# POLICY MANUAL

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All policies are also included in the AOCD Administrative Manual.
The objectives of AOCD are:

1. To maintain the highest possible standards in the practice of dermatology
2. To stimulate study and to extend knowledge in the field of dermatology
3. To promote a more general understanding of the nature and scope of the services rendered by osteopathic dermatologists to the other divisions of medical practice, hospitals, clinics, and the public
4. To contribute to the best interests of the osteopathic profession by functioning as an affiliated organization of the American Osteopathic Association

**Vision**
The vision of the American Osteopathic College of Dermatology is to advocate for our members and patients.

**Mission**
The mission of the American Osteopathic College of Dermatology is to create innovative education, support, and opportunities in Dermatology that promote excellence in patient care and community health through advocacy, consciousness, inclusivity, and osteopathy.

**Values**
The American Osteopathic College of Dermatology will instill the following values in all of our activities:

1. Inclusivity for all members
2. Consciousness of dermatologic issues
3. Excellent Patient Outcomes
4. Promotion of life-long learning

**SPOKESPERSON POLICY**
The AOCD has designated the current President to be the official spokesperson for the organization.

**AOCD PRIVACY POLICY**
The American Osteopathic College of Dermatology (AOCD) is committed to maintaining the privacy of the personal information of visitors to its site, including AOCD members. We will never sell members' personal information, including addresses, telephone numbers, and email addresses. Our policies are designed to disclose the information collected and how it will be used. The terms of the privacy policy do not govern personal information furnished through any means other than this website (such as by telephone or mail). We will make every attempt to only provide professional office addresses of our members, since these can be obtained through internet searches.

**Email Address and Other Personal Information**
Personal information such as postal and email addresses that you provide to the AOCD through our website may be used internally for maintaining member records, marketing purposes and alerting customers or members of additional services available. Such information may also be provided to selected vendors that AOCD believes may have products or services of interest to our members. Phone numbers that you provide may also be used by the AOCD when questions about products or services arise. Registered site members have the ability to conduct a “Member Search” to obtain contact
information of fellow members. Members may adjust settings in the “Edit Bio” area of the website to dictate which portions of their contact information should be available in the “Member Search” area.

**Credit Card Information**

All credit card transactions are conducted over a secure connection. Credit card information is not stored.

**CME Activity Information**

As part of our CME Program, we collect information to maintain a record of participation. We collect personal information, including your name, phone number and email address. We also collect responses to quizzes and tests to assess your understanding and performance. We may also collect information to assess the effectiveness of our programs, such as your achievement of the learning objectives, changes you plan to implement in your practice and your feedback on the course content and speakers.

**Information Shared with Third Parties**

We may share some of your identifiable CME data with AOCD-approved Third Parties of the CME Program. If you register for programs and request credit, we share your CME data with the Third Parties responsible for administering those activities. Your information may be shared with:

- Accreditors external from the AOCD for which you seek credit.
- Credit card processing Third Party vendors for payment of registration fees.
- Any Maintenance of Certification program for which you register.
- Other service providers, if you wish to receive credit, with your permission.

**Links**

This site may contain links to other sites. The AOCD is not responsible for the privacy practices or content of such websites. Should you follow a link to another site, you are encouraged to review the privacy policy applicable to that website.

**Antitrust Compliance Policy**

The antitrust laws of the United States and the various states prohibit agreements, combinations and conspiracies in restraint of trade. Because the American Osteopathic College of Dermatology (AOCD) and other trade and professional associations are, by definition, combinations of competitors, one element of a possible antitrust violation is generally present, and only some action by the association that unreasonably restrains trade generally needs to occur for there to be an antitrust violation. Consequently, associations are common targets of antitrust plaintiffs and prosecutors.

The consequences for violating the antitrust laws can be severe. A conviction can carry stiff fines for the association and its offending leaders, jail sentences for individuals who participated in the violation, and a court order dissolving the association or seriously curtailing its activities. The antitrust laws can be enforced against associations, association members, and the association's employees by both government agencies and private parties (such as competitors and consumers) through treble (triple) damage actions. As the principal federal antitrust law is a criminal conspiracy statute, an executive who attends a meeting at which competitors engage in illegal discussions may be held criminally responsible, even if he or she says nothing at the meeting. The executive's attendance at the meeting may be sufficient to imply acquiescence in the discussion, making him or her liable to as great a penalty as those who actively participated in the illegal agreement.
The antitrust laws prohibit competitors from engaging in actions that could result in an unreasonable restraint of trade. Above all else, association members should be free to make business decisions based on the dictates of the market – not the dictates of the association.

