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American Society for Reproductive Medicine Conflict of Interest Disclosure

Purpose

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Definition

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Do any of the six statements above accurately describe you or your spouse/partner?

- Yes. Relationships are detailed below.
- No. There are no relationships to disclose.

Signature:

Signed on: Friday, April 19, 2024

By signing, I affirm that:

- I have received, read and agree to comply with the [Conflict of Interest Policy and Procedure](#) as provided to me by ASRM.
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Organization Name	Relationship Type	Who has this Relationship?
<input type="text" value="American Board of Urology"/>	<input type="checkbox"/> Company Officer <input type="checkbox"/> Direct Stockholder <input type="checkbox"/> Full-Time Company Employee	Who has this Relationship? <input checked="" type="radio"/> Self <input type="radio"/> Immediate

Add Relationship

Organization Name

Relationship Type

Who has this Relationship?

- Grant Recipient
- Honoraria
- Paid Consultant
- Speaker's Bureau
- Other

Family Member

Explain:

Examination Committee Sen

Relationship Began

2022-01-14

Does this relationship still exist?

- No
- Yes

Organization Name

American Urological Associa

- Company Officer
- Direct Stockholder
- Full-Time Company Employee
- Grant Recipient
- Honoraria
- Paid Consultant
- Speaker's Bureau
- Other

Who has this Relationship?

- Self
- Immediate Family Member



Explain:

AUA Update Series Editorial

Relationship Began

2021-07-01

Does this relationship still exist?

- No
- Yes

Signature: Robert E Brannigan

Signed on: Wednesday, May 1, 2024

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Do any of the six statements above accurately describe you or your spouse/partner?

- Yes. Relationships are detailed below.
- No. There are no relationships to disclose.

Signature:

Signed on: Saturday, April 6, 2024

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Organization Name

Relationship Type

Who has this Relationship?

Organization Name

WHO

- Company Officer
 Direct Stockholder
 Full-Time Company Employee

Who has this Relationship?

- Self
 Immediate



Add Relationship

Organization Name**Relationship Type****Who has this Relationship?** Grant Recipient Honoraria Paid Consultant

Relationship Began

Does this relationship still exist?

 No Yes Speaker's Bureau Other

Family Member

Signature:

Signed on: Saturday, November 16, 2024

By signing, I affirm that:

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Relationship Type

Who has this Relationship?

Organization Name

Levocept

- Company Officer
 Direct Stockholder
 Full-Time Company

Who has this Relationship?

- Self
 Immediate



Add Relationship

Organization Name

Relationship Type

Who has this Relationship?

Employee

Grant Recipient
Relationship Began

Does this relationship still exist?

No Yes

Honoraria

Paid Consultant

Speaker's Bureau

Other

Explain:

Relationship Began

Does this relationship still exist?

No Yes

Family Member

Organization Name

Company Officer

Direct Stockholder

Full-Time Company

Employee

Grant Recipient

Relationship Began

Does this relationship still exist?

No Yes

Honoraria

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Explain:

Relationship Began

Does this relationship still exist?

Who has this Relationship?

Self

Immediate

Family Member



Organization Name

Relationship Type

**Who has this
Relationship?**

No Yes

Signature:

Signed on: Tuesday, April 23, 2024

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4. I or my spouse/partner has had an interest in an actual or proposed contract, sale or transaction or series of similar transactions involving a total amount more than \$10,000 to which the ASRM was a party.
5. I or my spouse/partner has entered into a personal or business financial arrangement as a result of access to confidential information gained through my position with ASRM.
6. I currently participate as an officer, executive, board member, consultant, or other leadership role in other societies/organizations.

Do any of the six statements above accurately describe you or your spouse/partner?

- Yes. Relationships are detailed below.
- No. There are no relationships to disclose.

Signature:

Signed on: Saturday, November 23, 2024

By signing, I affirm that:

- I have received, read and agree to comply with the [Conflict of Interest Policy and Procedure](#) as provided to me by ASRM.
- To the best of my knowledge, all of my responses above are current and accurate.
- If I am currently serving ASRM as an officer or committee member of editorial board member, I have a fiduciary responsibility to act in the best interests of the American Society for Reproductive Medicine and that this responsibility precludes me from using my position to obtain special advantage for myself, my relatives,

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- Yes. Relationships are detailed below.
 No. There are no relationships to disclose.

Organization Name

Relationship Type

Who has this Relationship?

