which exceed \$10,000 or ten percent of your gross annual income, received during the past 12 months from activities, services, retainers or consultancies (include the name of the paying entity, and a description of your service) that might give rise to a conflict of interest with ASHP.

Organization

Service/Activity

NA

5. Describe, to the best of your knowledge, any financial interest which exceeds ten percent of your gross annual income or a ten percent equity interest, or other significant interest of yourself or an immediate family relative, such as a spouse, child or parent, in any outside activity or entity which does substantial business with or is in direct competition with ASHP.

NA

6. Describe, to the best of your knowledge, any other transactions or actions in the past 12 months in which you or an immediate family member has a personal interest or in which you competed, directly or indirectly, with the interests of ASHP.

Wife - pharmacist - Kroger Company (Supermarket/Mass Merch.)

John A Armitstead

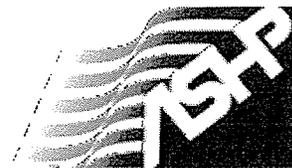
Name

John A Armitstead

Signature

3/18/08

Date



TO: Henri R. Manasse, Jr.
Secretary, Board of Directors

FROM: Janet Milohy

SUBJECT: Disclosure Report

DATE: 2/11/2008

Having read and understood the "ASHP Policy on Disclosure of Outside Activities," and the "ASHP Policy on External Professional and Business Activities," I hereby make the following disclosure pursuant to those policies. I understand that disclosure is a continuing obligation and that in addition to the annual completion of this form I will keep the Board updated at other meetings of the Board, and make additional disclosures in accord with Board policies.

1. List any health-related board, advisory panel, regulatory body, office, committee or programs which you have participated in during the past 12 months (include the name of the entity, the position held).

Company/Agency

Activity/Service

none

2. List any health-related publications, or products, excluding ASHP publications/products, which you contributed to in the past 12 months that might raise concerns that such outside activities are competing with ASHP products, services or other membership activities.

none

3. List any grants received during the past 12 months, including name of granting entity and purpose and/or scope of grant.

Organization

Grant Purpose/Scope

none

4. List the sources for scholarships, awards, gifts, honoraria, monies or other benefits, which exceed \$10,000 or ten percent of your gross annual income, received during the past 12 months from activities, services, retainers or consultancies (include the name of the paying entity, and a description of your service) that might give rise to a conflict of interest with ASHP.

Organization

Service/Activity

none

5. Describe, to the best of your knowledge, any financial interest which exceeds ten percent of your gross annual income or a ten percent equity interest, or other significant interest of yourself or an immediate family relative, such as a spouse, child or parent, in any outside activity or entity which does substantial business with or is in direct competition with ASHP.

none

6. Describe, to the best of your knowledge, any other transactions or actions in the past 12 months in which you or an immediate family member has a personal interest or in which you competed, directly or indirectly, with the interests of ASHP.

none

JANET L. MIGHTY
Name

J. Mighty
Signature

2/11/2008
Date

Exhibit L

Disclosure Report Forms from the ASHP Board of Directors

2009 Board of Directors



TO: Henri R. Manasse, Jr.
Secretary, Board of Directors

FROM: Diane Beth Ginsburg

SUBJECT: Disclosure Report

DATE: September 12, 2009

Having read and understood the "ASHP Policy on Disclosure of Outside Activities," and the "ASHP Policy on External Professional and Business Activities," I hereby make the following disclosure pursuant to those policies. I understand that disclosure is a continuing obligation and that in addition to the annual completion of this form I will keep the Board updated at other meetings of the Board, and make additional disclosures in accord with Board policies.

1. List any health-related board, advisory panel, regulatory body, office, committee or programs which you have participated in during the past 12 months (include the name of the entity, the position held).

Company/Agency

Activity/Service

Texas Society of Health-System Pharmacists Research and Education Foundation:

Currently serving as Vice President for Programs _____

2. List any health-related publications, or products, excluding ASHP publications/products, which you contributed to in the past 12 months that might raise concerns that such outside activities are competing with ASHP products, services or other membership activities.

3. List any grants received during the past 12 months, including name of granting entity and purpose and/or scope of grant.

Organization

Grant Purpose/Scope



TO: Henri R. Manasse, Jr.
Secretary, Board of Directors

FROM: MIKE SANBORN

SUBJECT: Disclosure Report

DATE: 9/9/09

Having read and understood the "ASHP Policy on Disclosure of Outside Activities," and the "ASHP Policy on External Professional and Business Activities," I hereby make the following disclosure pursuant to those policies. I understand that disclosure is a continuing obligation and that in addition to the annual completion of this form I will keep the Board updated at other meetings of the Board, and make additional disclosures in accord with Board policies.

- 1. List any health-related board, advisory panel, regulatory body, office, committee or programs which you have participated in during the past 12 months (include the name of the entity, the position held).

Company/Agency	Activity/Service
DFW HOSPITAL COUNCIL	Chair, Patient Safety Committee
TSHP	Immediate Past President

- 2. List any health-related publications, or products, excluding ASHP publications/products, which you contributed to in the past 12 months that might raise concerns that such outside activities are competing with ASHP products, services or other membership activities.