Some activities by competitors are deemed so pernicious and harmful that they are considered per se violations – it does not matter whether or not the activities actually have a harmful effect on competition; the effect is presumed. These generally include price fixing, allocation of customers, markets or territories, bid-rigging, and some forms of boycotts. In addition, there are many features that factor into price; agreements as to warranty duration, freight terms, or other factors that can directly impact price also are proscribed.

Other actions such as standards development, certification programs, and relationships between distributors and suppliers generally are evaluated under a rule of reason – there is a balancing between the pro-competitive and anti-competitive aspects of the activities; the pro-competitive effects must outweigh the anti-competitive ones. These areas also should be approached with caution and legal guidance.

AOCD has a policy of strict compliance with federal and state antitrust laws. AOCD members should avoid discussing certain subjects when they are together – both at formal AOCD membership, Board of Trustees, committee, and other meetings and in informal contacts with other industry members – and should otherwise adhere strictly to the following guidelines:

- **DO NOT** discuss prices, fees or rates, or features that can impact (raise, lower, or stabilize) prices such as discounts, costs, salaries, terms and conditions of sale, warranties, or profit margins. Note that a price-fixing violation may be inferred from price-related discussions followed by parallel decisions on pricing by association members — even in the absence of an oral or written agreement.

- **DO NOT** agree with competitors as to uniform terms of sale, warranties or contract provisions.

- **DO NOT** exchange data concerning fees, prices, production, sales, bids, costs, salaries, customer credit, or other business practices unless the exchange is made pursuant to a well considered plan that has been approved by AOCD’s legal counsel.

- **DO NOT** agree with competitors to divide up customers, markets or territories.

- **DO NOT** agree with competitors not to deal with certain suppliers or others.

- **DO NOT** try to prevent a supplier from selling to your competitors.

- **DO NOT** discuss your customers with your competitors.

- **DO NOT** agree to any association membership restrictions, standard-setting, certification, accreditation, or self-regulation programs without the restrictions or programs having been approved by AOCD’s legal counsel.

- **DO insist** that AOCD meetings that have agendas are circulated in advance and that minutes of all meetings properly reflect the actions taken at the meeting. All AOCD meetings generally should have written agendas prepared and circulated in advance.
• DO leave any meeting (formal or informal) where improper subjects are being discussed. Tell everyone why you are leaving.

• DO ensure that only AOCD staff sends out all written and electronic correspondence on behalf of AOCD and that AOCD officers, directors, committee members, or other members do not hold themselves out as speaking or acting with the authority of AOCD when they do not, in fact, have such authority.

• DO ensure that if questions arise about the legal aspects of AOCD’s activities or your individual responsibilities under the antitrust laws, you seek advice and counsel from your own counsel or from the staff and counsel of AOCD.

• Any questions about AOCD’s antitrust policy should be directed to AOCD’s Executive Director or legal counsel.
Board Member Policy

Board Member

The job of the individual board member is to generally participate as part of the board team to accomplish the mission of the organization. The board member represents a particular community perspective to the organization and is expected to represent the organization in the community, communicating organizational goals and success.

Authority
Individual board members have no power except that granted by the full board through the bylaws, board policy or by resolution of the full board. All power of the board is a joint and collective power, which exists only when the board is acting together as one body.

Responsibilities
While participating as part of the board team, board members must:

1. believe in and actively support the mission of the organization.
2. participate in new board member orientation.
3. attend board meetings, planning meetings and assigned committee meetings.
4. comply with applicable laws, regulations, bylaws, policies and the code of ethics.
5. accept the legal duties of loyalty and care while serving as a board member.
6. understand that all power rests with the full board, not individual board members.
7. share wisdom and insights to help the board make appropriate decisions and policy.
8. prepare well for all meetings.
9. bring knowledge of the community and constituents to the board’s deliberations.
10. be an advocate to the community and constituents for programs and board decisions.
11. play a consultative role by sharing expertise with management when requested.
12. seek opportunities to expand knowledge about the organization.
13. regularly self-evaluate personal performance on the board and determine needs for improvement.
14. resign from the board when no longer able to support the mission or devote the necessary time to be a good board member.

