



Analysis of the Call for Comment Regarding Disclosure of Commercial Support

On April 21, 2011, in accordance with the Accreditation Council for Continuing Medical Education's 2009 [Rule-Making Policy](#), the ACCME® issued a call for public comment about disclosure of commercial support.

Summary

The call for comment relates to Standard 6 in the [ACCME Standards for Commercial SupportSM](#), which says that providers must disclose to learners the sources of commercial support. Current [ACCME policy](#) related to commercial support disclosure reads: "The provider's acknowledgment of commercial support as required by SCS 6.3 and 6.4 may state the name, mission, and areas of clinical involvement of the company or institution and may include corporate logos and slogans, if they are not product promotional in nature."

In response to provider feedback and to strengthen the firewall between accredited continuing medical education and promotion, the ACCME proposed a change in policy to prohibit the use of corporate logos or the mention of corporate divisions in commercial support disclosure statements. For example, if XYZ Pharmaceuticals is the commercial supporter, the accredited provider's disclosure could not include XYZ Pharmaceuticals' logo, slogan, or tagline, or a reference to any of its corporate units, such as a medical education division.

The full text of the call for comment is appended at the end of this document. The call for comment period opened April 21, 2011 and closed on June 6, 2011. Organizations and individuals submitted written comments using an electronic form on the ACCME Web site. Comments were limited to 500 words.

The ACCME received 64 responses. Eighteen (28%) of the respondents supported the proposal because it would strengthen the separation between education and promotion; some said it was consistent with their own internal guidelines. Twenty-five (39 %) opposed the proposal; some expressed concerns that it could reduce transparency, stated that current policy is sufficient, and asked whether there is data to support the need for the proposed change. Nineteen (30%) of the responses, categorized as "Mixed," supported aspects of the proposal, offered suggestions for modifications, expressed concerns and/or asked for clarifications. Two responses (3%) are categorized as "other" because the respondents did not specifically comment on the proposal. The responses are reproduced verbatim as an appendix to this document.

A summary of the responses is contained in the following table.

Table of Responses: Commercial Support Disclosure

Response	Accredited provider	Nonaccredited provider	Commercial supporter	Other	Recognized accreditor	Total	Total %
Yes	15	1	0	0	2	18	28%
No	21	1	1	2	0	25	39%
Mixed	10	1	1	7	0	19	30%
Other	0	0	0	2	0	2	3%
Total	46	3	2	11	2	64	100%

ACCME Board Discussion

The ACCME thanks those who submitted comments. During the July 2011 meeting, the ACCME Board of Directors reviewed the responses. The Board decided that it would defer action to implement the proposed policy, and will study the issue further, deliberate about the issues and views raised by respondents, and engage in discussions with the CME community.

Call for Comment Disclosure of Commercial Support

The ACCME is seeking comment on a proposal that would prohibit the use of corporate logos and the mention of corporate divisions in disclosures of commercial support.

The ACCME Standards for Commercial Support and related policies are designed to ensure that accredited CME activities are independent, free from commercial influence, and serve the public interest. The Standards for Commercial Support create a firewall between accredited continuing medical education and industry promotion.

This call for comment relates to Standard 6 in the Standards for Commercial Support, which says that providers must disclose to learners the sources of commercial support.

SCS 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.

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

Current ACCME policy related to commercial support disclosure reads:

"The provider's acknowledgment of commercial support as required by SCS 6.3 and 6.4 may state the name, mission, and areas of clinical involvement of the company or institution and may include corporate logos and slogans, if they are not product promotional in nature."

In response to provider feedback and to strengthen the firewall between accredited continuing medical education and promotion, the ACCME is proposing a change in policy to prohibit the use of corporate logos or the mention of corporate divisions in commercial support disclosure statements. For example, if XYZ Pharmaceuticals is the commercial supporter, the accredited provider's disclosure could not include XYZ Pharmaceuticals' logo, slogan, or tagline, or a reference to any of its corporate units, such as a medical education division.

The ACCME is seeking comment from the public and the CME enterprise about adopting the following policy.

"The provider's acknowledgment of commercial support as required by SCS 6.3 and 6.4 under Standard 6 of the ACCME Standards for Commercial SupportSM must only state the name of the company supplying the commercial support, in text format only. Disclosure cannot contain corporate logos and cannot mention or describe any other units within the commercial interest's corporate structure."

The deadline for submitting comments is June 6, 2011. The ACCME limits comments to 500 words and will not consider anonymous submissions. All viewpoints are welcome, but please make your comments constructive. The ACCME considers the comments and the names of those authoring the comments to be public information that may be published on the ACCME's Web site.

Call for Comment: Disclosure of Commercial Support

Ref. #	Feedback Received	Org. Type
1	Some supporters have made attempts to influence how they will be recognized with sizing/color/placement issues of their logo. While you can typically push them off, this is an issue. However, removing logos may reduce awareness. Many attendees see the majority of CME-related text (such as accreditation statements) as 'fine print'. Attendees may not be aware of the supporters if the logo is not attached.	Accredited CME Provider
2	TO: ACCME Board of Directors RE: Comments on Proposed Rule On behalf of the CME Committee and the medical staff leadership of the faculty of Winthrop University Hospital, the Clinical Campus of Stony Brook University School of Medicine, we are in full support of the proposed rule NOT to allow corporate logos on any ACCME accredited CME activity materials or on any communications regarding commercial support to learners. Learner perception is essential to this process. We feel that a corporate logo on CME materials gives learners the wrong perception about the separation of sponsorship and content planning, and therefore serves only to undermine the protections assured them under the Standards of Commercial Support. Thank you for proposing this change in rule. Yours sincerely, John A. Aloia, MD, Chair, CME Committee and Chief Academic Officer G. Robert D'Antuono, MHA, Director of CME Winthrop University Hospital Clinical Campus of the Stony Brook University School of Medicine	Accredited CME Provider
3	The proposed language for SCS 6.3 is an important improvement because it recognizes that the entire purpose of a logo is promotional. On one hand SCS 4/C9 insists on the separation of promotion from education, yet by allowing a logo, slogans or taglines to inform the learners, promotion was being sanctioned.	Accredited CME Provider
4	I believe the current standards are adequate and appropriate controls to maintain firewalls and independence between providers and supporters. Since requests for Commercial support from providers take a variety of forms; grants, sponsorships, contributions, etc., it might be helpful to distinguish where the source of funding may have originated within a Commercial supporter. Sponsorships (eg. general support of a CME conference) may be solicited from the "commercial" segment of the company, instead of the CME department, while topic specific, or less general, funding requests might be funded by the CME department. Each commercial support may have a different approach to managing funding requests, and permitting identification of the funding source, excluding "product" brands, could be another mechanism for learners to assess any conflicts of interest. Identifying different funding sources would be no different than a faculty member disclosing any industry associations, for example, speakers bureau versus clinical investigator.	Commercial Supporter
5	Perhaps this change is the result of over-analysis? Very simply put, transparency is what we're going for. Our job is to make it easy for participants to evaluate the fairness and balance of an activity. To view an activity through the lens of possible commercial influence, knowing which products are manufactured or marketed by financial supporters is helpful. This change makes it more difficult and less transparent for participants to make these connections. The assumption that somehow there is something wrong about providing basic factual information about what products that financial supporters manufacture or market - or that this represents some kind of advertising is weak. I'd argue the exact opposite - that in many cases, information like this should be prominent and easy to see. If you have nothing to hide, and the activity is evidence-based and balanced - I'm sure this would be appreciated.	Non-Accredited CME Provider
6	I agree with and support the change to the acknowledgement of commercial support	Accredited CME Provider