Organization Name

Hannah Life Technologies

Company Officer

Direct Stockholder

Relationship Began

2019-07-01

Who has this Relationship?

Self

Immediate



Add Relationship

Organization Name

Relationship Type

Who has this Relationship?

Does this relationship still exist?

No Yes

Full-Time Company Employee

Grant Recipient

Honoraria

Paid Consultant

Speaker's Bureau

Other

Explain:

Scientific Advisor with stock o

Relationship Began

2019-07-01

Does this relationship still exist?

No Yes

Family Member

Organization Name

Orchid Bioscience

Company Officer

Direct Stockholder

Full-Time Company Employee

Grant Recipient

Honoraria

Paid Consultant

Speaker's Bureau

Other

Explain:

Scientific Advisor with stock o

Relationship Began

2020-05-01

Does this relationship still exist?

No Yes

Relationship Ended

2023-02-01

Who has this Relationship?

Self

Immediate Family Member



Organization Name

Parity Health Inc

Company Officer

Direct Stockholder

Full-Time Company Employee

Who has this Relationship?

Self

Immediate



Organization Name**Relationship Type****Who has this Relationship?**

- Grant Recipient
- Honoraria
- Paid Consultant
- Speaker's Bureau
- Other

Family Member

Explain:

Relationship Began

Does this relationship still exist?

- No Yes

Signature:

Signed on: Friday, November 15, 2024

By signing, I affirm that:

- I have received, read and agree to comply with the [Conflict of Interest Policy and Procedure](#) as provided to me by ASRM.
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- Yes. Relationships are detailed below.
- No. There are no relationships to disclose.

Organization Name	Relationship Type	Who has this Relationship?	
Organization Name <input type="text" value="PCRS"/>	<input type="checkbox"/> Company Officer <input type="checkbox"/> Direct Stockholder <input type="checkbox"/> Full-Time Company Employee	Who has this Relationship? <input checked="" type="radio"/> Self <input type="radio"/> Immediate	

Add Relationship

Organization Name**Relationship Type****Who has this Relationship?**

- Grant Recipient
- Honoraria
- Paid Consultant
- Speaker's Bureau
- Other

Family Member

Explain:

Relationship Began

Does this relationship still exist?

 No Yes

Relationship Ended

Signature:

Signed on: Sunday, November 17, 2024

By signing, I affirm that:

- I have received, read and agree to comply with the [Conflict of Interest Policy and Procedure](#) as provided to me by ASRM.
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 No. There are no relationships to disclose.

Organization Name	Relationship Type	Who has this Relationship?	
Organization Name <input type="text" value="ASRM"/>	<input type="checkbox"/> Company Officer <input type="checkbox"/> Direct Stockholder <input type="checkbox"/> Full-Time Company Employee	Who has this Relationship? <input checked="" type="radio"/> Self <input type="radio"/> Immediate	

Add Relationship

Organization Name

Relationship Type

Who has this Relationship?

- Grant Recipient
- Honoraria
- Paid Consultant
- Speaker's Bureau
- Other

Family Member

Explain:

Program Committee Member

Relationship Began

0000-00-00

Does this relationship still exist?

- No
- Yes

Organization Name

Blue Cross Blue Shield of Mi

- Company Officer
- Direct Stockholder
- Full-Time Company Employee
- Grant Recipient

Who has this Relationship?

- Self
- Immediate Family Member



Relationship Began

0000-00-00

Does this relationship still exist?

- No
- Yes

- Honoraria
- Paid Consultant
- Speaker's Bureau
- Other

Organization Name

Ferring

- Company Officer
- Direct Stockholder
- Full-Time Company Employee
- Grant Recipient

Who has this Relationship?

- Self
- Immediate Family Member



Relationship Began

2022-06-01

Does this relationship still exist?

- No
- Yes

- Honoraria
- Paid Consultant

Organization Name

Relationship Type

Who has this Relationship?

Organization Name

Lipocine

- Speaker's Bureau
- Other

- Company Officer
 - Direct Stockholder
- Relationship Began
- 0000-00-00

Does this relationship still exist?

No Yes

- Full-Time Company Employee
- Grant Recipient
- Honoraria
- Paid Consultant
- Speaker's Bureau
- Other

Who has this Relationship?

- Self
- Immediate Family Member



Organization Name

NIH

- Company Officer
 - Direct Stockholder
 - Full-Time Company Employee
 - Grant Recipient
- Relationship Began
- 0000-00-00

Does this relationship still exist?

