

Mitigation Attestation Form for Speakers Without Slides

Activity Title:		CID No.:	Activity Date:
Name:			
Check all that Apply:	Moderator	Speaker	Panelist
Topic:			

You have been selected as a moderator, speaker, panelist or facilitator. Please attest to the following:

I am aware of and will adhere to the ACCME rules regarding Content Validity ([Standard 1](#)) - Accredited providers are responsible for ensuring that their education is fair and balanced and that any clinical content presented supports safe, effective patient care.

I am aware of and will adhere to the ACCME rules regarding Prevent Commercial Bias and Marketing in Accredited Continuing Education ([Standard 2](#)) - Accredited continuing education must protect learners from commercial bias and marketing.

Signature

Date