HOSPITAL PHARMACY (Journal) - Director's Forum author
and also serve on Editorial Board

- 3. List any grants received during the past 12 months, including name of granting entity and purpose and/or scope of grant.

Organization	Grant Purpose/Scope
<u>Ø</u>	



TO: Henri R. Manasse, Jr.
Secretary, Board of Directors

FROM: Christene Jolowsky _____

SUBJECT: Disclosure Report

DATE: September 2, 2009 _____

Having read and understood the "ASHP Policy on Disclosure of Outside Activities," and the "ASHP Policy on External Professional and Business Activities," I hereby make the following disclosure pursuant to those policies. I understand that disclosure is a continuing obligation and that in addition to the annual completion of this form I will keep the Board updated at other meetings of the Board, and make additional disclosures in accord with Board policies.

1. List any health-related board, advisory panel, regulatory body, office, committee or programs which you have participated in during the past 12 months (include the name of the entity, the position held).

Company/Agency

Activity/Service

_____ nothing to disclose _____

2. List any health-related publications, or products, excluding ASHP publications/products, which you contributed to in the past 12 months that might raise concerns that such outside activities are competing with ASHP products, services or other membership activities.

_____ nothing to disclose _____

3. List any grants received during the past 12 months, including name of granting entity and purpose and/or scope of grant.

Organization

Grant Purpose/Scope

_____ nothing to disclose _____

4. List the sources for scholarships, awards, gifts, honoraria, monies or other benefits, which exceed \$10,000 or ten percent of your gross annual income, received during the past 12 months from activities, services, retainers or consultancies (include the name of the paying entity, and a description of your service) that might give rise to a conflict of interest with ASHP.

Organization

Service/Activity

nothing to disclose _____

5. Describe, to the best of your knowledge, any financial interest which exceeds ten percent of your gross annual income or a ten percent equity interest, or other significant interest of yourself or an immediate family relative, such as a spouse, child or parent, in any outside activity or entity which does substantial business with or is in direct competition with ASHP.

No financial interest _____

6. Describe, to the best of your knowledge, any other transactions or actions in the past 12 months in which you or an immediate family member has a personal interest or in which you competed, directly or indirectly, with the interests of ASHP.

Nothing to disclose _____

Christene M Jolowsky

Name



Signature

September 2, 2009

Date



TO: Henri R. Manasse, Jr.
Secretary, Board of Directors

FROM: HENRI R. MANASSE, JR

SUBJECT: Disclosure Report

DATE: 2/12/09

Having read and understood the "ASHP Policy on Disclosure of Outside Activities," and the "ASHP Policy on External Professional and Business Activities," I hereby make the following disclosure pursuant to those policies. I understand that disclosure is a continuing obligation and that in addition to the annual completion of this form I will keep the Board updated at other meetings of the Board, and make additional disclosures in accord with Board policies.

- List any health-related board, advisory panel, regulatory body, office, committee or programs which you have participated in during the past 12 months (include the name of the entity, the position held).

Company/Agency	Activity/Service
<u>AHRQ/CERT ADVISORY CMTE</u>	<u>MEMBER</u>
<u>PTCB</u>	<u>MEMBER, BOARD OF DIRECTORS</u>
<u>NPSF</u>	<u>" " " GOVERNORS</u>
<u>UNIV. OF ILLINOIS, PHARMACY NATL ADVISORY CMTE</u>	

- List any health-related publications, or products, excluding ASHP publications/products, which you contributed to in the past 12 months that might raise concerns that such outside activities are competing with ASHP products, services or other membership activities.

NONE

- List any grants received during the past 12 months, including name of granting entity and purpose and/or scope of grant.

Organization	Grant Purpose/Scope
<u>NONE</u>	

4. List the sources for scholarships, awards, gifts, honoraria, monies or other benefits, which exceed \$10,000 or ten percent of your gross annual income, received during the past 12 months from activities, services, retainers or consultancies (include the name of the paying entity, and a description of your service) that might give rise to a conflict of interest with ASHP.

Organization

Service/Activity

N/A

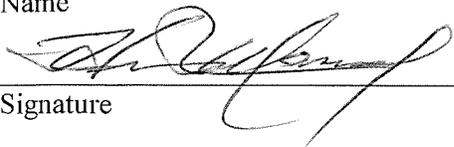
5. Describe, to the best of your knowledge, any financial interest which exceeds ten percent of your gross annual income or a ten percent equity interest, or other significant interest of yourself or an immediate family relative, such as a spouse, child or parent, in any outside activity or entity which does substantial business with or is in direct competition with ASHP.

N/A

6. Describe, to the best of your knowledge, any other transactions or actions in the past 12 months in which you or an immediate family member has a personal interest or in which you competed, directly or indirectly, with the interests of ASHP.

N/A

HENRI R. MANASSE, JR.
Name


Signature

2/12/09
Date

4. List the sources for scholarships, awards, gifts, honoraria, monies or other benefits, which exceed \$10,000 or ten percent of your gross annual income, received during the past 12 months from activities, services, retainers or consultancies (include the name of the paying entity, and a description of your service) that might give rise to a conflict of interest with ASHP.