Call for Comment: Disclosure of Commercial Support

Ref. #	Feedback Received	Org. Type
7	I support fully the change in policy as recommended. I believe that the use of logos and slogans and the mention of other corporate units can, in and of themselves, be construed by learners and the public as endorsement or advertisement and, so far as commercial interests are involved, should have no place in accredited CME content or disclosures. Thank you for the opportunity to comment and for taking this step in strengthening the firewall between CME and commercial interests.	Accredited CME Provider
8	The new ACCME proposal seems appropriate. If the intention of disclosure of commercial support is to tell learners about commercial support, it does not seem that use of a logo would be anything other than a promotion of said entity. I would support the proposal.	Accredited CME Provider
9	Let's innovate the medicine Cancers etc are overcoming !! First of all,it must occur the reverse Reaction. In other word the metabolic energy is balanced by AMS (artificial mitochondria system) L.C.C.life environment research institute	Other
10	Prohibiting the use of slogans and company logos would only help us enforce a policy we already have in place so I am in support of that area of this new policy. I am not however in favor of this section: disclosure "cannot mention or describe any other units within the commercial interest's corporate structure." First of all, I am a little unclear to what exactly this is referring to, but one specific example I can give where this might cause an issue is for activities supported by Eli Lilly or any of it's subsidiaries. In their LOAs, they provide for the Accredited Provider the exact wording of how their commercial support is to be disclosed to the attendees. They typically include in the language the Eli Lilly grant site (giving attendees a place to go to for more information about who the company has supported -- I do not think their intention is promotional) and they also (if the support is coming from one of their subsidiaries) list that the company is a subsidiary of Eli Lilly. Here is an example from ImClone: "This activity is supported by an educational grant from ImClone Systems, a wholly-owned subsidiary of Eli Lilly and Company. For further information concerning ImClone Systems grant funding visit www.imclonegrantoffice.com ." If this is something that would not be allowed due to this new policy, then I am not in favor of the section that would prohibit this. I am not a big fan of this wordy disclosure, however, it does provide the learner more information in regards to who is supporting the conference. Yes, ImClone is the supporter, but isn't it beneficial to inform that learners that ImClone is a subsidiary of Eli Lilly? Eli Lilly is not the only company that does this, so just on a every day task basis, this would cause more work for Accredited Providers because they will have to negotiate things like this out of the LOAs. I work for a state institution, and there are already what feels like a million things we can't agree to. I would hate to add another thing to the list. Unless this section of the policy is something the ACCME feels very strongly about, I would not include that last part of this policy in its final form.	Accredited CME Provider
11	If transparency in acknowledging support is a goal, I don't understand the reasoning behind disallowing logos. Someone walking flipping through a program or walking past a sign acknowledging supporters is much more likely to recognize a company logo and realize they are providing support. Listing only names is likely to mean that attendees don't even notice that support has been provided since they are generally bombarded by text on signs, on websites, on slides and in programs. It's also hard for me to believe that an attendee will be influenced by seeing a company logo rather than their printed name. Eliminating slogans, taglines or references to corporate units may make some sense (although I'm not convince those are likely to increase influence either) but I really don't see the sense of eliminating logos. I suspect the companies that provide grants for our educational efforts would continue to do so without logo acknowledgment because they believe in the value of what we do, but it seems petty to take away that little bit of extra recognition without some extremely valid reasons for doing so.	Non-Accredited CME Provider

Call for Comment: Disclosure of Commercial Support

Ref. #	Feedback Received	Org. Type
12	I see no problem with providers using logos with tag lines as long as no product specific content is there. It;s just one more hoop to jump through and I don't think it will change anything.	Accredited CME Provider
13	The Cleveland Clinic is in agreement with this proposed change in the Standards for Commercial Support. Our institution already enforces these standards of prohibiting the use of logos and corporate division names. This is important and necessary for the separation between accredited continuing medical education and promotion. We applaud the ACCME's effort to refine its standards and ensure the independence of CME.	Accredited CME Provider
14	Removing slogans, taglines is fine. I can't remember when the last time I saw one was anyhow. I disagree with removing logos. I mean...come on...really? Why don't we whisper it too? As for corporate units, thats overreach. Legally, if the commercial support is coming from a specific unit (ie. Medical Education unit budget), or a partnership between two pharmaceutical companies...legally THAT alliance/partnership/unit must be acknowledged. To quote the Pres..."We do not have time for this kind of silliness. We've got better stuff to do."	Accredited CME Provider
15	Please adopt the proposed policy. There is no need to include commercial entity logos etc. anywhere on CME activities. It makes it cleaner and helps support the claim that CME providers are interested in providing education, free of commercial bias.	Accredited CME Provider
16	These are my personal opinions and do not represent my employer. I don't understand why this is being proposed. It's actually easier to find commercial support information if the logos are used. I also like if there a specific unit within a very large company that is supporting a grant. Again, this adds transparency to learners. I don't know who brought up this topic, but we don't need another restriction like this. It's arbitrary, with no research or data to support the assumptions stated in the commentary. ACCME...please work to simplify things, not add more requirements.	Accredited CME Provider
17	I have mixed feelings regarding the removal of logos altogether. Removing logos and slogans would show a greater firewall between the accredited provider and commercial supporter as there must be communication between the two parties in order to obtain the logos in the first place (opening the door to suspicion). On the flip side, clinicians are very much aware of the corporate branding and by indicating disclosure only in regular type face, participants will now have to search for the support instead of clearly seeing a logo. Perhaps more specific direction on how, where, and what type of logos can be used (such as only on event marketing materials, can only appear once on meeting materials, etc.) would make better sense than eliminating them altogether.	Other
18	I fully support every intervention that informs the reader of a conflict-of-interest. When I read CME articles, I always look for COIs. Most CME has a COI and the reader HAS to be informed of it. One thing I do with certain articles is that I print them before reading them. This usually removes all overt marketing; which enables me to focus on the material vs. it's marketing.	Other
19	Hi, my name is Treena Bell and I am a CME coordinator in Eugene Oregon at Sacred Heart Medical Center. I think creating this " no logo" standard woud be pointless, what difference does it make if I see the logo for pfizer or the word? I think this would cause a lot of confusion. The logos are not allowed within the material, so I am not sure why this woudl make a difference. sincerely	Accredited CME Provider