No Yes

- Honoraria
- Paid Consultant
- Speaker's Bureau
- Other

Who has this Relationship?

- Self
- Immediate Family Member



Organization Name

Posterity Health

- Company Officer
 - Direct Stockholder
- Relationship Began
- 0000-00-00

Does this relationship still exist?

No Yes

Who has this Relationship?

- Self
- Immediate Family Member



Organization Name

Relationship Type

Who has this Relationship?

- Full-Time Company Employee
- Grant Recipient
- Honoraria
- Paid Consultant
- Speaker's Bureau
- Other

Explain:

Scientific Advisory Board

Relationship Began

0000-00-00

Does this relationship still exist?

- No
- Yes

Organization Name

SSMR

- Company Officer
- Relationship Began

0000-00-00

Does this relationship still exist?

- No
- Yes

Who has this Relationship?



- Self
- Immediate Family Member

- Direct Stockholder
- Full-Time Company Employee
- Grant Recipient
- Honoraria
- Paid Consultant
- Speaker's Bureau
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Signature: James M Dupree

Signed on: Monday, April 22, 2024

By signing, I affirm that:

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Add Relationship

Organization Name**Relationship Type****Who has this Relationship?** Grant Recipient Honoraria Paid Consultant

Relationship Began

Does this relationship still exist?

 No Yes Speaker's Bureau Other

Family Member

Signature:

Signed on: Sunday, November 17, 2024

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Signature:

Signed on: Friday, November 15, 2024

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Organization Name

Relationship Type

Who has this Relationship?

Organization Name

Ferring Pharmaceuticals

- Company Officer
 Direct Stockholder
 Full-Time Company Employee

Who has this Relationship?

- Self
 Immediate



Add Relationship

Organization Name

Relationship Type

Who has this Relationship?

Grant Recipient

Honoraria

Paid Consultant

Relationship Began

2023-10-16

Does this relationship still exist?

No Yes

Relationship Ended

2023-10-16

Speaker's Bureau

Relationship Began

2024-09-01

Does this relationship still exist?

No Yes

Other

Family Member

Signature: Tamara Tobias

Signed on: Friday, November 15, 2024

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Signature:

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Organization Name	Relationship Type	Who has this Relationship?
Organization Name <input type="text" value="American Board of Obstetric"/>	<input type="checkbox"/> Company Officer <input type="checkbox"/> Direct Stockholder <input type="checkbox"/> Full-Time Company Employee	Who has this Relationship? <input checked="" type="radio"/> Self <input type="radio"/> Immediate

Add Relationship

Organization Name

Relationship Type

Who has this Relationship?

- Grant Recipient
- Honoraria
- Paid Consultant
- Speaker's Bureau
- Other

Family Member

Explain:

REI Division Member

Relationship Began

2021-07-01

Does this relationship still exist?

- No
- Yes

Organization Name

Ferring Pharmaceuticals

- Company Officer
- Direct Stockholder
- Full-Time Company Employee
- Grant Recipient
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- Paid Consultant
- Speaker's Bureau
- Other

Who has this Relationship?

- Self
- Immediate Family Member



Explain:

speaker - one conference

Relationship Began

2022-11-01

Does this relationship still exist?

- No
- Yes

Relationship Ended

2022-11-07

Signature: Erica Johnstone

Signed on: Friday, November 15, 2024

By signing, I affirm that:

- I have received, read and agree to comply with the [Conflict of Interest Policy and Procedure](#) as provided to me by ASRM.
- To the best of my knowledge, all of my responses above are current and accurate.
- If I am currently serving ASRM as an officer or committee member of editorial board member, I have a fiduciary responsibility to act in the best interests of the American Society for Reproductive Medicine and that this responsibility precludes me from using my position to obtain special advantage for myself, my relatives,

my close associates, my business, or any other organization with which I am affiliated. I agree to abide by the ethical opinions and practice guidelines as outlined by the American Society for Reproductive Medicine.

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American Society for Reproductive Medicine Conflict of Interest Disclosure

Purpose

The American Society for Reproductive Medicine (the "ASRM" or "Organization") depends on the active voluntary involvement and leadership of its members to accomplish its mission and to maintain its credibility as a valued resource. To do so, all involved will have to scrupulously avoid any conflict between their own respective personal, professional, or business interests and the interest of the ASRM, in all actions taken by them in their respective capacities on behalf of the ASRM.

