

# ASCO Form for Disclosure of Relationships with Companies

This disclosure is used across ASCO activities so that you will not have to complete a separate form for each activity.

1. Review **13** disclosure relationships
2. Update when there is new information
3. Click "Confirm" at the bottom of this page to finalize and ensure disclosure is up-to-date

**Disclosure last updated: April 14, 2021**

## \* 1. Employment

Have you or an immediate family member been employed by any for-profit health care company currently or during the past 2 years?

COMPANY	RECIPIENT	AMOUNT	START DATE	END DATE	CO
No Relationships to Disclose					

## \* 2. Leadership

Have you or an immediate family member been compensated for a leadership role (such as officer or member of board) in any for-profit health care company, currently or during the past 2 years?

COMPANY	RECIPIENT	AMOUNT	START DATE	END DATE	CO
No Relationships to Disclose					

## \* 3. Stock and Other Ownership Interests

Have you or an immediate family member owned stock or held an ownership interest in any for-profit health care company (publicly traded or privately held), currently or during the past 2 years?

COMPANY	RECIPIENT	AMOUNT	START DATE	END DATE	CO
No Relationships to Disclose					

**\* 4. Honoraria** ⓘ

Have you or an immediate family member been paid honoraria directly by any for-profit health care company, currently or during the past 2 years?

COMPANY	RECIPIENT	AMOUNT	START DATE	END DATE	CO
No Relationships to Disclose					

**\* 5. Consulting or Advisory Role** ⓘ

Have you or an immediate family member been paid for any consulting or advisory role by any for-profit health care company, currently or during the past 2 years?

COMPANY	RECIPIENT	AMOUNT	START DATE	END DATE
Pfizer Inc.	You	Less than \$5,000 USD in a single calendar year	06/2020	07/2021
Pfizer Inc.	You	Less than \$5,000 USD in a single calendar year	11/2019	11/2020

**\* 6. Speakers' Bureau** 

Have you or an immediate family member been paid to participate in a speakers' bureau for any for-profit health company currently or during the past 2 years?

COMPANY	RECIPIENT	AMOUNT	START DATE	END DATE	CO
No Relationships to Disclose					

**\* 7. Research Funding** 

Have you or an immediate family member conducted any research project funded, in whole or in part, by any for-profit health company, currently or during the past 2 years?

COMPANY	RECIPIENT	AMOUNT	START DATE	END DATE	CO
No Relationships to Disclose					

**\* 8. Patents, Royalties, Other Intellectual Property**

Do you or an immediate family member hold patents, have patents pending, receive royalties, participate in royalty agreements, or have other intellectual property interests from a discovery or technology relating to health or medicine during the past 2 years?

PLEASE DESCRIBE	RECIPIENT	AMOUNT	START DATE	END DATE	CO
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No Relationships to Disclose

**\* 9. Expert Testimony**

Have you or an immediate family member been paid to provide expert testimony on behalf of any for-profit health care company, currently or during the past 2 years?

COMPANY	RECIPIENT	AMOUNT	START DATE	END DATE	COMPANY
No Relationships to Disclose					

**\* 10. Travel, Accommodations, Expenses**

Have you or an immediate family member had travel, accommodations, or other expenses paid or reimbursed by any health care company, currently or during the past 2 years?

COMPANY	RECIPIENT	AMOUNT	START DATE	END DATE	COMPANY
No Relationships to Disclose					

**\* 11. Other Relationship**

Have you or an immediate family member had another relationship, role, activity, or interest, currently or during the past 2 years, that could be perceived to influence your work or your professional activities?

COMPANY	RECIPIENT	AMOUNT	START DATE	END DATE	COMPANY
No Relationships to Disclose					

## 12. (OPTIONAL) Uncompensated Relationships

Have you had any unpaid relationship, role or activity with any for-profit health care company or organization, or any other individual, in the past 2 years, that could be perceived to influence your work or professional activities?

COMPANY	RECIPIENT	AMOUNT	START DATE	END DATE	CO
No Relationships to Disclose					

## 13. (OPTIONAL) Open Payments Link

Open Payments is a US government database of information reported by pharmaceutical companies about payments and other transfers of value made to US-licensed physicians. ASCO will publish your Open Payments link beneath your disclosure. You may choose to provide your link.

Sample: <https://openpaymentsdata.cms.gov/physician/xxxxxxx/summary>

OPEN PAYMENTS URL	COMMENTS
No Relationships to Disclose	