All officer positions require a commitment of extra time and responsibility. Board members who cannot make this extra commitment should not seek or accept this office.
COMPENSATION POLICY
Members of the AOCD Board of Trustees understand their service is voluntary to the AOCD and they are not compensated for time. BOT members are granted gratis registration to the Annual (Spring) Meeting of the AOCD.

The President of the AOCD is reimbursed travel and lodging for the Fall and Annual meetings of the AOCD.

The Activity Moderator of the Fall meeting and the Activity Moderator for the Annual meeting are reimbursed travel and lodging to their respective meetings. AOCD officers will receive complimentary registration for the Annual meeting. They must register for the meeting, however, in order to meet AOA CME requirements.

AOA REPRESENTATIVE
The AOCD representatives sent as delegates to any AOA meeting will be reimbursed coach airfare, transfers, motel and meals for all meetings. Reimbursement will be made upon submission of an expense report and original receipts to the Executive Director. The AOA delegate and alternate who attend the House of Delegates and/or Board of Trustees will be reimbursed coach airfare, meals, hotel, and transfers upon submission of an expense report and original receipts to the Executive Director.

MISCELLANEOUS
AOCD will pay expenses of ancillary staff for fall and annual meeting and any other meetings as directed by the secretary-treasurer and/or current president. These will include coach airfare, transfers, hotel and meals and will be paid upon submission of completed expense report and original receipts to the Executive Director.

AOCD members speaking at the Annual meeting will receive complimentary registration for that meeting as well as a $1,000 honorarium. AOCD members speaking at the Fall meeting will receive a $1,000 honorarium and complimentary registration for the next Annual meeting. These members must register for the meeting in order to meet AOA CME requirements.

The Executive Director is a contracted employee of the AOCD with a 60 day termination clause and has appropriate withholdings deducted from each pay period.

The Digital Media Coordinator/Member Services is an hourly employee of the AOCD and has appropriate withholdings deducted from each pay period. Hourly employees in the State of Missouri are considered “At Will Employees” and may be terminated at any time.

The Education Coordinator is an hourly employee of the AOCD and has appropriate withholdings deducted from each pay period. Hourly employees in the State of Missouri are considered “At Will Employees” and may be terminated at any time.

The Director of Events & Information Technology is an hourly employee of the AOCD and has appropriate withholdings deducted from each pay period. Hourly employees in the State of Missouri are considered “At Will Employees” and may be terminated at any time.

Mileage reimbursement will be at the (IRS Standard Mileage Rate)
The AOCD will provide the following to faculty presenting at live, in-person meetings of the AOCD.

<table>
<thead>
<tr>
<th>For Guest Faculty</th>
<th>For AOCDD Member Faculty</th>
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<tbody>
<tr>
<td>Honoraria of $1000.00 as published in the AOCD Administrative Policy Handbook.</td>
<td>Honoraria of $1000.00 as published in the AOCD Administrative Policy Handbook.</td>
</tr>
<tr>
<td>Complimentary registration to a webinar of their choice.</td>
<td>Complimentary registration to a webinar of their choice.</td>
</tr>
<tr>
<td>An additional 1 CME hour for Speaker preparation.</td>
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</tr>
<tr>
<td>Round trip COACH airfare/train with a maximum of $500.00 per ticket. If driving, mileage at the standard IRS guidelines in place at the time of the event. Taxi to and from airport</td>
<td></td>
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<tr>
<td>One night hotel at AOCD conference rate</td>
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The AOCD will provide the following to faculty presenting in AOCD Sponsored webinars.

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<tr>
<th>For Guest Faculty</th>
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</thead>
<tbody>
<tr>
<td>Honoraria of $250.00 as published in the AOCD Administrative Policy Handbook.</td>
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</tr>
<tr>
<td>Complimentary registration to a webinar of their choice.</td>
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</tr>
<tr>
<td>An additional 1 CME hour for Speaker preparation.</td>
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All faculty presenting understand they will receive a 1099 form at the end of the current tax year for amounts paid over $600.00.

Justification for Proposed Honoraria (e.g., scope of responsibility, hours involved, etc.)
- Timely research of material presented to meet Needs Assessments of the college.
- Preparation of handouts and/or power point presentation.
- Preparation of Learning Objectives requested by the AOCD.
- Preparation of information needed to assist the AOCD in conducting outcome evaluations.
- Compensation for speaker's absence from practice and clinical responsibilities.

