

## AOFAS Disclosure Form for Non-AAOS Members



# AMERICAN ORTHOPAEDIC FOOT & ANKLE SOCIETY®

### **DISCLOSURE POLICY AND MANDATE:**

In order to promote transparency and confidence in research and education, the AOFAS has adopted a mandatory disclosure policy. Each applicant for a research grant or participant in an educational program has the obligation to disclose all potentially conflicting interests. Each applicant or participant must disclose if he/she has received something of value (*dollar amount is irrelevant*) from a commercial company or institution, which relates directly or indirectly to the subject of the research topic or educational presentation.

*AOFAS does not view the existence of these disclosed interests or commitments as necessarily implying bias or decreasing the value of the investigator's participation in this activity.*

### **QUESTIONS:**

For each “**Yes**” answer, the program requests additional detailed company information. A financial relationship is defined as receipt of any amount of money, stock, equipment, or anything else of value.

#### **Item 1: Royalties from a company or supplier:**

No conflict reported

or:

The following conflicts were disclosed:

#### **Item 2: Speakers bureau / paid presentations for a company or supplier:**

No conflict reported

or:

The following conflicts were disclosed:

#### **Item 3A: Paid employee for a company or supplier:**

No conflict reported

or:

The following conflicts were disclosed:

#### **Item 3B: Paid consultant for a company or supplier:**

No conflict reported

or:

The following conflicts were disclosed:

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**Item 3C: Unpaid consultant for a company or supplier:**

- No conflict reported  
or:  
 The following conflicts were disclosed:

**Item 4: Stock or stock options in a company or supplier:**

- No conflict reported  
or:  
 The following conflicts were disclosed:

**Item 5: Research support from a company or supplier as a PI:**

- No conflict reported  
or:  
 The following conflicts were disclosed:

**Item 6: Other financial or material support from a company or supplier:**

- No conflict reported  
or:  
 The following conflicts were disclosed:

**Item 7: Royalties, financial or material support from publishers:**

- No conflict reported  
or:  
 The following conflicts were disclosed:

**Item 8: Medical / Orthopaedic publications editorial/governing board:**

- No conflict reported  
or:  
 The following conflicts were disclosed:

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**Name:**

**Address:**

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**E-mail:**

**Signature:**

**Date Completed:**

**Attach and return the fully completed Disclosure Form per instructions in the grant application.**