Organization

Service/Activity

NOTHING TO DISCLOSE

5. Describe, to the best of your knowledge, any financial interest which exceeds ten percent of your gross annual income or a ten percent equity interest, or other significant interest of yourself or an immediate family relative, such as a spouse, child or parent, in any outside activity or entity which does substantial business with or is in direct competition with ASHP.

NOTHING TO DISCLOSE

6. Describe, to the best of your knowledge, any other transactions or actions in the past 12 months in which you or an immediate family member has a personal interest or in which you competed, directly or indirectly, with the interests of ASHP.

NOTHING TO DISCLOSE

GERALD E. MEYER

Name

G. E. Meyer

Signature

JUNE 26, 2009

Date

Revision Approved by Board of Directors April 24, 2001

VI-A.1



TO: Henri R. Manasse, Jr.
Secretary, Board of Directors

FROM: Kevin Colgan

SUBJECT: Disclosure Report

DATE: February 12, 2009

Having read and understood the "ASHP Policy on Disclosure of Outside Activities," and the "ASHP Policy on External Professional and Business Activities," I hereby make the following disclosure pursuant to those policies. I understand that disclosure is a continuing obligation and that in addition to the annual completion of this form I will keep the Board updated at other meetings of the Board, and make additional disclosures in accord with Board policies.

1. List any health-related board, advisory panel, regulatory body, office, committee or programs which you have participated in during the past 12 months (include the name of the entity, the position held).

Company/Agency	Activity/Service
A) Affymax	I will be chairing a meeting of advisors to review and advise on a three year pre-launch HEOR plan for a new drug product in phase III development.

EPI-Q has been requested to consult for Nanjing Pharmaceuticals in Nanjing, China concerning re-engineering of the wholesale drug industry and dispensing automation for seven of their client hospital pharmacies. No contracts have been signed or proposals prepared as of this date.

2. List any health-related publications, or products, excluding ASHP publications/products, which you contributed to in the past 12 months that might raise concerns that such outside activities are competing with ASHP products, services or other membership activities.

I have not personally been a listed author, but I did participate in publications as an internal reviewer and peer advisor.

3. List any grants received during the past 12 months, including name of granting entity and purpose and/or scope of grant.

Organization	Grant Purpose/Scope
Abbott	HIV Research, VDRA Research pending
Affymax/Takeda	ESA Research
AstraZeneca	Antiplatelet Research
AstraZeneca, Dr. Kessler (Harvard), WHO	Prediction Instrument for Specific Mental Illnesses
Gilead	HIV Research
Merck	CHF Research
Novartis	Asthma & Transplant Research
Pfizer	General Anxiety Disorder Research, Value-Based Benefits Design
Reckitt Benckiser	Model for Opioid Dependence
Sanofi Aventis, Dr. Kessler (Harvard)	Insomnia Research

VI-A.1

List the sources for scholarships, awards, gifts, honoraria, monies or other benefits, which exceed \$10,000 or ten percent of your gross annual income, received during the past 12 months from activities, services, retainers or consultancies (include the name of the paying entity, and a description of your service) that might give rise to a conflict of interest with ASHP.

Organization

Service/Activity

All honoraria provided for my services are paid directly to EPI-Q. I am a partner in EPI-Q and own approximately 16% of the company.

4. Describe, to the best of your knowledge, any financial interest which exceeds ten percent of your gross annual income or a ten percent equity interest, or other significant interest of yourself or an immediate family relative, such as a spouse, child or parent, in any outside activity or entity which does substantial business with or is in direct competition with ASHP.

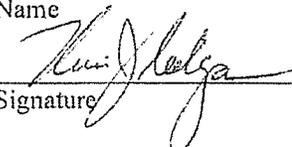
Our firm shares strategic partnerships with two companies. They are Solara and The GMR Group. The GMR Group is a managed market consulting firms that also provide medical education services and both branded and non-branded enduring product promotional materials. Solara is also a managed markets consulting firm that provides consultation on both branded and non-branded products and creates enduring materials for those products. Both refer us for outcomes research studies, clinical benchmarking, and budget impact modeling services. Likewise, we refer them if a client has need for managed care consulting services. GMR would compete in the medical education market space with ASHP Advantage. For example, both companies host seminars at the Academy of Managed Care meetings.

5. Describe, to the best of your knowledge, any other transactions or actions in the past 12 months in which you or an immediate family member has a personal interest or in which you competed, directly or indirectly, with the interests of ASHP.

None

Kevin J. Colgan

Name



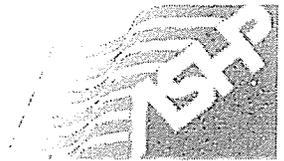
Signature

2/12/09

Date

Revision Approved by Board of Directors April 24, 2001

VI-A.1



TO: Henri R. Manasse, Jr.
Secretary, Board of Directors

FROM: Sydney Mahoney

SUBJECT: Disclosure Report

DATE: 2/12/09

Having read and understood the "ASHP Policy on Disclosure of Outside Activities," and the "ASHP Policy on External Professional and Business Activities," I hereby make the following disclosure pursuant to those policies. I understand that disclosure is a continuing obligation and that in addition to the annual completion of this form I will keep the Board updated at other meetings of the Board, and make additional disclosures in accord with Board policies.