Call for Comment: Disclosure of Commercial Support

Ref. #	Feedback Received	Org. Type
20	Corporate logos, slogans, and taglines are promotional by nature and should be disallowed. Under current practice, however, they encourage prominent display of corporate sponsorship, since the disclosure itself is a form of advertising. Under the proposed policy, disclosures will serve no advertising purpose, and therefore may be "hidden in the fine print" if this is not otherwise prohibited. I suggest editing the proposed policy: - to explicitly prohibit slogans and taglines - specify minimum type size, either in terms of point size, or compared to other material on the page or slide. I am chair of my medical center's CME Committee, but this opinion is my own, and does not necessarily reflect the view of my Committee or my medical center.	Accredited CME Provider
21	I agree with the proposal. We have not permitted logo usage in acknowledgements for the past 5 years. A logo is considered to be promotional (visually). Occasionally we have had to allow under pressure but it is not the policy of the CME division.	Accredited CME Provider
22	I agree with the new proposed policy. If we are to keep a "firewall" between education and promotion the use of corporate logs's etc. must be prohibited. Otherwise, it provides additional advertising for the commercial supporter and in my opinion is a form of promotion.	Accredited CME Provider
23	I disagree with the proposed policy for the following reason: Company logos are a ready identifier of any company. The public already has had multiple exposures to the branding of these companies and can easily recognize the logos as the identifier for that company. It is not a ready endorsement to use these logos, but using the logos helps to identify the company and the source of industry support.	Accredited CME Provider
24	If you are talking strictly about disclosure information fine. If you are including signage or printed program "Thank You" pages in this policy, I think your cutting off your nose to spite your face. How will eliminating logos and tag lines help build or reinforce a firewall? To me the important issue is the transparency of the support. If a company is more recognizable by its logo than by its printed name, the transparency is more easily recognizable. We have to be able to publicly acknowledge and thank the industry sponsors whose financial support makes independent CME possible. Let's face it, many of us cannot provide outstanding, affordable CME any other way. The more clearly defined and recognizable that support is the better.	Accredited CME Provider
25	I agree with the proposed policy; simply stating the name of the company(ies) is sufficient. Any more information, especially the logo, would draw too much attention to the commercial aspects of the activity and give the impression that it is the commercial company's activity; it could also foster an image imprint in the minds of the registrants which could distract from the educational program and the provider. We do not include more than an acknowledgement statement. I also want to draw attention to the fact that if there is a registration fee for any activity, and commercial support is also received, the provider should ensure that the acknowledgement statement includes that the activity is supported "in part" by (name of the company).	Accredited CME Provider
26	For years, it has been our policy to list only the company name of commercial supporters. We have never used logos or provided any description of a company for our directly-sponsored activities. Therefore, we support this policy change as it creates unanimity among providers.	Accredited CME Provider
27	The corporate logos are easily recognizable by learners. The use of the logos and the reference to a medical education division provides greater transparency with respect to commercial support. The mission, clinical involvement and slogans of the commercial supporters are unnecessary and do not need to be included in the disclosure to learners.	Other

Call for Comment: Disclosure of Commercial Support

Ref. #	Feedback Received	Org. Type
28	<p>Providence St. Peter Hospital heartily supports the adoption of the policy in question, which would restrict the format by which commercial support is acknowledged. Providence St. Peter Hospital, which is accredited to providence Category I CME by the Washington State Medical Association, does not accept commercial support of any kind of its CME program. This includes financial or in-kind support from commercial interests as well as promotional or exhibit fees. Best regards, Joan Ashcraft, CME Coordinator Providence St. Peter Hospital, Olympia Washington</p>	Accredited CME Provider
29	<p>Thank you for the opportunity to comment. The AANS opposes the proposal prohibiting the use of corporate logos and the mention of corporate divisions in commercial support disclosure statements. In our opinion the firewall between education and promotion is strong and we, as accredited providers have worked long and hard to solidify this distinction with our members, our joint sponsors, the patients we serve and with our corporate supporters. Limiting the use of the logo will not be beneficial and may serve to alienate these good relationships. We have over time built excellent corporate relations with our supporters and have created the appropriate firewalls that are in compliance for us as an accredited provider and for them with AdvaMed. Eliminating their logo at this juncture could reduce the amount of commercial support we receive, which has allowed us to produce robust, meaningful, transparent and appropriate continuing medical education. If transparency is what you're after, you might consider requesting LOAs from both the accredited provider and commercial supporter and see if they are aligned. Thank You.</p>	Accredited CME Provider
30	<p>This is concerning for several reasons. The ACCME states that this is in response to provider feedback, but it's not clear who thinks this is important and why this is suddenly an issue. I certainly don't have concerns that using a logo versus a text format weakens the separation between industry and CME providers. I've never seen any research to support this assumption. This seems like an unnecessary restriction that should really be an individual decision by CME providers. I personally feel that seeing the logos in signage makes the supporters more clearly identifiable, increasing the transparency about who is supporting the activity.</p>	Accredited CME Provider
31	<p>The American Academy of Family Physicians (AAFP) supports the policy recommendation of the ACCME regarding acknowledgement of commercial support and disclosure in text only. The AAFP, as an accredited CME provider organization with commendation from the ACCME, does not currently display logos or slogans in its disclosures to learners in certified CME. Furthermore, the AAFP, as one of the three national accreditors of CME, includes in its guidelines that CME awarded AAFP CME credit is to be free of corporate logos. The AAFP quality assurance audit process confirms a CME provider organization's adherence to this guideline. The AAFP appreciates this opportunity to respond to this request for comments and would be happy to discuss the practices of the AAFP as an accreditor and provider of CME with appropriate staff at the ACCME.</p>	Accredited CME Provider
32	<p>I humbly suggest allowing a small corporate logo, minus any tagline (versions of which most corporations have), giving learner's a visual and written cue to funding sources. A logo allows a quick reminder of funding when learners are responding to potential bias questions in an exit questionnaire, yet not be overwhelming if logo size is specified. To detect potential bias, learners must be clearly aware of the funding source from the outset of the program. Funding statements can be buried in cluttered signoff statements and learners are often hurried when completing exit questionnaires. In my opinion, the easier the exit questionnaire process, the better. Thank you for the opportunity to comment on this important issue.</p>	Other
33	<p>With healthcare funding as limited as it is, which places an increased strain on already trim resources, health and medical</p>	Accredited CME Provider

