NON-CME INFORMATIONAL/EDUCATIONAL PROGRAM

Application Deadline: November 3, 2017

www.headandnecksymposium.org
Non-CME Informational/Educational Program

Overview
These guidelines, based on policies approved by ASTRO’s Board of Directors, are designed to assist you in preparing your application to present a Non-CME Informational/Educational Program in conjunction with the 2018 Multidisciplinary Head and Neck Cancers Symposium.

These rules and regulations are in addition to policies outlined in the exhibitor rules, regulations and policies regarding use of the ASTRO name and/or logo and mailing lists.

Important dates

Application Deadline*
November 3, 2017

Approval Notification Sent
Early December, 2017

Marketing Materials Due**
January 10, 2018

Program Fee Due
December 29, 2017

Pre-show List Request Due
January 10, 2018

Evaluation Summary Due
April 27, 2018

*Late applications and any other materials submitted past their stated deadlines will be delayed in processing and approval by ASTRO.
**ASTRO must approve your marketing materials before you print/distribute, so please keep this in mind when developing your own timeline.
Definition
Non-CME Informational/Educational Program ("Program") refers to any educational activity that is independently organized, held in conjunction with the 2018 Multidisciplinary Head and Neck Cancers Symposium, does not carry Continuing Medical Education (CME) credit and is not sponsored by the American Head and Neck Society (AHNS), American Society for Radiation Oncology (ASTRO) or the American Society of Clinical Oncology (ASCO).

Application Process
The organization interested in holding a Program shall submit a written application (Appendix A) and a completed Letter of Agreement (Appendix B) to ASTRO’s Education Department by November 3, 2017. Applications will be reviewed by the Symposium Steering Committee. Time and space constraints may limit the number of opportunities available.

Programs must be final upon submission. Incomplete applications will not be reviewed.

Please send your application to:
American Society for Radiation Oncology (ASTRO)
c/o Natalie Cain
251 18th St. South, 8th Floor
Arlington, VA 22202
Phone: 703-839-7390
Email: natalie.cain@astro.org

Eligibility Criteria
The organization must adhere to the following criteria:
• Fulfill any funding obligations (see Appendix D).
• Hold ASTRO harmless from any and all claims that may result from the program.

ASTRO reserves the right to:
• Reject any proposal that does not meet the criteria set forth in these guidelines.
• Reject any proposal for reasons solely determined by ASTRO, including a decision to limit the number of industry-organized activities at the 2018 Multidisciplinary Head and Neck Cancers Symposium.
• Consult with the organization to assure appropriateness of activity outcome.

Program Content
• Program content must be developed independently, free of bias and cannot overlap with content currently being presented at the 2018 Multidisciplinary Head and Neck Cancers Symposium.
• Program title must be indicative of the Program content.
• Objectives must clearly meet the educational needs of the target audience.
• Program must be presented in an objective, balanced and scientifically rigorous manner, cannot commercially promote a specific drug, product or service and must meet the policies and guidelines of the ACCME.
• Content and related materials must promote evidence-based learning for optimum patient outcomes and patient safety.
• Content cannot promote a specific proprietary business interest of a commercial entity.
• Presentation must be fair and balanced when discussing specific products. If trade names are included in your presentation, trade names for several companies must be used where available.
• The Program provider must provide ASTRO with an evaluation summary once the program is complete.
Audit
To ensure compliance, your program will be reviewed and may be audited by members of the Symposium Steering Committee.

Role of Faculty
• Participating faculty must disclose all relevant relationships/interests to the review committee and attendees to determine any conflicts of interest.
• Faculty must be independent subject matter experts, scientists and/or clinicians.
• Faculty must present an evidence-based, balanced presentation with a rigorous scientific review.
• Product-specific promotional material or advertisement of any type is prohibited during the presentation.

Leadership Participation
Elected officials and chairs of committees and subcommittees directly and currently involved in the 2018 Multidisciplinary Head and Neck Cancers Symposium CME program are prohibited from participation in Non-CME Informational/Educational Programs, except as attendees who receive no honoraria or reimbursement. See Appendix C for a complete listing. ASTRO reserves the right to reject any proposed faculty member or planner that it deems may have a conflict of interest with Symposium activities.

If you have questions on a speaker’s eligibility to participate, please contact Natalie Cain at natalie.cain@astro.org.