- 1. List any health-related board, advisory panel, regulatory body, office, committee or programs which you have participated in during the past 12 months (include the name of the entity, the position held).

Company/Agency	Activity/Service
<i>None</i>	

- 2. List any health-related publications, or products, excluding ASHP publications/products, which you contributed to in the past 12 months that might raise concerns that such outside activities are competing with ASHP products, services or other membership activities.

<i>None</i>	

- 3. List any grants received during the past 12 months, including name of granting entity and purpose and/or scope of grant.

Organization	Grant Purpose/Scope
<i>None</i>	

VI-A.1

4. List the sources for scholarships, awards, gifts, honoraria, monies or other benefits, which exceed \$10,000 or ten percent of your gross annual income, received during the past 12 months from activities, services, retainers or consultancies (include the name of the paying entity, and a description of your service) that might give rise to a conflict of interest with ASHP.

Organization

Service/Activity

None

5. Describe, to the best of your knowledge, any financial interest which exceeds ten percent of your gross annual income or a ten percent equity interest, or other significant interest of yourself or an immediate family relative, such as a spouse, child or parent, in any outside activity or entity which does substantial business with or is in direct competition with ASHP.

None

6. Describe, to the best of your knowledge, any other transactions or actions in the past 12 months in which you or an immediate family member has a personal interest or in which you competed, directly or indirectly, with the interests of ASHP.

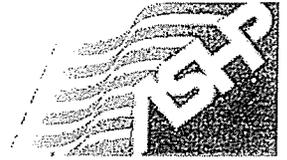
Consultant with Visante Inc regarding Medicare Part D Programs and Formulary lists for insurance entities ~ \$2000 income in 2008 & 2009

Lynae Mahoney
Name

Lynae M Mahoney
Signature

2/13/09
Date

VI-A.1



TO: Henri R. Manasse, Jr.
 Secretary, Board of Directors

FROM: Jane Silvester

SUBJECT: Disclosure Report

DATE: March 25, 2009

Having read and understood the "ASHP Policy on Disclosure of Outside Activities," and the "ASHP Policy on External Professional and Business Activities," I hereby make the following disclosure pursuant to those policies. I understand that disclosure is a continuing obligation and that in addition to the annual completion of this form I will keep the Board updated at other meetings of the Board, and make additional disclosures in accord with Board policies.

1. List any health-related board, advisory panel, regulatory body, office, committee or programs which you have participated in during the past 12 months (include the name of the entity, the position held).

Company/Agency	Activity/Service
<u>NONE</u>	

2. List any health-related publications, or products, excluding ASHP publications/products, which you contributed to in the past 12 months that might raise concerns that such outside activities are competing with ASHP products, services or other membership activities.

<u>NONE</u>	

3. List any grants received during the past 12 months, including name of granting entity and purpose and/or scope of grant.

Organization	Grant Purpose/Scope
<u>NONE</u>	

VI-A.1

4. List the sources for scholarships, awards, gifts, honoraria, monies or other benefits, which exceed \$10,000 or ten percent of your gross annual income, received during the past 12 months from activities, services, retainers or consultancies (include the name of the paying entity, and a description of your service) that might give rise to a conflict of interest with ASHP.

Organization

Service/Activity

NONE

5. Describe, to the best of your knowledge, any financial interest which exceeds ten percent of your gross annual income or a ten percent equity interest, or other significant interest of yourself or an immediate family relative, such as a spouse, child or parent, in any outside activity or entity which does substantial business with or is in direct competition with ASHP.

NONE

6. Describe, to the best of your knowledge, any other transactions or actions in the past 12 months in which you or an immediate family member has a personal interest or in which you competed, directly or indirectly, with the interests of ASHP.

NONE

JANET A SILVESTER

Name

Janet A Silvester

Signature

3/25/09

Date

VI-A.1



TO: Henri R. Manasse, Jr.
Secretary, Board of Directors

FROM: PAUL ABRAMOWITZ

SUBJECT: Disclosure Report

DATE: 2-14-09

Having read and understood the "ASHP Policy on Disclosure of Outside Activities," and the "ASHP Policy on External Professional and Business Activities," I hereby make the following disclosure pursuant to those policies. I understand that disclosure is a continuing obligation and that in addition to the annual completion of this form I will keep the Board updated at other meetings of the Board, and make additional disclosures in accord with Board policies.

- 1. List any health-related board, advisory panel, regulatory body, office, committee or programs which you have participated in during the past 12 months (include the name of the entity, the position held).

Company/Agency

Activity/Service

① Iowa State-wide Poison Control Center - Member of the Board of Directors

- 2. List any health-related publications, or products, excluding ASHP publications/products, which you contributed to in the past 12 months that might raise concerns that such outside activities are competing with ASHP products, services or other membership activities.

① Journal of Pediatrics - "Effectiveness of a Barcode Medication Administration Scanning System in reducing preventable adverse drug events in an NICU, IN Press"

- 3. List any grants received during the past 12 months, including name of granting entity and purpose and/or scope of grant.