Call for Comment: Disclosure of Commercial Support

Ref. #	Feedback Received	Org. Type
	<p>education at the not for profit level will be even more challenging if commercial support is additionally limited. Many programs are funded by grants from commercial supporters. These increased limitations will, no doubt, continue to drive away resources. This will further decrease the ability of not for profit organizations to be able to serve our target audience. Currently, the commercial support standards do create a definitive separation between commercial promotion and education while allowing for a very small amount of latitude for those entities who generously support our programs and activities to have a small amount of exposure. This exposure does not impact the activity. I fear that with this type of limitation (related to the total removal of logo use in any and all communication) we will completely lose all support from those commercial and proprietary interests who would have otherwise provided grant funding for medical education. Please do not smother medical education by placing increased restrictions on commercial support. We depend on commercial support to augment many programs. Without it, we may be forced to reduce the number of activities, reduce the size of the audience in which we serve, or no longer supply the quality of speaker that we would like to offer. Keep things like they are. Rocking the boat may only serve to cause waves which may capsize continuing medical education. Patient care depends on it.</p>	
34	<p>The Iowa Medical Society (IMS) Committee on CME Accreditation supports ACCME's policy change requiring providers acknowledge commercial interests supplying commercial support, in name only. A company's logo, slogan and tagline are marketing tools designed to trigger product recognition that the company name alone may not. The goal of commercial support is to off-set the costs involved with conducting physician education, not to increase the marketing efforts of commercial interests. Requiring that commercial support suppliers are identified by company name only, will assist CME providers in demonstrating to participants that CME activities are planned and conducted without the influence of commercial interests. The perceived purity of CME activities is essential to maintaining the integrity of all CME programs. The IMS, the IMS Committee on CME Accreditation and the 15 CME programs that are accredited by IMS are in support of the proposed policy change to The ACCME Standards for Commercial SupportSM 6.3 and 6.4.</p>	Recognized Accreditor
35	<p>I agree with the proposed change.</p>	Non-Accredited CME Provider
36	<p>I am against removing the logo's, as they don't have the objectiveness of the content. It is the only way presenters can show where they work or who they represent, and to my opinion that is the kind of reward they deserve of their efforts. Again, it doesn't affect the value of the objective content they present.</p>	Accredited CME Provider
37	<p>I strongly disagree with the act to remove logos. It is more often than not that a presenters credibility is due to a position that they hold at their organization. The association with a known, respectable company, yields increased trust and can result in better learning as the attendees will place more reliance and value on information from a credible source and recognition will more easily be established with a logo than a text format company name. In addition, I have a hard time reconciling how the placement of a company in text is any more or less commercial than a logo which is the appropriate brand of any company. If you are concerned that promotion may be infused into a logo then I would recommend considering restrictions on acceptable logos (i.e. size limits, no sales messages, etc) rather than restricting logos completely.</p>	Accredited CME Provider
38	<p>Eli Lilly and Company appreciates the opportunity to comment on proposed changes to ACCME's Standards for Commercial Support concerning the use of logos, slogans, and mentions of corporate divisions in disclosures of support for continuing medical education (CME). We respect and support the ACCME's dedication to independence, disclosure, and transparency</p>	Commercial Supporter

Call for Comment: Disclosure of Commercial Support

Ref. #	Feedback Received	Org. Type
	<p>within continuing medical education. Given the increased public interest in transparency regarding interactions between health care providers and industry, it benefits us all to have clear standards governing commercial support disclosure in CME. As a commercial supporter of CME, we find ACCME's current standard allowing the use of logos to be appropriate and in the public interest. As participants in CME have different learning styles, they also recognize various types of communication differently. While some participants see and comprehend text-based disclosure statements, corporate logos provide an important visual alternative that a CME program has received commercial support. With full disclosure, a health care professional can then decide for themselves whether or not to enroll in the commercially supported CME program. A text-only corporate identifier seems far more likely to be overlooked, making it more difficult for health care professionals to find disclosure information. Additionally, if the elimination of logos only applies to supporters, while providers and educational partners continue to use them, critics may interpret the change as an attempt to hide disclosure rather than the ACCME's intended purpose. If CME providers and commercial supporters indeed share an interest in and commitment to transparency, let us be as upfront as possible. Eliminating logos will simply cast a shadow on sources of commercial support, rather than illuminate them. We do see an important distinction between the simple visual alternative of a corporate logo when compared to logos with accompanying slogans or taglines. Whether slogans or taglines relate to a company, disease state, or product, they are by nature promotional statements. It is Lilly's current policy to provide a tagline-free logo for disclosure purposes and we would support a change in ACCME standards to eliminate slogans and taglines. Logos should be simple and readily identify the supporting company – not contain extraneous messages that could be construed as promotional. We will refrain from commenting on proposed changes concerning the mention of corporate divisions. Current Lilly policy is to identify the company as a commercial supporter, not specific corporate divisions or, for that matter, therapeutic practice areas, to avoid any inadvertent or perceived promotion of our products. It is not our current practice to disclose support by corporate division, nor do we have plans to do so. Once again, we appreciate the opportunity to comment on ACCME's proposed changes to the Standards for Commercial Support. We support ACCME's efforts to ensure disclosures are free from promotional messages – but encourage continued use of corporate logos which are slogan- and tagline-free to provide maximum opportunity for disclosure of commercial support.</p>	
39	<p>I am in support of the proposed policy as it relates to acknowledgement of commercial support in order to strengthen the firewall between CME and promotion and further reduce the possibility of introducing commercial bias in CME.</p>	Accredited CME Provider
40	<p>I dont' believe that changing from use of logo to just text format will change any perceptions. To me, the logo is not advertising, as it is not product specific.</p>	Accredited CME Provider
41	<p>We agree that the inclusion of company logos as a means of disclosing commercial supporters is unnecessary, and that providing this information through plain text is sufficient. We do, though, feel that the exclusion of company divisions from these disclosures could have a negative impact. Providing the name of the company division provides greater transparency, and could impact the perception of conflict of interest for activity faculty. For example, an activity may receive funding from one division of a large commercial interest. One of the activity's faculty may receive research funding from a separate division of the same commercial interest. If the learners only know that the activity was funded by the overall company, and that the faculty member is supported by the same company, this could raise questions of conflict of interest in the learners. If the learners are made aware that the sources of the funding are from distinct divisions of the company, they have a more precise understanding of the financial relationships that could change their perceptions of conflict. Given the trend toward consolidation of companies, it seems likely that a smaller number of large commercial interests will be providing educational grants, and so the possibility of</p>	Accredited CME Provider