Scheduling
The following dates and times are available to hold a Non-CME Program (one per time slot):
- Wednesday, February 14, 2018, (Pre-show) Anytime
- Thursday, February 15, 2018, after 6:30 p.m.
- Friday, February 16, 2018, after 6:15 p.m.*
- Saturday, February 17, 2018, after 12:00 p.m.

*The faculty reception will occur on the evening of Friday, February 16. Please note that all faculty are invited (but are not required) to attend the reception at that time, in case you wish to avoid your event conflicting with the reception.

Promotion/Marketing
We encourage independent promotion of approved Programs. ASTRO must approve the content of all such material prior to printing, distribution or posting on the Internet. All marketing materials should be sent for review to Natalie Cain at natalie.cain@astro.org no later than January 10, 2018. Invitations and announcements addressed to meeting registrants should clearly indicate the name(s) of the organization(s) funding the program and possible non-CME provider and must adhere to the following logo use:
- ASTRO, the name American Society for Radiation Oncology and the ASTRO logo are registered trademarks of the American Society for Radiation Oncology.
- ASCO, the name American Society of Clinical Oncology and the ASCO logo are registered trademarks of the American Society of Clinical Oncology.
- AHNS, the name American Head and Neck Society and the AHNS logo are registered trademarks of the American Head and Neck Society.

It is understood that the above sponsoring organizations own all rights, title, and interest in and to their respective trademarks, patents, copyrights, marks, symbols, names, logos, registered words or depiction whether or not the same are covered by copyright, trademarks or patents. Except as explicitly indicated in these guidelines, use of the aforementioned in conjunction with advertisements, promotional materials, endorsements, statements, contests and/or awards of any kind is prohibited. Violators may be subject to such civil and criminal penalties as provided by federal and state laws. Further, names and acronyms may not be used in any website address promoting the Program.

Promotional, marketing and on-site materials for the Program must contain the following statement:

The 2018 Multidisciplinary Head and Neck Cancers Symposium Steering Committee has reviewed and approved this symposium as appropriate for presentation as a Non-CME Informational/Educational Program. The Non-CME Program constitutes the content and views of the sponsor and is not part of the official 2018 Multidisciplinary Head and Neck Cancers Symposium program.
If the Program is adhering to the deadlines and ASTRO is able to approve relevant materials on time, ASTRO will promote the program in the following methods:

- Listing on the meeting website (www.headandnecksymposium.org).
- Listing in the Pocket Program.

To assist with your marketing efforts, ASTRO will provide a complimentary 2018 Multidisciplinary Head and Neck Cancers Symposium pre-show attendee list at your request once marketing materials are approved by ASTRO:

*The list is for a one-time use only. Due to privacy reasons, we do not include email addresses or phone numbers in the list.*

The list request deadline is January 10, 2018. The list request deadline is January 10, 2018. Email your request to natalie.cain@astro.org and allow 10 business days for processing from the time of order placement.

*Note that ASTRO does not guarantee audience size and shall not be held responsible if attendee numbers are lower than original projections.*

The following requirements must be observed prior to, during and following the event:

- The Program will be an “invitation” event. Provider will have the option to welcome walk-ins.
- No commercial displays will be allowed in the meeting room at any time.
- No sales or product promotion to attendees is allowed before, during or after the Program as an adjunct to the meeting program.
- Satellite activities are not acceptable substitutes for activities that are designed to occur during the exhibit program.
- Two signs promoting the Program may be displayed on the day of the Program.
- Signage and distribution of Program flyers and invitations are permitted at the presenter’s booth in the Exhibit Hall.
- Signage set up and dismantling is the provider’s responsibility.

**Evaluation Summary**

All Program providers must send ASTRO a summary report of attendees’ evaluations of the program collected in conformance with ACCME requirements. Attendees must be asked to evaluate the program for objectivity and the presence of commercial bias.

Evaluation results are to be included in a summary report that must be provided to Natalie Cain at natalie.cain@astro.org by April 27, 2018.
Appendix A

Application to Hold a Non-CME Informational/Educational Program

DEADLINE FOR SUBMISSION: NOVEMBER 3, 2017

In addition to this form, applicants must include the following information:

• Copy of program in electronic format (Microsoft Word is preferred) containing title of program, title of presentations and confirmed speaker names.
• Program learning objectives.
• $1,000 nonrefundable application fee.

NAME OF NON-CME INFORMATIONAL/EDUCATIONAL PROGRAM: ____________________________________________

Please indicate when you propose to hold your event. Time and space may limit the availability of symposia scheduled.