Organization

Grant Purpose/Scope

① NIH - Impact of Continuity of Care on Medication Safety (Bryce Cooker - Principal Investigator) - Ongoing Study

VI-A.1

4. List the sources for scholarships, awards, gifts, honoraria, monies or other benefits, which exceed \$10,000 or ten percent of your gross annual income, received during the past 12 months from activities, services, retainers or consultancies (include the name of the paying entity, and a description of your service) that might give rise to a conflict of interest with ASHP.

Organization

Service/Activity

① Consulting for Inova Health System in April, 2008
to review medication safety systems in
place at two hospitals in Alexandria, VA

5. Describe, to the best of your knowledge, any financial interest which exceeds ten percent of your gross annual income or a ten percent equity interest, or other significant interest of yourself or an immediate family relative, such as a spouse, child or parent, in any outside activity or entity which does substantial business with or is in direct competition with ASHP.

6. Describe, to the best of your knowledge, any other transactions or actions in the past 12 months in which you or an immediate family member has a personal interest or in which you competed, directly or indirectly, with the interests of ASHP.

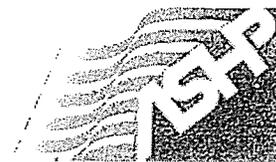
Name

Signature

Date

Revision Approved by Board of Directors April 24, 2001

VI-A.1



TO: **Henri R. Manasse, Jr.**
Secretary, Board of Directors

FROM: John A. Armitstead

SUBJECT: **Disclosure Report**

DATE: February 15, 2009

Having read and understood the "ASHP Policy on Disclosure of Outside Activities," and the "ASHP Policy on External Professional and Business Activities," I hereby make the following disclosure pursuant to those policies. I understand that disclosure is a continuing obligation and that in addition to the annual completion of this form I will keep the Board updated at other meetings of the Board, and make additional disclosures in accord with Board policies.

1. List any health-related board, advisory panel, regulatory body, office, committee or programs which you have participated in during the past 12 months (include the name of the entity, the position held).

Company/Agency	Activity/Service
<u>Gerson Lehman Group (GLG)</u>	<u>Consulting - Occasional</u>
	<u>Health Care topic consultations</u>
	<u>(Survey/Telephone Consultations)</u>

2. List any health-related publications, or products, excluding ASHP publications/products, which you contributed to in the past 12 months that might raise concerns that such outside activities are competing with ASHP products, services or other membership activities.

University of Kentucky College of Pharmacy Continuing
Education Programming

3. List any grants received during the past 12 months, including name of granting entity and purpose and/or scope of grant.

Organization	Grant Purpose/Scope
<u>HHS Dept Homeland Security</u>	<u>Counter Terrorism Training</u>
	<u>for Pharmacists</u>

VI-A.1

4. List the sources for scholarships, awards, gifts, honoraria, monies or other benefits, which exceed \$10,000 or ten percent of your gross annual income, received during the past 12 months from activities, services, retainers or consultancies (include the name of the paying entity, and a description of your service) that might give rise to a conflict of interest with ASHP.

Organization

Service/Activity

None

5. Describe, to the best of your knowledge, any financial interest which exceeds ten percent of your gross annual income or a ten percent equity interest, or other significant interest of yourself or an immediate family relative, such as a spouse, child or parent, in any outside activity or entity which does substantial business with or is in direct competition with ASHP.

None

6. Describe, to the best of your knowledge, any other transactions or actions in the past 12 months in which you or an immediate family member has a personal interest or in which you competed, directly or indirectly, with the interests of ASHP.

None

John A. Armitstead

Name

John Armitstead

Signature

2/15/09

Date

VI-A.1



TO: Henri R. Manasse, Jr.
Secretary, Board of Directors

FROM: Teresa Hudson

SUBJECT: Disclosure Report

DATE: 2-25-09

Having read and understood the "ASHP Policy on Disclosure of Outside Activities," and the "ASHP Policy on External Professional and Business Activities," I hereby make the following disclosure pursuant to those policies. I understand that disclosure is a continuing obligation and that in addition to the annual completion of this form I will keep the Board updated at other meetings of the Board, and make additional disclosures in accord with Board policies.

- List any health-related board, advisory panel, regulatory body, office, committee or programs which you have participated in during the past 12 months (include the name of the entity, the position held).

Company/Agency	Activity/Service
<u>AR RDUR Committee</u>	<u>Review profiles for RDUR activities</u>
<u>CAVHSIRB</u>	<u>Vice Chair</u>

- List any health-related publications, or products, excluding ASHP publications/products, which you contributed to in the past 12 months that might raise concerns that such outside activities are competing with ASHP products, services or other membership activities.

none

- List any grants received during the past 12 months, including name of granting entity and purpose and/or scope of grant.

Organization	Grant Purpose/Scope
<u>Tulane University</u>	<u>Analysis of Data regarding opiod use among pts receiving Duloxetine.</u>
<u>VACOVERTI</u>	<u>Co-investigator grant to study strategies to improve monitoring & management of patients receiving antipsychotic medications</u>

VI-A.1

4. List the sources for scholarships, awards, gifts, honoraria, monies or other benefits, which exceed \$10,000 or ten percent of your gross annual income, received during the past 12 months from activities, services, retainers or consultancies (include the name of the paying entity, and a description of your service) that might give rise to a conflict of interest with ASHP.