Call for Comment: Disclosure of Commercial Support

Ref. #	Feedback Received	Org. Type
	creating the impression of a conflict because of an incomplete disclosure seems more, not less, likely. In instances where a commercial interest provides support through distinct divisions, it would be more transparent to share this information with learners.	
42	While we support the ACCME's stated goal of ensuring that CME is developed independent from any commercial influences, the proposed policy on disclosure of commercial support at CME activities actually may decrease transparency. In the ACCME commentary on this proposal, the organization states that the current Standards for Commercial Support already create a "firewall" between CME providers and industry promotion by not allowing the promotion of any products. Transparency rules require that learners identify any corporate grant support, and the logo is the company's readily identified symbol. Relegating the support of CME to a text name only would require learners to search in greater detail than currently required to identify the source of any potential commercial support of a CME activity. Combined with the current, effective firewall found in the standards and policies of the ACCME is significant evidence to show a lack of bias in CME activities that either have or do not have commercial grant support. We respectfully submit that there does not appear to be a clear rationale for changing the current, transparent practice of acknowledging the corporate source of industry CME grants. In addition, the proposed policy may hinder the transparency already established within the CME enterprise.	Accredited CME Provider
43	The CME Coalition (www.cmecoalition.org) is a consortium of stakeholders representing continued quality improvement and evidence-based medicine in the Continuing Medical Education enterprise. While we support the ACCME's stated goal of ensuring that CME is developed independent from any commercial influences, the proposed policy on disclosure of commercial support at CME activities actually may decrease transparency. In the ACCME commentary on this proposal, the organization states that the current Standards for Commercial Support already create a "firewall" between CME providers and industry promotion by not allowing the promotion of any products. Transparency rules require that learners identify any corporate grant support, and the logo is the company's readily identified symbol. Relegating the support of CME to a text name only would require learners to search in greater detail than currently required to identify the source of any potential commercial support of a CME activity. Combined with the current, effective firewall found in the standards and policies of the ACCME is significant evidence to show a lack of bias in CME activities that either have or do not have commercial grant support. We respectfully submit that there does not appear to be a clear rationale for changing the current, transparent practice of acknowledging the corporate source of industry CME grants. In addition, the proposed policy may hinder the transparency already established within the CME enterprise.	Other
44	While I understand and applaud the intent behind the proposed revisions to the policy described above, I think it is a mistake to place added restrictions for recognizing commercial supporters on the CME community. In an economic environment where industry providers have shrinking budgets from which to allocate funding and where mergers are reducing the number of companies who are in a position to provide support, it is becoming increasingly difficult to secure funding for programs. Because the only benefit supporters receive is public recognition, it would be a mistake to dilute that recognition to a degree that it no longer offers value. The proposed policy changes will almost certainly result in a decrease in support which could inhibit the ability of many not-for-profits who struggle to remain solvent to provide quality continuing medical education. I suggest, too, that eliminating company logos from CME support disclosures could have the unintended consequence of actually decreasing transparency. A company's identity is tied directly to its logo. Consider that, beginning in March 1996 and continuing for years, the Nike "swoosh" logo was successfully used WITHOUT THE NIKE NAME in company branding. Without the use of a logo, company disclosures can essentially be hidden in the sea of text that often comprises activity brochures and programs.	Accredited CME Provider

Call for Comment: Disclosure of Commercial Support

Ref. #	Feedback Received	Org. Type
	<p>Currently, the logo serves as a visual cue that alerts learners that they should evaluate the content very carefully for bias. Similarly, I find it counter-intuitive to decrease the amount of information, represented visually or textually, that a provider can communicate to learners about the precise location of the support by changing the policy to disallow mention of the division within the company that is providing support. Let us also consider that our learners are all intelligent, very well-educated men and women. They are capable of distinguishing acknowledgement from promotion and aren't easily influenced. Indeed, there is a push amongst most specialty boards to provide more evidence-based medicine because learners demand proof that recommendations are supported by science. I believe we can trust our learners to critically evaluate the material that is presented to them and not to be influenced by a logo serving to thank a commercial supporter. It is terrific that the ACCME is inviting provider input into this issue. Before further discussion among the decision-makers and before a decision is made by them, I recommend that ACCME also request input from commercial supporters to gain insight into how the proposed policy would influence their decision to provide commercial support, if it is approved.</p>	
45	<p>We concur philosophically with this proposed policy change to eliminate the use of commercial interests' logos when disclosing their commercial support of an accredited CME activity. However, in considering this proposed policy change, numerous questions have arisen in terms of its possible interpretation and implementation among the CME community. First, what research or other evidence indicates that visual utilization of commercial logos to communicate the presence of commercial support negatively impacts or biases a learner's educational experience or detracts from the quality of a CME activity? If the ACCME has this data, would it consider sharing it with the CME community to help us better understand what is precipitating this potential policy change? Secondly, would this proposed policy change only apply when disclosing support from commercial entities and not affect how disclosure of support from non-commercial entities is handled? If that is the case, then there could be a disconnect in CME providers' practices to potentially use logos to disclose support from some entities (e.g., governmental organizations, hospitals, 501C non-profits) and not others (e.g. commercial interests). While this could be managed, it would add another level of complexity for CME providers to ensure appropriate and consistent interpretation of ACCME policies when disclosing support of CME activities. Lastly, what might the implications of this policy change be on advertising associated with a CME activity? For example, would it still be acceptable to accept advertising in a program book that contains logistical information and logos are used, while this program book would acknowledge on a different page the activity's commercial supporters in text form only? In considering this potential policy, we do have some concern about how this change would affect those commercial interests that support our CME activities. In compliance with the Standards for Commercial Support, disclosure of commercial support is also a communication mechanism, by which commercial interests may be positively associated by learners as supporters of high quality CME.</p>	Accredited CME Provider
46	<p>There is no evidence that corporate logos influence physicians beyond the influence exerted by corporate names. In other words, it has not been demonstrated that a corporate name combined with a corporate logo is more influential than a corporate name alone. Therefore, a change in the Standards for Commercial Support to prohibit the use of corporate logos is not evidence-based and is not warranted.</p>	Accredited CME Provider
47	<p>The Alliance for Continuing Medical Education (Alliance) is responding to the Accreditation Council for Continuing Medical Education's (ACCME) recent Call for Comments regarding disclosure of commercial support. The ACCME is specifically asking for comments on proposed policy language designed to provide further clarification of disclosure requirements cited in SCS 6.3 and 6.4. The Alliance recognizes that the use of a logo from a commercial interest is one of the best and most visible ways to disclose the identity of an organization. Logos used in association with the names of the commercial interest are easily</p>	Other

