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
- No

Will you disclose all potential conflicts of interest?

- Yes (see below)
- I will disclose my participation in societies/organizations, but I refuse to disclose my interests in commercial entities. Note: Selecting this option will preclude you from participating in a Continuing Medical Education activity and may preclude you from participating in an official capacity in governance of the ASRM.

- I will disclose my interests in commercial entities, but I refuse to disclose my participation in societies/organizations. Note: Selecting this option may preclude you from participating in an official capacity in governance of the ASRM.

- No, I refuse to disclose any interests in commercial organizations and any participation in societies/organizations.

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<th>Organization Name</th>
<th>Relationship Type</th>
<th>Who has this Relationship?</th>
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### Add Conflict

Signature: Michael Thomas

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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- [ ] Yes
- [x] No

Signature: [Paula Amato]

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reviewing possible malpractice

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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
- No

Will you disclose all potential conflicts of interest?

- Yes (see below)
- I will disclose my participation in societies/organizations, but I refuse to disclose my interests in commercial entities. Note: Selecting this option will preclude you from participating in a Continuing Medical Education activity and may preclude you from participating in an official capacity in governance of the ASRM.

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- No, I refuse to disclose any interests in commercial organizations and any participation in societies/organizations.

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<td></td>
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Relationship Began: 2020-06-01

Does this relationship still exist?
- ☐ No ☐ Yes

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

Add Conflict

Signature: Marcelle I Cedars

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

Signature: Hugh Taylor

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Signature: [James P Toner Jr]

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**Explain:**

- Member - Physicians Council

**Relationship Began:**

2021-09-01

**Does this relationship still exist?**

- ☐ No
- ☑ Yes

---

**Add Conflict**

**Signature:** Alan Penzias

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

☐ Yes
☐ No

Will you disclose all potential conflicts of interest?

☐ Yes (see below)
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☐ No, I refuse to disclose any interests in commercial organizations and any participation in societies/organizations.

<table>
<thead>
<tr>
<th>Organization Name</th>
<th>Relationship Type</th>
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Add Conflict
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<tr>
<td>Posterity Health</td>
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<td>Direct Stockholder</td>
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<td></td>
<td>Full-Time Company Employee</td>
<td>Immediate Family Member</td>
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<td>Grant Recipient</td>
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<td>Honoraria</td>
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<td>Speaker's Bureau</td>
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<tr>
<td></td>
<td>Other</td>
<td></td>
</tr>
</tbody>
</table>

Explain:

- Medical Advisory Board Member

Relationship Began: 2021-02-01

Does this relationship still exist?  
- No  
- Yes

Add Conflict

Signature: Akanksha Mehta

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<tr>
<td>Hanna Life Technologies</td>
<td>Company Officer</td>
<td>Direct Stockholder</td>
</tr>
<tr>
<td></td>
<td>Explain:</td>
<td>Scientific Advisor</td>
</tr>
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<tr>
<td>Orchid Bioscience</td>
<td>Company Officer</td>
<td>Direct Stockholder</td>
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<td>Explain:</td>
<td>Scientific Advisor</td>
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<tr>
<td>Parity Health</td>
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Signature: Ruben Alvero

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- [ ] Yes
- [x] No

Signature: [lauri pasch]

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<tr>
<td>ALife Health</td>
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<td>Self, Immediate Family Member</td>
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<td>Explain:</td>
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<td>Board of advisors</td>
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<td></td>
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<td>2021-02-03</td>
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<td>Does this relationship still exist?</td>
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<td>Boston OBGYN society</td>
<td>Company Officer, Direct Stockholder, Full-Time Employee, Grant Recipient, Honoraria, Paid Consultant, Speaker's Bureau, Other</td>
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<td></td>
<td>Does this relationship still exist?</td>
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</table>
Organization Name
Ferring

Relationship Type
- Company Officer
- Direct Stockholder
- Full-Time Company Employee
- Grant Recipient
- Honoraria

Who has this Relationship?
- Who has this Relationship?
  - Self
  - Immediate Family Member

Relationship Began
2021-11-19

Does this relationship still exist?
- No
- Yes

Relationship Ended
2021-11-20

- Paid Consultant
- Speaker's Bureau
- Other

Organization Name
Lab Corp

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

Explain:
clinical advisory board

Relationship Began
2022-06-10

Does this relationship still exist?
- No
- Yes

Add Conflict

Signature: Kim L. Thornton

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

- [ ] Yes
- [ ] No

**Signature:** [Eve Feinberg]

By signing, I affirm that:

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

☐ Yes
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Signature: [Sangita Jindal]

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

- Yes
- No

Will you disclose all potential conflicts of interest?

- Yes (see below)
- I will disclose my participation in societies/organizations, but I refuse to disclose my interests in commercial entities. Note: Selecting this option will preclude you from participating in a Continuing Medical Education activity and may preclude you from participating in an official capacity in governance of the ASRM.
- I will disclose my interests in commercial entities, but I refuse to disclose my participation in societies/organizations. Note: Selecting this option may preclude you from participating in an official capacity in governance of the ASRM.
- No, I refuse to disclose any interests in commercial organizations and any participation in societies/organizations.

<table>
<thead>
<tr>
<th>Organization Name</th>
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Add Conflict
Organizations

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<tbody>
<tr>
<td>Fellow Health</td>
<td>☑ Grant Recipient</td>
<td>Self</td>
</tr>
<tr>
<td></td>
<td>Full-Time Company Employee</td>
<td>Immediate Family Member</td>
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<tr>
<td></td>
<td></td>
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<tr>
<td>Inherent Biosciences</td>
<td>☑ Grant Recipient</td>
<td>Self</td>
</tr>
<tr>
<td></td>
<td>Full-Time Company Employee</td>
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</tr>
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<td>Posterity Health</td>
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<td>Who has this Relationship?</td>
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<td></td>
<td>Self</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Immediate Family Member</td>
</tr>
</tbody>
</table>

Relationship Began: 2021-06-01
Does this relationship still exist?  
- No
- Yes

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

Add Conflict

Signature: James F Smith
By signing, I affirm that:
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Do any of the six statements above accurately describe you or your spouse/partner?

☐ Yes
☒ No

Signature: Brad Milette

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- Company Officer
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**Explain:** patent license

**Relationship Began:** 2015-07-01

Does this relationship still exist?
- No
- Yes

Add Conflict

**Signature:** Steven L Young

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- [ ] Yes
- [x] No

Signature: J Preston Parry

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- 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.