Organization	Service/Activity
<u>none</u>	

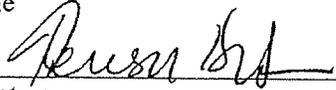
5. Describe, to the best of your knowledge, any financial interest which exceeds ten percent of your gross annual income or a ten percent equity interest, or other significant interest of yourself or an immediate family relative, such as a spouse, child or parent, in any outside activity or entity which does substantial business with or is in direct competition with ASHP.

none

6. Describe, to the best of your knowledge, any other transactions or actions in the past 12 months in which you or an immediate family member has a personal interest or in which you competed, directly or indirectly, with the interests of ASHP.

none

Teresa Hudson
Name


Signature

2-25-09
Date

VI-A.1

4. List the sources for scholarships, awards, gifts, honoraria, monies or other benefits, which exceed \$10,000 or ten percent of your gross annual income, received during the past 12 months from activities, services, retainers or consultancies (include the name of the paying entity, and a description of your service) that might give rise to a conflict of interest with ASHP.

Organization

Service/Activity

~~_____~~

5. Describe, to the best of your knowledge, any financial interest which exceeds ten percent of your gross annual income or a ten percent equity interest, or other significant interest of yourself or an immediate family relative, such as a spouse, child or parent, in any outside activity or entity which does substantial business with or is in direct competition with ASHP.

~~_____~~

6. Describe, to the best of your knowledge, any other transactions or actions in the past 12 months in which you or an immediate family member has a personal interest or in which you competed, directly or indirectly, with the interests of ASHP.

~~_____~~

Stan Kent STAN KENT
Name

Stan Kent
Signature

2/17/09
Date

Revision Approved by Board of Directors April 24, 2001

VI-A.1



TO: Henri R. Manasse, Jr.
Secretary, Board of Directors

FROM: Janet Mighty _____

SUBJECT: Disclosure Report

DATE: April 2, 2009 _____

Having read and understood the "ASHP Policy on Disclosure of Outside Activities," and the "ASHP Policy on External Professional and Business Activities," I hereby make the following disclosure pursuant to those policies. I understand that disclosure is a continuing obligation and that in addition to the annual completion of this form I will keep the Board updated at other meetings of the Board, and make additional disclosures in accord with Board policies.

- 1. List any health-related board, advisory panel, regulatory body, office, committee or programs which you have participated in during the past 12 months (include the name of the entity, the position held).

Company/Agency Activity/Service

NONE _____

- 2. List any health-related publications, or products, excluding ASHP publications/products, which you contributed to in the past 12 months that might raise concerns that such outside activities are competing with ASHP products, services or other membership activities.

NONE _____

- 3. List any grants received during the past 12 months, including name of granting entity and purpose and/or scope of grant.

Organization Grant Purpose/Scope

NONE _____

VI-A.1

- 4. List the sources for scholarships, awards, gifts, honoraria, monies or other benefits, which exceed \$10,000 or ten percent of your gross annual income, received during the past 12 months from activities, services, retainers or consultancies (include the name of the paying entity, and a description of your service) that might give rise to a conflict of interest with ASHP.

Organization

Service/Activity

NONE

- 5. Describe, to the best of your knowledge, any financial interest which exceeds ten percent of your gross annual income or a ten percent equity interest, or other significant interest of yourself or an immediate family relative, such as a spouse, child or parent, in any outside activity or entity which does substantial business with or is in direct competition with ASHP.

NONE

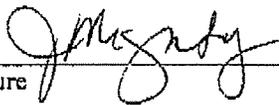
- 6. Describe, to the best of your knowledge, any other transactions or actions in the past 12 months in which you or an immediate family member has a personal interest or in which you competed, directly or indirectly, with the interests of ASHP.

NONE

Janet Mighty

Name

Signature

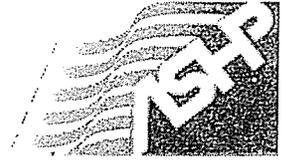


Date

4/2/2009

Revision Approved by Board of Directors April 24, 2001

VI-A.1



TO: **Henri R. Manasse, Jr.**
Secretary, Board of Directors

FROM: Sheila Mitchell

SUBJECT: **Disclosure Report**

DATE: 2-15-09

Having read and understood the "ASHP Policy on Disclosure of Outside Activities," and the "ASHP Policy on External Professional and Business Activities," I hereby make the following disclosure pursuant to those policies. I understand that disclosure is a continuing obligation and that in addition to the annual completion of this form I will keep the Board updated at other meetings of the Board, and make additional disclosures in accord with Board policies.

1. List any health-related board, advisory panel, regulatory body, office, committee or programs which you have participated in during the past 12 months (include the name of the entity, the position held).

Company/Agency	Activity/Service
<u>IN STATE BOARD OF PHARMACY</u>	<u>PRESIDENT</u>
<u>TERM ENDED IN FALL 2008</u>	
_____	_____

2. List any health-related publications, or products, excluding ASHP publications/products, which you contributed to in the past 12 months that might raise concerns that such outside activities are competing with ASHP products, services or other membership activities.