The ASRM and any of its affiliate societies or groups requires its voluntary leaders, including but not limited to directors, officers, journal editors, committee/task force members, and other members, to observe the highest standards of business and personal ethics in the conduct of their duties and responsibilities.

Acts that mix the personal, duality of interest, or financial interests of an Interested Person with the interests of ASRM are indicative of a potential Conflict of Interest (COI). Not every potential conflict is an actual conflict. However, acts or situations that even have the appearance of a COI can be damaging to the reputation of the individual and the Organization. Consequently, the Organization seeks to appropriately manage potential and actual COI, as well as the appearance of such conflicts.

Additionally, as a sponsor accredited by the Accreditation Council for Continuing Medical Education (ACCME) and as a member of the Council of Medical Specialty Societies, the ASRM must ensure balance, independence, objectivity, and scientific rigor in all its educational activities. All individuals involved in planning, development, or dissemination of any educational activities or programming, including participation on committees, boards, or serving as a speaker/faculty, must disclose any commercial interest, financial interest, duality of interest, and/or other relationship with any entity producing, marketing, re-selling, or distributing health care goods or services consumed by, or used on, patients. All relationships, whether they directly apply to a particular CME event, must be disclosed. **All non-FDA approved uses of products must be clearly identified. Disclosures must be made to educational activity participants in the form of a slide, printed material, and/or oral statement for live and enduring formats. Although ASRM reviews and resolves potential conflicts of interest, it remains for the audience to determine whether the speaker's/volunteer's interests or relationships may influence their participation, about exposition or conclusion.**

The intent of this disclosure is not to prevent an individual with a commercial, duality of interest or financial interest from participation in ASRM activities (educational, leadership, or committees). The interest is to assist ASRM in resolving conflicts of interest that may create bias in any ASRM activities (educational, leadership, or committees).

Definition

Commercial interest is any entity producing, marketing, re-selling, or distributing health care goods or services consumed by, or used on, patients.

Duality of Interest is holding a position as an officer, trustee, director, or any other fiduciary role with an organization whether or not remuneration is received for service

that could potentially influence or be perceived to influence objectivity or could prevent the interested person from being impartial.

Financial Relationships are those relationships in which the individual benefits by receiving a salary, royalty, intellectual property rights, consulting fee, honoraria for promotional speaker's bureau, ownership interest (e.g., stock, stock options or other ownership interest, excluding diversified mutual funds), or other financial benefit.

Financial benefits are usually associated with roles such as employment, management position, independent contractor (including contracted research), consulting, speaking, and teaching, membership on advisory committees or review panels, board membership, and other activities from which remuneration is received, or expected.

Please disclose your relationships with any companies, societies, or other organizations accurately described by any of the following statements:

1. I or my spouse/partner has had during the preceding 24 months a commercial interest, financial interest and/or other relationship with an entity producing, marketing, re-selling, or distributing health care goods or services consumed by, or used on, patients.
2. I or my spouse/partner has had during the preceding 24 months a significant financial interest in, or arrangement or affiliation with one or more commercial entities that offer services to, support and/or participate in ASRM functions or activities related to reproductive medicine.
3. I or my spouse/partner has been a director or officer of or have/has been employed by a legal firm, accounting firm, consulting firm, investment banking firm, commercial bank or other financial institution that has performed services for or sought significant business with ASRM.
4. I or my spouse/partner has had an interest in an actual or proposed contract, sale or transaction or series of similar transactions involving a total amount more than \$10,000 to which the ASRM was a party.
5. I or my spouse/partner has entered into a personal or business financial arrangement as a result of access to confidential information gained through my position with ASRM.
6. I currently participate as an officer, executive, board member, consultant, or other leadership role in other societies/organizations.

Do any of the six statements above accurately describe you or your spouse/partner?

- Yes. Relationships are detailed below.
 No. There are no relationships to disclose.

Signature:

Signed on: Monday, November 18, 2024

By signing, I affirm that:

- I have received, read and agree to comply with the [Conflict of Interest Policy and Procedure](#) as provided to me by ASRM.
- To the best of my knowledge, all of my responses above are current and accurate.
- If I am currently serving ASRM as an officer or committee member of editorial board member, I have a fiduciary responsibility to act in the best interests of the American Society for Reproductive Medicine and that this responsibility precludes me from using my position to obtain special advantage for myself, my relatives,

my close associates, my business, or any other organization with which I am affiliated. I agree to abide by the ethical opinions and practice guidelines as outlined by the American Society for Reproductive Medicine.

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