Call for Comment: Disclosure of Commercial Support

Ref. #	Feedback Received	Org. Type
	<p>identified by learners and contribute to transparency when commercial support is provided for CME activities. The Alliance supports the continued use of logos from commercial interests under the following conditions: 1) that the logo only displays a company name and/or 2) that the logo does not contain verbiage that could be construed as being promotional in nature. Commercial interests providing support for CME activities have implemented guidance from the Office of the Inspector General and have separated their grant making functions from their sales and marketing functions by creating legal separations, such as corporate divisions, to keep those functions distinct. Commercial support disclosures are intended to foster transparency with learners who elect to participate in educational activities, and are essential for learners to be able to make an informed decision whether to participate in such activities. Allowing commercial interests to disclose the support, and the distinct corporate entity that made the decision to support the CME activity enhances transparency. The Alliance would like to propose the following draft language to help clarify the disclosure requirements for SCS 6.3 and 6.4: “The provider’s acknowledgment of commercial support as required by SCS 6.3 and 6.4 under Standard 6 of the ACCME Standards for Commercial SupportSM must state the name of the commercial interest and may include a corporate logo comprised of a graphic and the name of the company without any additional text. When necessary, the disclosure should include both the company making decisions to support educational activities and the identity of the distinct corporate entity that made the funding available.”</p>	
48	<p>As an ACCME accredited provider for CME activities, the American Association of Clinical Endocrinologists (AACE) would like to offer the following response to your call for comment on a proposed policy modifying SCS 6.4 to prohibit the use of corporate logos and the mention of corporate divisions in disclosure of commercial support. In 2009, the AACE Board of Directors adopted a position statement affirming that relationships between physicians and industry, including the important conduct of continuing medical education activities for both physicians and allied health professionals, have overwhelmingly met ethical standards. Moreover, AACE feels that the existing standards and criteria set by ACCME for the disclosure of commercial support are already equal to or exceed those applied to other segments of our society, including governmental legislative and regulatory bodies. A corporate logo is simply a visual portrayal of the company’s name like American Association of Clinical Endocrinologists, ACCME, and countless other organizations. The logo is an important and appropriate symbol of the identity of the company or organization. There is no compelling rationale that the appearance of the logo as part of the disclosure of commercial support serves a commercial promotional intent. If you displayed only the logo and not the company’s name, what would be the difference? This is an unnecessary policy that unfairly impugns the ethical character of the supporting company. AACE believes that ACCME and its accredited providers, including AACE, can hold its current standards for conducting CME activities up to the closest scrutiny. ACCME itself has expressed concern regarding the future of CME and does not need to contribute to its continuing demise by such action. We strongly recommend that SCS 6.4 remain unchanged.</p>	Accredited CME Provider
49	<p>The Pharmaceutical Research and Manufacturers of America (PhRMA) is pleased to submit comments in response to ACCME’s Call for Comment on Disclosure of Commercial Support. PhRMA is a voluntary nonprofit organization representing the company’s leading research based pharmaceutical and biotechnology companies, which are devoted to inventing medicines that allow patients to lead longer, healthier and more productive lives. As we have noted in previous comments, PhRMA supports independence in the continuing medical education (CME) conducted by ACCME accredited providers. PhRMA’s Code on Interactions with Healthcare Professionals specifically provides that companies “should follow standards for commercial support established by the ACCME” which includes Standard 6 on Disclosure of Commercial Support. In that context, we have comments relating to both issues raised by the Call for Comment. First, ACCME proposes to prohibit the use of logos in connection with disclosures of commercial support and limiting the disclosure of the name of the company to text format. We are concerned that such a prohibition will actually undermine transparency and the purpose of the disclosure</p>	Other

Call for Comment: Disclosure of Commercial Support

Ref. #	Feedback Received	Org. Type
	<p>requirements. A corporate logo is easily recognizable, is not product specific and quickly tells the learner of the source of the commercial support. A disclosure in text format may become lost or buried in other information in electronic or print format. ACCME could encourage providers to have reasonable standards for the size and use of logos so that there is a reasonable balance and clarity between and among CME providers and commercial supporter(s), but we believe it would be a step backward for transparency to prohibit all use of logos in connection with disclosure. ACCME could alternatively consider requiring providers to include a statement: "Corporate supporters have had no influence over content, faculty, methods or audience for this activity." Second, in connection with ACCME's proposal to prohibit the disclosure of the corporate supporter from describing any units within the commercial interest's corporate structure, we would like to confirm that the intent is not to prohibit the naming of the specific corporate entity or entities within a corporate family that fund or administer the support. For example, Company "X" may have a number of different subsidiaries that are distinct legal entities: Company "A", Company "B" and Company "C". Those subsidiaries may function in many ways as separate corporate entities and likely separately make and/or administer grant decisions. We would like to confirm that the proposed policy would still allow Company B that makes and/or administers a grant to a CME provider to be disclosed and that the proposed policy would not require the naming of Company X instead. Again, we believe that such a policy would be consistent with the transparency that Standard 6 in the Standards for Commercial Support intends to promote. We accept the elimination of the naming of the business unit within a company as part of the disclosure. Thank you for the opportunity to submit these comments. Please feel free to contact us if you have any further questions.</p>	
50	<p>Thank you for this opportunity to provide comments. As an accredited provider of CME, the American College of Rheumatology fully complies with the ACCME Standards for Commercial Support and systematically discloses to learners the source of all support from commercial interests. The ACR appreciates the necessity of having a solid firewall between accredited continuing medical education and promotion. We believe the mechanism and procedures in place to do so are, and have been, adequate. The proposal to prohibit the use of corporate logos suggests that the policy has not been sufficient or appropriate. As commercial support is often an essential revenue source for medical specialty societies providing CME, we are keenly aware of the importance of recognition of those commercial interests which have committed to supporting our CME mission within the framework of independent CME. Just as the ACCME and AMA have logos critical to their identity; we feel that the ACR logo is critical to recognition of the organization as a leader in providing quality independent education in rheumatology. In the same vein, the source of commercial support is indeed a 'commercial interest' with a distinct identity which is transmitted through use of its logo. It is incumbent upon us to be as transparent as possible by using these logos and not diminishing who and what these entities are. We are not aware of any evidence that suggests that the inclusion of corporate logos (without branding message) has additional influence over use of a name or that the practice takes away from independent CME. In addition, we are concerned that if implemented, the proposal may feed into so much of the misunderstanding around the issue of commercial support. As we are sure you are aware, public funding, particularly in the current economic climate, for education, quality initiatives and research is limited and foundation and other such philanthropic support can only go so far. Therefore, without continued external support from commercial supporters, CME providers may not be able to provide the same level of education. We respectfully request that the proposal be modified and suggest that language be added to differentiate between disclosure and acknowledgement and thus continue to allow corporate logos (without branding messaging) in acknowledgement listings.</p>	Accredited CME Provider
51	<p>The Committee on Medical Education and the Committee on Accreditation Review support the adoption of the following ACCME policy. "The provider's acknowledgement of commercial support as required by SCS 6.3 and 6.4 under Standard 6 of</p>	Accredited CME Provider