Speaker must supply the following documentation to the AOCD office prior to the beginning of the meeting.
- CV
- Lecture material for program syllabus
- Learning Objectives Form
- Speaker information and consent
- Signed Financial disclosure statement,
- Disclosure slide MUST be included on the 2nd slide,**
- W-9

** An ineligible company are those companies whose primary business is producing, marketing, selling, re-selling, or distributing healthcare products used by or on patients.

The ACCME does not consider providers of clinical service directly to patients to be commercial interests – unless the provider of clinical service is owned, or controlled by, and ACCME-defined commercial interest. If a speaker has indicated a financial relationship or interest, the speaker understands that this information will be reviewed to determine whether a conflict of interest may exist, and the speaker may be asked to provide additional information.

The owners and employees of ineligible companies are considered to have unresolvable financial relationships and must be excluded from participating as planners or faculty, and must not be allowed to influence or control any aspect of the planning, delivery, or evaluation of accredited continuing education, except in the limited circumstances outlined in Standard 3.2. Owners and employees are individuals who have a legal duty to act in the company's best interests. Owners are defined as individuals who have an ownership interest in a company, except for stockholders of publicly traded companies, or holders of shares through a pension or mutual fund. Employees are defined as individuals hired to work for another person or business (the employer) for compensation and who are subject to the employer's direction as to the details of how to perform the job.

Any individual refusing to comply with this policy and/or not disclosing relevant financial relationships on a timely basis (DEFINED AS THE INITIAL INVITATION AND TWO REMINDERS) will not participate in, have control of, or responsibility for, the development, management, presentation, or evaluation of AOCD CME activities.

The American Osteopathic College of Dermatology (AOCD) follows the ACCME Standards for Commercial Support. Invited speakers have an important role in maintaining these standards. The AOCD requires speakers to base their presentation and recommendations on the "best available evidence." The AOCD planning committee monitors the presentations, and attendees judge if commercial bias is present. Presenters will be asked to submit their presentations for peer-review. In this way the AOCD planning committee identifies bias before publication on our website.
CONSENT AGENDA POLICY

I. Recognizing that certain routine issues require Board approval without necessarily requiring Board discussion, a Common Consent Agenda may be placed on the Board agenda at the President’s discretion.

A. The Common Consent Agenda will require a single vote for passage; the individual items will not be voted on separately.

B. There will be no discussion of items on the Common Consent Agenda.

II. All items proposed for the Common Consent Agenda must be made known to Board members at least 5 days in advance.

A. The proposed items must be in writing.

B. The proposed items must be mailed or e-mailed to the Board members’ homes, or if preferred, to their places of business.

C. Any Board member may delete an item from inclusion on the Common Consent Agenda.
   1. Ordinarily, this would be done if the Board member believes that the item requires discussion before a vote is taken.

   2. If an item is deleted from the Common Consent Agenda, the President may still include it as a regular item on the Board agenda.

At every board meeting, at least a few items come to the agenda that do not need any discussion or debate either because they are routine procedures or are already unanimous consent. A consent agenda (Roberts Rules of Order calls it a consent calendar) allows the board to approve all these items together without discussion or individual motions. Depending upon the organization, this can free up anywhere from a few minutes to a half hour for more substantial discussion.
DISASTER GUIDELINE
Disasters are either natural or manmade. Natural disasters for this area include tornadoes, floods, thunderstorms, snowstorms, and ice storms. There is also some consideration of earthquake, due to the New Madrid fault. Manmade disasters for this area includes fires, haz-mat incidents, train, plane or bus accidents, bombings or other terrorist actions. As of 2020 we have added pandemic and other health concerns. It is important to note that this is a guideline and will need to be adapted as the incident progresses.

Natural disasters pose the biggest impact to us in delivering our services. Depending upon the disaster, our regular actions may be altered greatly. Our ability to communicate with each other, our ability to get people to work may be hampered greatly.

In a major disaster, communications will be disrupted. Employees will no doubt be aware of the disaster and be taking care of their needs first and the job will come secondary. All employees, and board members must know their responsibilities to their job and the organization. Everyone involved will be making every effort to fulfill those duties. Re-establishing communications is a major priority, and each employee must be ready to do their part. Transportation could be a problem. Secondary routes to the office will have to be known by employees. With disruption of telephone and cell phone, alternate communications plans will have to be put in place. Shelter in place may be the main option until the area is deemed secure.

Manmade disasters are generally site specific. However they range from affecting a few to an entire city or region. Manmade disasters as a rule do not disrupt communications, but could. We have back up communications that we can use. This type of disaster could affect employees, and members so be prepared to deal with and make decisions without total approval of our board.