NONE

3. List any grants received during the past 12 months, including name of granting entity and purpose and/or scope of grant.

Organization	Grant Purpose/Scope
<u>NONE</u>	
_____	_____
_____	_____
_____	_____

VI-A.1

4. List the sources for scholarships, awards, gifts, honoraria, monies or other benefits, which exceed \$10,000 or ten percent of your gross annual income, received during the past 12 months from activities, services, retainers or consultancies (include the name of the paying entity, and a description of your service) that might give rise to a conflict of interest with ASHP.

Organization

Service/Activity

NONE

5. Describe, to the best of your knowledge, any financial interest which exceeds ten percent of your gross annual income or a ten percent equity interest, or other significant interest of yourself or an immediate family relative, such as a spouse, child or parent, in any outside activity or entity which does substantial business with or is in direct competition with ASHP.

NONE

6. Describe, to the best of your knowledge, any other transactions or actions in the past 12 months in which you or an immediate family member has a personal interest or in which you competed, directly or indirectly, with the interests of ASHP.

NONE

Sheila Mitchell

Name

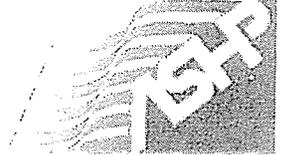
Sheila Mitchell

Signature

2-15-09

Date

VI-A.1



TO: **Henri R. Manasse, Jr.**
Secretary, Board of Directors

FROM: Kathryn R. Schultz

SUBJECT: **Disclosure Report**

DATE: 2/18/09

Having read and understood the "ASHP Policy on Disclosure of Outside Activities," and the "ASHP Policy on External Professional and Business Activities," I hereby make the following disclosure pursuant to those policies. I understand that disclosure is a continuing obligation and that in addition to the annual completion of this form I will keep the Board updated at other meetings of the Board, and make additional disclosures in accord with Board policies.

1. List any health-related board, advisory panel, regulatory body, office, committee or programs which you have participated in during the past 12 months (include the name of the entity, the position held).

Company/Agency	Activity/Service
<u>Ø</u>	

2. List any health-related publications, or products, excluding ASHP publications/products, which you contributed to in the past 12 months that might raise concerns that such outside activities are competing with ASHP products, services or other membership activities.

<u>Ø</u>

3. List any grants received during the past 12 months, including name of granting entity and purpose and/or scope of grant.

Organization	Grant Purpose/Scope
<u>Ø</u>	

VI-A.1

4. List the sources for scholarships, awards, gifts, honoraria, monies or other benefits, which exceed \$10,000 or ten percent of your gross annual income, received during the past 12 months from activities, services, retainers or consultancies (include the name of the paying entity, and a description of your service) that might give rise to a conflict of interest with ASHP.

Organization

Service/Activity

Ø

5. Describe, to the best of your knowledge, any financial interest which exceeds ten percent of your gross annual income or a ten percent equity interest, or other significant interest of yourself or an immediate family relative, such as a spouse, child or parent, in any outside activity or entity which does substantial business with or is in direct competition with ASHP.

Ø

6. Describe, to the best of your knowledge, any other transactions or actions in the past 12 months in which you or an immediate family member has a personal interest or in which you competed, directly or indirectly, with the interests of ASHP.

Ø

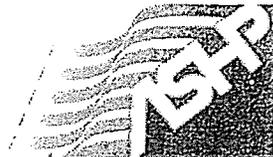
Kathryn Schmitt
Name

Kathryn Schmitt
Signature

2/10/09
Date

Revision Approved by Board of Directors April 24, 2001

VI-A.1



TO: **Henri R. Manasse, Jr.**
Secretary, Board of Directors

FROM: JAMES STEVENSON

SUBJECT: **Disclosure Report**

DATE: 3/12/09

Having read and understood the "ASHP Policy on Disclosure of Outside Activities," and the "ASHP Policy on External Professional and Business Activities," I hereby make the following disclosure pursuant to those policies. I understand that disclosure is a continuing obligation and that in addition to the annual completion of this form I will keep the Board updated at other meetings of the Board, and make additional disclosures in accord with Board policies.

1. List any health-related board, advisory panel, regulatory body, office, committee or programs which you have participated in during the past 12 months (include the name of the entity, the position held).

Company/Agency	Activity/Service
AMGEN	NEW ADVISORY BOARD (PREVIOUSLY DISCLOSED - HONORARIUM TO INSTITUTION)
GENENTECH	ADVISORY BOARD (PREVIOUSLY DISCLOSED - HONORARIUM TO INSTITUTION)
INFORMMED	ADVISORY BOARD (PREVIOUSLY DISCLOSED BUT TO ACTIVITY TO DATE)

2. List any health-related publications, or products, excluding ASHP publications/products, which you contributed to in the past 12 months that might raise concerns that such outside activities are competing with ASHP products, services or other membership activities.