DATE: ___________________________ START TIME: ___________________________ END TIME: ___________________________

MEETING/EVENT SPECIFICATIONS
☐ Breakfast  ☐ Luncheon  ☐ Dinner  ☐ Reception
☐ Meeting  ☐ Workshop/Seminar  ☐ Office  ☐ Other

MEETING/EVENT SET-UP
☐ Conference  ☐ U-shape  ☐ Classroom  ☐ Cocktail tables (reception)
☐ Hollow square  ☐ Theatre  ☐ Round tables  ☐ Other_________________

ANTICIPATED ATTENDANCE: ____________________________

SUPPORTING COMPANY/CORPORATE MEMBER: ____________________________

MAILING ADDRESS: ______________________________________________________

CITY/STATE/ZIP: _________________________________________________________

CONTACT PERSON: ______________________________________________________

EMAIL: ___________________________ PHONE: ___________________________ FAX: ___________________________ CORPORATE WEBSITE: ___________________________

THIRD PARTY COMPANY (if applicable): ____________________________

(Under contract to supporting company)

This application must be received by ASTRO no later than 5:00 p.m. Eastern Time on November 3, 2017. Send your completed application to:
ASTRO Education Department, 251 18th Street South, 8th Floor, Arlington, VA 22202.
Email: natalie.cain@astro.org

Preliminary approval of this application authorizes the applicant to proceed with making arrangements for the proposed activity. Hotels will not assign space for the Program until this application has received approval.
Appendix A (continued)

PLEASE COMPLETE THE FOLLOWING:

Offer a statement of educational need that will be met by the session with backup documentation of the determination of that need. Please include a program agenda with your application. A tentative list of faculty is appreciated at this time.

________________________________________________________________________________________________________________________________________________________________________________________________________________________________________

List the learning objectives of the Program. __________________________________________________________________________________________________________________________________________________________________________________________________________

________________________________________________________________________________________________________________________________________________________________________________________________________________________________________________________________________

List titles of all topics and topic descriptions. __________________________________________________________________________________________________________________________________________________________________________________________________________________________________________________________________________

____________________________________________________________________________________________________________________________________________________________________________________________________________________________________________________________________________________________________________________________________________

Please provide a description of the evaluation process (with sample evaluation forms and how results will be reported in a summary report to ASTRO).

________________________________________________________________________________________________________________________________________________________________________________________________________________________________________________________________________________________________________________________________________

Provide a description of the Program’s target audience, invitation process and verification plan for attendance.

________________________________________________________________________________________________________________________________________________________________________________________________________________________________________________________________________________________________________________________________________________________

Summarize how faculty and planning committee disclosure information will be communicated to attendees.

________________________________________________________________________________________________________________________________________________________________________________________________________________________________________________________________________________________________________________________________________________________

Summarize how conflicts of interest are to be managed among Program planning committee members and presentation faculty.

________________________________________________________________________________________________________________________________________________________________________________________________________________________________________________________________________________________________________________________________________________________

☐ Check here if you plan to repurpose the content into an enduring material.

NOTE: Once the Program is approved by ASTRO, please expect to forward us any materials to be used by presenters as well as a confirmed faculty listing, curriculum vitae and conflict of interest disclosures. If that information is available now, please include it with your application. Once the Program is completed, please forward a copy of your final evaluation summary report to ASTRO by April 27, 2018.
Appendix B

Letter of Agreement

Between ________________________________ (Third Party Company) and the ________________________________ (Commercial Supporter).

Commercial Supporter (company name) ________________________________

Address ________________________________

City, State, Zip ________________________________ Telephone ________________________________

Fax ________________________________

Contact Person ________________________________

Title of non-CME Activity ________________________________ Location ________________________________ Date(s) ________________________________

The above commercial supporter wishes to provide support for the named continuing medical education activity by means of an educational grant for support of the non-CME activity in the amount of $ ____________

CONDITIONS

1. STATEMENT OF PURPOSE: Program is for scientific and educational purposes only and will not promote the company’s products, directly or indirectly.

2. CONTROL OF CONTENT AND SELECTION OF PRESENTERS AND MODERATORS: Provider is responsible for control of content and selection of presenters and moderators. The company agrees not to direct the content of the program. The company, or its agents, will respond only to provider-initiated requests for suggestions of presenters or sources of possible presenters. The company will suggest more than one name (if possible); will provide speaker qualifications; will disclose financial or other relationships between company and speaker; and will provide this information in writing. Provider will record role of company, or its agents, in suggesting presenter(s); will seek suggestions from other sources; and will make selection of presenter(s) based on balance and independence.