Call for Comment: Disclosure of Commercial Support

Ref. #	Feedback Received	Org. Type
	<p>the ACCME Standards for Commercial Support SM must only state the name of the company supplying the commercial support, in text format only. Disclosure cannot contain corporate logos." The MMS Committee on Medical Education (CME) and Committee on Accreditation Review (CAR) disagree on the following point. The CAR is in favor of the proposed policy and the CME suggests that identification of a specific unit within the commercial interest's corporate structure is a provision of transparency and should be recognized if/when appropriate. Proposed ACCME policy: "and cannot mention or describe any other units within the commercial interest's corporate structure."</p>	
52	<p>The Texas Alliance for Continuing Medical Education (TACME) is comprised of membership representing hospitals and health systems, medical education and communication companies (MECCs), and medical schools. In an online survey conducted to draft this response, there were 19 responses with 89% representing hospitals and health systems, and 10% representing MECCs and medical schools. Survey results showed that 84% of respondents receive commercial support. Of that number, 94% supports the ACCME's proposal that would prohibit the use of the corporate logos and the mention of corporate divisions in disclosures of commercial support. Responses to whether a corporate logo was used showed that 74% of respondents did not use a logo. This is supported by anecdotal comments stating that use of logos added steps to an already time-sensitive process for resource-/staff-limited providers. TACME does support the ACCME's proposal to prohibit the use of corporate logos. TACME seeks further clarification with regards to prohibiting the mention of corporate divisions. Our experience is that several commercial interests have granting processes that are specific to divisions. Letters of agreement list the corporate division as a party to the agreement. As such, mentioning of the corporate division would be necessary when listing acknowledgements of commercial support. TACME appreciates the opportunity to respond to this Call for Comment.</p>	Other
53	<p>We are writing to comment on the current proposal that would prohibit the use of corporate logos and the mention of corporate divisions in disclosure of commercial support. We believe the proposal is contrary to recent industry-wide efforts to provide full disclosure about commercial support. Ironically the stringent nature of these proposed rules negate the underlying objective that accredited organizations move toward fuller disclosure of corporate support. Furthermore we think that the new proposed rule may make companies reluctant to support future programs if they cannot be fully transparent in acknowledgment of how the funding is being provided. Here are specific comments: Corporate Logos "Disclosure cannot contain corporate logos..." We believe that organizations providing accredited programs should have the flexibility to display the logos of supporters as this provides a helpful visual reference and is consistent with efforts to maintain transparency. We see no fundamental reason why acknowledging a company's support by featuring their logo is problematic. Our view is that corporate logos are part of a company's full identity and provide a visual reference point that is helpful for program attendees who might otherwise overlook the printed line of acknowledgement. Unlike the mention of a trade name which could be construed as promotion of a product, the inclusion of a corporate logo does not have any promotional aspect to it. It is merely a visual display of a company's identity and is used commonly in all forms of its communications. As many people are visually-based learners, we feel that there should be flexibility in allowing an accredited organization to be able to display the logo of a company providing funding. "Disclosure cannot mention or describe any other units within the commercial interest's corporate structure..." Many companies that fund accredited programs have multiple business units within a larger corporation. Often support of accredited disease-state programs originates from a specific division or business unit focusing on a specific therapeutic area. Increasingly companies are creating sub-identities for these units under the umbrella of the larger organization. Companies may refer to these units with the name of the company coupled with the specific therapeutic name of the group. Corporate identity standards required by the organization mandate the consistent use of these names in all communications. In short, we see this proposed rule as unnecessarily inhibiting the acknowledgment of the corporations which are providing funding. Not allowing the</p>	Accredited CME Provider

Call for Comment: Disclosure of Commercial Support

Ref. #	Feedback Received	Org. Type
	acknowledgement or publication of a specific name that a funder uses in all of its communications runs counter to the full disclosure intended by all parties. The unintended effect is that funders may question the validity of accredited organizations' ability to provide full disclosure of their funding.	
54	Thank you for the opportunity to provide comment. The American Society of Hematology supports the continuation of including logos to acknowledge and thank supporters, and would appreciate the ACCME further clarifying its reasoning for restricting disclosure to text only. We have concerns that such a policy could impact companies' willingness to support continuing medical education programs, but are unaware of any evidence base that would suggest that disclosure via text only actually creates a better firewall than disclosure via a company logo. Finally, if this policy were to be implemented, providers would require many months of lead time to comply since program support is solicited well in advance of the CME activity.	Accredited CME Provider
55	The Wisconsin Medical Society 's Council on Medical Education is not in favor of this policy change. Commercial support is increasingly difficult to obtain, and logos may make supporting organizations feel recognized more effectively. However, sizing of the logos could be specified. The Council agrees to the elimination of slogans, areas of clinical involvement and mission, which are allowed but not often used.	Accredited CME Provider
56	On behalf of the American Medical Association (AMA) Council on Medical Education, we write to respond to the ACCME's Call for Comments related to Disclosure of Commercial Support. The Council is supportive of the ACCME's Updated Standards for Commercial Support and the robust disclosure practices that have resulted since their implementation. We support ACCME in its continued efforts to maintain a separation between continuing medical education and promotion of commercial products but it is not clear to us that there is any evidence that use of corporate logos or mentions of corporate divisions in disclosures of commercial support is detrimental to the process. The AMA welcomes the opportunity to work with the ACCME on this and other issues that may impact accredited CME providers that award AMA PRA Category 1 Credits™. If you should have any questions concerning this communication please let us know. Thank you for the opportunity to comment on this issue.	Accredited CME Provider
57	The California Medical Association (CMA) and the Institute for Medical Quality (IMQ) wish to comment on the proposed change in requirements related to Commercial Support. CMA/IMQ, as the largest state medical society accrediting CME programs, recognizes the importance of eliminating any impression that a CME activity is influenced by commercial support. Some logos or the names of units within a corporate structure are, by design, promotional. It would be a hardship on the CME Providers to differentiate when a design or name may be construed as too promotional, so it is better to ban their use and just require the corporate name appear in a text only format. Our support for this proposed change should not be construed as a change in our position on Commercial Support, which we believe that, when properly managed to avoid commercial bias, offers benefits to many providers who conduct CME activities.	Recognized Accreditor
58	The members of the Association for CME Excellence have mixed feelings about prohibiting the use of corporate logos in disclosures of commercial support. While some feel the logos serve as marketing mechanisms for commercial supporters, others feel the use of logos in disclosures makes the source of funding very clear. Regardless, disclosures of commercial support must be highly visible to attendees and never relegated to the fine print.	Other
59	Dear Dr. Kopelow: The American Society of Transplant Surgeons (ASTS) welcomes the opportunity to provide comments concerning the ACCME "Call for Comment: Disclosure of Commercial Support" that would prohibit the use of corporate logos	Accredited CME Provider