JOINT COMMISSION Resources, A GUIDE TO THE JOINT COMMISSION'S MEDICATION MANAGEMENT STANDARDS, 2ND EDITION (CASE STUDY)

MEDICATION SAFETY SECTION EDITOR, JOINT COMMISSION JOURNAL OF QUALITY AND PATIENT SAFETY

3. List any grants received during the past 12 months, including name of granting entity and purpose and/or scope of grant.

Organization	Grant Purpose/Scope
<u>Ø</u>	

VI-A.1



TO: Henri R. Manasse, Jr.
Secretary, Board of Directors

FROM: HENRI R. MANASSE, JR.

SUBJECT: Disclosure Report

DATE: 3/31/09

Having read and understood the "ASHP Policy on Disclosure of Outside Activities," and the "ASHP Policy on External Professional and Business Activities," I hereby make the following disclosure pursuant to those policies. I understand that disclosure is a continuing obligation and that in addition to the annual completion of this form I will keep the Board updated at other meetings of the Board, and make additional disclosures in accord with Board policies.

- 1. List any health-related board, advisory panel, regulatory body, office, committee or programs which you have participated in during the past 12 months (include the name of the entity, the position held).

Company/Agency	Activity/Service
NATL PE SAFETY FOUNDR.	BOARD OF COLLEAGUES
FEDERATION INTERNATIONALE PHARMACEUTIQUE (FIP)	
PHRMA/CLERTS	BOARD OF DIRECTORS/ PROF. GENE MEMBER, CERT ADVISORY COMTE

- 2. List any health-related publications, or products, excluding ASHP publications/products, which you contributed to in the past 12 months that might raise concerns that such outside activities are competing with ASHP products, services or other membership activities.

N/A

- 3. List any grants received during the past 12 months, including name of granting entity and purpose and/or scope of grant.

Organization	Grant Purpose/Scope
N/A	

VI-A.1

4. List the sources for scholarships, awards, gifts, honoraria, monies or other benefits, which exceed \$10,000 or ten percent of your gross annual income, received during the past 12 months from activities, services, retainers or consultancies (include the name of the paying entity, and a description of your service) that might give rise to a conflict of interest with ASHP.

Organization

Service/Activity

N/A

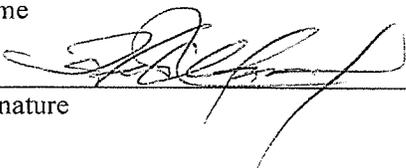
5. Describe, to the best of your knowledge, any financial interest which exceeds ten percent of your gross annual income or a ten percent equity interest, or other significant interest of yourself or an immediate family relative, such as a spouse, child or parent, in any outside activity or entity which does substantial business with or is in direct competition with ASHP.

N/A

6. Describe, to the best of your knowledge, any other transactions or actions in the past 12 months in which you or an immediate family member has a personal interest or in which you competed, directly or indirectly, with the interests of ASHP.

N/A

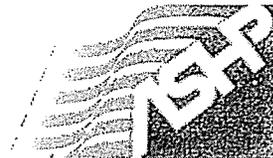
HENRI R. MARASSE, JR.
Name


Signature

3/31/09
Date

Revision Approved by Board of Directors April 24, 2001

VI-A.1



TO: Henri R. Manasse, Jr.
Secretary, Board of Directors

FROM: LISA GERSEMA

SUBJECT: Disclosure Report

DATE: 2/21/09

Having read and understood the "ASHP Policy on Disclosure of Outside Activities," and the "ASHP Policy on External Professional and Business Activities," I hereby make the following disclosure pursuant to those policies. I understand that disclosure is a continuing obligation and that in addition to the annual completion of this form I will keep the Board updated at other meetings of the Board, and make additional disclosures in accord with Board policies.

- 1. List any health-related board, advisory panel, regulatory body, office, committee or programs which you have participated in during the past 12 months (include the name of the entity, the position held).

Company/Agency

Activity/Service

ASHP Leadership Academy

Associate (unpaid) to SARA White Joe

Leading People module

- 2. List any health-related publications, or products, excluding ASHP publications/products, which you contributed to in the past 12 months that might raise concerns that such outside activities are competing with ASHP products, services or other membership activities.

Ø

- 3. List any grants received during the past 12 months, including name of granting entity and purpose and/or scope of grant.

Organization

Grant Purpose/Scope

Ø

VI-A.1

4. List the sources for scholarships, awards, gifts, honoraria, monies or other benefits, which exceed \$10,000 or ten percent of your gross annual income, received during the past 12 months from activities, services, retainers or consultancies (include the name of the paying entity, and a description of your service) that might give rise to a conflict of interest with ASHP.

Organization

Service/Activity

Ø

5. Describe, to the best of your knowledge, any financial interest which exceeds ten percent of your gross annual income or a ten percent equity interest, or other significant interest of yourself or an immediate family relative, such as a spouse, child or parent, in any outside activity or entity which does substantial business with or is in direct competition with ASHP.

Ø

6. Describe, to the best of your knowledge, any other transactions or actions in the past 12 months in which you or an immediate family member has a personal interest or in which you competed, directly or indirectly, with the interests of ASHP.

Ø

LISA GERSAMA

Name

Lisa Gersama

Signature

2/2/09

Date

Revision Approved by Board of Directors April 24, 2001