3. DISCLOSURE OF FINANCIAL RELATIONSHIPS: Provider will ensure meaningful disclosure to the audience, at the time of the program, of (a) company funding and (b) any significant relationship between the provider and the company (e.g., grant recipient) or between individual speakers or moderators and the company.

4. INVOLVEMENT IN CONTENT: There will be no “scripting” emphasis or direction of content by the company or its agents.

5. ANCILLARY PROMOTIONAL ACTIVITIES: No promotional activities will be permitted in the same room or obligate paths as the educational activity. No product advertisements will be permitted in the program room.

6. OBJECTIVITY AND BALANCE: Provider will make every effort to ensure that data regarding the company’s products (or competing products) are objectively selected and presented, with favorable and unfavorable information and balanced discussion of prevailing information on the product(s) and/or alternative treatments.

7. LIMITATIONS OF DATA: Provider will ensure, to the extent possible, meaningful disclosure of limitations on data (e.g., ongoing research, interim analyses, preliminary data or unsupported opinion).

8. DISCUSSION OF UNAPPROVED USES: Provider will require that presenters disclose when a product is not approved in the United States for the use under discussion.

9. OPPORTUNITIES FOR DEBATE: Provider will ensure meaningful opportunities for questioning or scientific debate.

10. INDEPENDENCE OF PROVIDER IN THE USE OF CONTRIBUTED FUNDS:
   a. Funds should be in the form of an educational grant made payable to the ________________________________ (Third Party Company).
   b. No other funds from the commercial company will be paid to the program director, faculty or others involved with the activity (additional honoraria, extra social events, etc.).

11. Hold ASTRO harmless from any and all claims that may result from the program.

AGREED

Commercial Company Representative (name) ________________________________

Signature ________________________________ Date ________________________________

Third Party Company ________________________________

Signature ________________________________ Date ________________________________

NOTE: Applicants must provide to ASTRO a Letter of Agreement between the Commercial Supporter and Third Party Company, if applicable. The example provided here in Appendix B may be used, or the applicant may submit a Letter of Agreement that is in a different format.
Appendix C: Regulations Regarding Leadership Participation

Elected officials and chairs of committees and subcommittees directly and currently involved in the 2018 Multidisciplinary Head and Neck Cancers Symposium CME program are prohibited from participation in Non-CME Informational/Educational Programs, except as attendees who receive no honoraria or reimbursement. These include the following:

- ASTRO Board of Directors.
- ASTRO Education Committee Chair and Vice-chair.
- ASTRO CME/MOC Committee Co-chairs.
- 2018 Multidisciplinary Head and Neck Cancers Symposium Steering Committee.
- 2018 Multidisciplinary Head and Neck Cancers Symposium Program Committee.

ASTRO reserves the right to reject any proposal that it deems necessary based on conflict of interest. If you have questions regarding a speaker’s eligibility to participate, please contact Natalie Cain at natalie.cain@astro.org.

Appendix D: Financial Considerations

APPLICATION FEE
A $1,000 nonrefundable application fee must accompany your application. This fee covers ASTRO administrative costs associated with processing the application.

DIRECT COSTS
The Program provider will be responsible for the management of their event’s logistics and for payment of direct costs associated with event promotion, presenters and catering.

INCLUDED AUDIO VISUAL
Included in the program fee is the following audio visual equipment:
- One LCD projector.
- One screen.
- One podium microphone.
- One aisle microphone.
- Sound amplification and mixer system.
- VGA switcher.
- One on-site technician.

Expenses for additional services incurred beyond what is provided may be acquired through the audio visual company at the expense of the provider.

PROGRAM FEE
Upon ASTRO approval of the symposium, the Program provider will be invoiced for $25,000 for the program fee.

Payment must be received by December 29, 2017.

CANCELLATION
The cancellation policy is as follows:

<table>
<thead>
<tr>
<th>Date</th>
<th>Refund</th>
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<tbody>
<tr>
<td>Prior to December 29, 2017</td>
<td>Full refund</td>
</tr>
<tr>
<td>Prior to February 1, 2018</td>
<td>50 percent refund</td>
</tr>
<tr>
<td>After February 1, 2018</td>
<td>No refund</td>
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