Call for Comment: Disclosure of Commercial Support

Ref. #	Feedback Received	Org. Type
	<p>and the mention of corporate divisions in disclosures of commercial support and instead require that providers name of the company supplying the commercial support in text format only. The ASTS is a non-profit organization dedicated to fostering and advancing the practice and science of transplantation for the benefit of patients and the community. The core of the ASTS mission is to define and promote lifelong training and education in the rapidly evolving field of transplantation. The large majority of ASTS members are board-certified surgeons with advanced training in transplantation and a record of publication in peer-reviewed journals and books. Due to this focused expertise, the opportunity for practice-based learning that will promote changes in competence, performance and patient outcomes is limited outside of specialty societies such as ASTS. ASTS has a well-established record of providing valuable learning interventions and was Accredited with Commendation by the ACCME in November 2009. The ASTS supports the current language in the ACCME Standards for Commercial Support (SCS) and does not support the proposal to require providers to list commercial supporters in text format only. Per the SCS, organizations that accept commercial support are required to disclose the source of all support to learners and such disclosure must never include the use of a trade name or product group. The current language is sufficient to allow our physician learners to understand the sources of commercial support and make an educated assessment of the independence of the activity. The majority of small professional societies that serve narrowly defined subspecialties depend on commercial support to advance their mission; ASTS is no exception. We strongly support a robust policy that ensures proper separation between education and promotion. Instead of pursuing hollow changes that do not reflect a more effective separation between education and promotion, ASTS encourages the ACCME to focus on identifying providers that fail to enforce the current standards and helping those found non-compliant to develop corrective action plans. ASTS appreciates the opportunity to submit comments on this issue and would be pleased to assist in any efforts to refine the ACCME Standards for Commercial Support. If you have any questions, please contact Kimberly Gifford, ASTS Deputy Director, at 703-414-7870 or kim.gifford@asts.org. Sincerely, Mitchell L. Henry, MD ASTS President</p>	
60	<p>I am writing as President-elect of the National Association of Medical Education Companies (NAMEC). NAMEC thanks the ACCME for this call for comment on changing the ACCME policy regarding commercial support attribution. NAMEC believes that the current ACCME policy achieves its desired objectives and should not be changed. NAMEC puts forth that the current ACCME policy works because it is clear to providers what is allowed and what is not and charges providers with the definitive responsibility for establishing and enforcing their policy and procedures consistent with the ACCME's requirements. NAMEC feels that ACCME's requirement to providers that commercial support attribution be at the corporate level only, with prohibition of any use of or reference to product names, meets learners' and the public's expectations for provider transparency and disclosure as well as ensuring appropriate firewalls between education and promotion. NAMEC believes that with ACCME's support and continued guidance providers can work within the existing ACCME standards to ensure that the commercial support policy is adhered to and that firewalls are maintained and strengthened. Thank you.</p>	Other
61	<p>The Potomac Center for Continuing Medical Education (PCME) is dedicated to providing health care practitioners and professionals with the highest quality of continuing education (CE) and continuing medical education (CME) that is objective, scientific, and free from any form of bias or commercial influence. PCME is accredited by the Accreditation Council for Continuing Medical Education (ACCME). In response to the ACCME Call for Comment: Disclosure of Commercial Support, PCME submits the following comments. The current ACCME policy related to Standard 6 from 2004 states that providers must disclose to learners the sources of commercial support. Standard 6 presently allows providers to use corporate logos, slogans and business unit name in their communications regarding commercial support, as long as these do not promote specific products. Transparency in accredited CME programs is of paramount importance, and CME providers constantly strive to</p>	Accredited CME Provider

Call for Comment: Disclosure of Commercial Support

Ref. #	Feedback Received	Org. Type
	<p>follow the ACCME Standards for Commercial Support and other regulatory guidance's by adhering to rigorous scientific review and program management. Overwhelmingly, the audiences at accredited CME programs are well aware of the source of commercial funding, if any, associated with an activity they choose to voluntarily attend. To suggest—without objective evidence—that corporate logos or the business unit name at accredited CME programs weaken the firewall or create bias is problematic, and can create potential legal issues for freedom of commercial speech, something federal courts have already ruled on in favor of CME providers free speech rights. While we affirm ACCME's efforts to reinforce the firewall between accredited CME and industry, the present standards are more than adequate to achieve this end. Without evidence to the contrary, adopting more restrictive policies will have potentially negative consequences on CME stakeholders, including decreased funding, which can also have a negative impact on physician training and patient outcomes. For these reasons, PCME recommends that ACCME not adopt this change and instead, begin discussions with CME stakeholders about a more reasonable approach to disclosure.</p>	
62	<p>Thank you for the opportunity to provide comment. The Society of Nuclear Medicine is not supportive of revising the policy to exclude a commercial supporter's logo, mission statement, slogans in disclosures of commercial support. External support from commercial supporters, does not interfere with education.</p>	Accredited CME Provider
63	<p>The American College of Chest Physicians (ACCP) supports the updated ACCME policy related to Standard 6 of the Standards for Commercial Support. The use of corporate logos in the acknowledgment of commercial support of CME activities may be interpreted as promotional.</p>	Accredited CME Provider
64	<p>The Association of Clinical Research Professionals (ACRP) would like to comment on the possible upcoming policy that would allow for speakers to have a company's name to be presented in text only. ACRP's vision is to ensure that clinical research is performed responsibly, ethically, and professionally everywhere in the world. This vision is accomplished by training clinical researchers on ICH regulations and ethical treatment of patients. ACRP does not present on products or services of commercial interests. ACRP speakers are mostly volunteers and part of their participation is to get recognized and logos help to achieve this. ACRP believes the presence of logos does not affect the credibility of the content and CME activities will remain independent, free from commercial influence and still serve the public interest. Speakers will no longer be willing to speak for our organization if there are no logos to recognize them or their organization. We therefore advise against a policy to remove logos from disclosure statements.</p>	Accredited CME Provider