Every effort will be made to contact the Board of Trustees of a disaster affecting the operations of the National Office. Each Employee will carry a listing of telephone, both office and cellular, as well as fax numbers in order to contact Board Members. In the event an employee is unable to arrive at work, they should contact the Executive Director. If communication systems are in failure continue attempting contact with other local staff using any means safe.

Our biggest loss can come from the large amount of paper documents kept on premises. As time allows these files will be scanned and become part of our system and regular backup.

In the event of damage to the National Office the Executive Director will have the authority to make whatever arrangements to bring the office back online. During the interim much of the work can be done from employee’s homes providing they have access to computers and the internet. Laptop computers and internet Hot Spots are provided to staff.

The lines of authority would be the following:
1. Authority to hire resources to secure AOCD equipment and files and mitigate any further damage.
2. Authority to secure temporary storage or office facilities.
3. Authority to hire resources to bring the office back on line.

Procedures:
1. Each computer in the AOCD office is on our domain, connected to the main server.
2. Nightly backups are done on and off site.
3. All laptop computers are set to VPN if the network is operational.
4. All laptop computers will sync once the network is available.
AOCD Office Guidelines for Coronavirus Disease 2019 (COVID-19)

The following interim guidance may help prevent workplace exposures to COVID-19, in non-healthcare settings. This guidance also provides planning considerations for community spread of COVID-19.

To prevent stigma and discrimination in the workplace, use only the guidance described below to determine risk of COVID-19 infection. Do not make determinations of risk based on race or country of origin and be sure to maintain confidentiality of people with confirmed coronavirus infection. There is much more to learn about the transmissibility, severity, and other features of COVID-19 and investigations are ongoing.

We need to consider how best to decrease the spread of COVID-19 and lower the impact in their workplace. This may include activities in one or more of the following areas:

- reduce transmission among employees,
- maintain healthy business operations,
- maintain a healthy work environment.

**Actively encourage sick employees to stay home:**

- Employees who have symptoms (i.e., fever, cough, or shortness of breath) should notify their supervisor and stay home.
- Sick employees should follow CDC-recommended steps. Employees should not return to work until the criteria to discontinue home isolation are met, in consultation with healthcare providers and state and local health departments.
- Employees who are well but who have a sick family member at home with COVID-19 should notify their supervisor and follow CDC recommended precautions.

**Dailey Procedures before reporting to work:**

- Observe daily hygiene procedures (shower, wash hair)
- Wear fresh clean clothes
- Monitor other household members
- Take temperature (97.7-99.5) if above 99.5 contact doctor and supervisor

**Establishing policies and practices for social distancing.**

Social distancing should be implemented if recommended by state and local health authorities. Social distancing means avoiding large gatherings and maintaining distance (approximately 6 feet or 2 meters) from others when possible (e.g., breakrooms and cafeterias). Strategies that business could use include:

- Implementing flexible worksites (e.g., telework)
- Increasing physical space between employees at the worksite
- Increasing physical space between employees and visitors
- Implementing flexible meeting and travel options (e.g., postpone non-essential meetings or events)
- Delivering services remotely (e.g. phone, video, or web)

**Support of respiratory etiquette and hand hygiene for employees, customers, and worksite visitors:**

- Provide tissues and no-touch disposal receptacles.
- Provide soap and water in the workplace. If soap and water are not readily available, use alcohol-based hand sanitizer that is at least 60% alcohol. If hands are visibly dirty, soap and water should be chosen over hand sanitizer. Ensure that adequate supplies are maintained.
- Place hand sanitizers in multiple locations to encourage hand hygiene.
- Place posters that encourage hand hygiene to help stop the spread at the entrance to your workplace and in other workplace areas where they are likely to be seen.
- Discourage handshaking — encourage the use of other noncontact methods of greeting.

**Perform routine environmental cleaning and disinfection:**
- Routinely clean and disinfect all frequently touched surfaces in the workplace, such as workstations, keyboards, telephones, handrails, and doorknobs.
- If surfaces are dirty, they should be cleaned using a detergent or soap and water prior to disinfection.
- For disinfection, most common EPA-registered household disinfectants should be effective.
- Discourage workers from using other workers’ phones, desks, offices, or other work tools and equipment, when possible. If necessary, clean and disinfect them before and after use.
- Provide disposable wipes so that commonly used surfaces (for example, doorknobs, keyboards, remote controls, desks, other work tools and equipment) can be wiped down by employees before each use.

