

CME FACULTY DISCLOSURE FORM

Thank you for agreeing to participate as faculty in an upcoming CME activity. CME Consultants is accredited by the Accreditation Council for Continuing Medical Education (ACCME) and is joint-providing this activity. We will ensure your presentation is eligible for accreditation with *AMA PRA Category 1 Credit™* for physician learners.

Organization Name: California Neurology Society

Faculty Name: _____

Activity Title: From Genes to Junction: The Nexus of Neuromuscular Disease

Activity Date: October 29, 2026 - November 1, 2026

Role in this activity: ☐ Presenter ☐ Author ☐ Course Director ☐ Moderator ☐ Panel Member
☐ Case Selector/Presenter ☐ Editor ☐ Other: _____

Activity Type: ☒ Live Activity | ☐ Enduring Material

DISCLOSURE:

It is the policy of CME Consultants to ensure balance, objectivity, independence, and scientific rigor in all CME activities. Anyone engaged in activity content development, planning, or presentation must provide disclosure information.

The ACCME defines **ineligible companies** as *"those whose primary business is producing, marketing, selling, re-selling, or distributing healthcare products used by or on patients."* For specific examples of ineligible companies [visit the ACCME's website](#).

Have you had a financial relationship in the last 24 months with an ineligible company?

☐ **NO**

☐ **YES** **If yes, please list your financial relationship(s) below.** For each financial relationship, enter the name of the ineligible company and the nature of the financial relationship(s). There is no minimum financial threshold; and we ask that you disclose **all financial relationships** with ineligible companies, regardless of the amount. You should disclose all financial relationships regardless of the potential relevance of each relationship to the education. *If you need more room, please attach a separate document.*

Ineligible Company	Nature of Financial Relationship	Has the Relationship Ended?
Name of company	Employee, researcher, consultant, advisor, speaker, independent contractor (including contracted research), royalties or patent beneficiary, executive role, and ownership interest. Individual stocks and stock options should be disclosed; diversified mutual funds do not need to be disclosed. Research funding from ineligible companies should be disclosed by the principal or named investigator even if that individual's institution receives the research grant and manages the funds.	If the financial relationship existed during the last 24 months, but has now ended, please check the box below and list the date it ended. This will help our reviewers determine if any mitigation steps need to be taken.
1.		☐ Date:
2.		☐ Date:
3.		☐ Date:

By signing your name below, you hereby certify that the above statements are true and correct to the best of your knowledge.

Faculty Signature _____

Date _____

CME FACULTY PAPERWORK

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FACULTY STIPULATIONS:

Please read and acknowledge, by checking each box, that you agree to all and will follow each of the following CME guidelines.

- ☐ I attest that any clinical recommendations I make will be evidence-based and free of commercial bias (e.g., peer-reviewed literature, adhering to evidence-based practice guidelines).
- ☐ I have not involved any ineligible company* in the activity planning or in any other way.
- ☐ I will not ask for nor accept payment for this activity from any entity other than the joint providers of this activity.
- ☐ I will use all generic drug names or all trade names in my presentation.
- ☐ I will treat all medications in the class fairly and balanced.
- ☐ I will first notify the learners before I talk about anything off-label.
- ☐ I will first notify the learners before I talk about anything currently under research.
- ☐ I will choose information to present from the evidence-based literature.
- ☐ I will review, complete, sign, and return this CME form to CME Consultants at my earliest convenience, but no later than four weeks prior to the activity date.
- ☐ I will submit my slides/handouts/outline for content validation/bias review no later than two weeks prior to the activity date. I understand that if I use slides and/or handouts without CME Consultants' prior knowledge and content validation review, my presentation will not be eligible for accreditation.
- ☐ I will not invite any ineligible company* and/or representative to participate in this activity in any way.

*Ineligible Company - those whose primary business is producing, marketing, selling, re-selling, or distributing healthcare products used by or on patients.

CONTENT VALIDATION:

Please read the accreditation standard we are accountable to meet:

1. All recommendations for patient care in accredited continuing education must be based on current science, evidence, and clinical reasoning, while giving a fair and balanced view of diagnostic and therapeutic options.
2. All scientific research referred to, reported, or used in accredited education in support or justification of a patient care recommendation must conform to the generally accepted standards of experimental design, data collection, analysis, and interpretation.
3. Providers are not eligible for ACCME accreditation or reaccreditation if they present activities that promote recommendations, treatment or manners of practicing medicine that are not within the definition of CME or known to have risks or dangers that outweighs the benefits or known to be ineffective in the treatment of patients. An organization whose program of CME is devoted to advocacy of unscientific modalities of diagnosis or therapy is not eligible to apply for ACCME accreditation.
4. Organizations cannot be accredited if they advocate for unscientific approaches to diagnosis or therapy, or if their education promotes recommendations, treatment, or manners of practicing healthcare that are determined to have risks or dangers that outweigh the benefits or are known to be ineffective in the treatment of patients.

How will you substantiate that your presentation meets the standards noted above? (check one)

- ☐ Evidence-based references will be included in my slide presentation.
- ☐ I will submit a list of evidence-based references used to validate my presentation to CME Consultants on a separate document.

(Please send any additional references and/or an explanation of the level of evidence used for your research to priscilla@cmeconsultants.com)

CULTURAL and LINGUISTIC COMPETENCY & IMPLICIT BIAS:

(For more info visit: <https://cmeconsultants.com/clcandib/>)

CME Consultants conducts business in the state of California, and as such, we must follow the guidelines of the California Business and Professions Code - BPC § 2190.1, which states that Category 1 CME activities, that relate to patient care, must include a cultural diversity/linguistics component and the understanding of implicit bias.

DEFINITIONS:

Cultural and Linguistic Competency (CLC) - The ability and readiness of health care providers and organizations to humbly and respectfully demonstrate, effectively communicate, and tailor delivery of care to patients with diverse values, beliefs, identities and behaviors, in order to meet social, cultural and linguistic needs as they relate to patient health.

Implicit Bias (IB) - The attitudes, stereotypes and feelings, either positive or negative, that affect our understanding, actions and decisions without conscious knowledge or control. Implicit bias is a universal phenomenon. When negative, implicit bias often contributes to unequal treatment and disparities in diagnosis, treatment decisions, levels of care and health care outcomes of people based on race, ethnicity, gender identity, sexual orientation, age, disability and other characteristics.

(Please check)

- ☐ I understand that, if my presentation has a clinical, and/or patient care focus, I am required to address relevant cultural and linguistic competency as well as discuss implicit biases that impact the care of patients in my presentation.

ACCME STANDARDS:

To ensure you're made aware of the Standards for Integrity and Independence in Accredited Continuing Education, which govern all accredited education, a copy is available in the link below. As a participant in accredited medical education, we request that you review this material and comply with the standards:

<https://accme.org/rules/standards/>

(Please check)

☐ I have reviewed the ACCME Standards provided to me.

Please return this form to Priscilla Graham at CME Consultants: priscilla@cmeconsultants.com or fax to (909) 920-5977.

By signing your name below, you hereby certify that the above statements are true and correct to the best of your knowledge.

Faculty Signature

Date