**Advise employees before traveling to take additional preparations:**
- Check the CDC’s Traveler’s Health Notices for the latest guidance and recommendations for each country to which you will travel. Specific travel information for travelers going to and returning from countries with travel advisories, and information for aircrew, can be found on the CDC website.
- Advise employees to check themselves for symptoms of COVID-19 (i.e., fever, cough, or shortness of breath) before starting travel and notify their supervisor and stay home if they are sick.
- Ensure employees who become sick while traveling or on temporary assignment understand that they should notify their supervisor and promptly call a healthcare provider for advice if needed.

**Take care when attending meetings and gatherings:**
- Carefully consider whether travel is necessary.
- Consider using videoconferencing or teleconferencing when possible for work-related meetings and gatherings.
- Consider canceling, adjusting, or postponing large work-related meetings or gatherings that can only occur in-person.

When videoconferencing or teleconferencing is not possible, hold meetings in open, well-ventilated space.

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**American Osteopathic College Disclosure to Learners**
**For Continuing Medical Education Activities**

The Continuing Medical Education Program of the American Osteopathic College of Dermatology will support enhance and advance new models of academic excellence and community health care.

Updated by Marsha Wise
AOCD Policy Manual
Page 13
3/17/2021
The objectives of this organization are:

- To maintain the highest possible standards in the practice of dermatology
- To stimulate study and to extend knowledge in the field of dermatology
- To promote a more general understanding of the nature and scope of the services rendered by osteopathic dermatologists to the other divisions of medical practice, hospitals, clinics, and the public
- To contribute to the best interests of the osteopathic profession by functioning as an affiliated organization of the American Osteopathic Association

**AOCD Continuing Medical Education Mission Statement**

The American Osteopathic College of Dermatology (AOCD) offers its members and fellow healthcare professionals continuing medical education activities with an emphasis on medical updates, techniques, innovations, and general educational topics appropriate to the field of dermatology.

The AOCD CME Activities maintain the highest possible standards in the practice of dermatology, stimulate study, extend knowledge in the field of dermatology, promote a more general understanding of the nature and scope of services rendered by osteopathic dermatologist to the other divisions of medical practice, hospitals, clinics, and the public, and contribute to the best interest of the osteopathic profession. A strong focus is placed on the importance of patient safety and improving the patient’s overall outcome.

The American Osteopathic College of Dermatology will incorporate the following into all CME activities:

1. New advances in dermatologic treatment
2. New methods of diagnosis or treatment
3. Availability of new medication(s) or indication(s)
4. Development of new technology
5. Advances in medical knowledge
6. Legislative, regulatory, or organizational changes effecting patient care.

The Osteopathic Core Competencies of Osteopathic Philosophy, Principles, Practice and Manipulative Medicine, Medical Knowledge, Patient Care, Interpersonal and Communication Skills, Professionalism, Practice-Based Learning and Improvement, and System-Based Practice will also be incorporated into all CME activities.

The overall mission of each AOCD CME Activity is to

1. Inform the physician of advances in medical knowledge and technology.
2. Inform the physician of advances in diagnosis and treatments for better patient care and outcomes.
3. Inform the physician of advances in Practice-Based Learning and System-Based Practices.

**Target Audience**

The primary target audience of the CME activities conducted by the AOCD are the dermatologist physician members. The program serves community physicians, volunteer clinical faculty, academic clinicians, and students affiliated with the AOCD. The program will also actively seek to broaden its audience through developing affiliations with CME providers on the national level. **Physicians should claim only the credit commensurate with the extent of their participation in the activity.**
Types of Activities
The core activities presented by the CME activity are live conferences, live webinars, and on demand courses. The activities actively encourages members to develop enduring materials as an evolving tool for continuing education.

Expected Results
AOCD CME activities are intended to enhance the knowledge and competence of its attendees, with the intended goal being improving patient care and their health outcomes. The impact of our educational meetings will provide a diversified CME program focusing on the art and science of Dermatology. Information will be presented through lectures and scientific paper presentations.

Attendees will be updated on a broad range of new developments in dermatology and acquire a better understanding of advances in medical and surgical therapies. Attendees will gain a greater insight into current trends in dermatology. Therapeutic updates will be presented as well as non-surgical approaches.

Attendees are given an outcome measure survey to ensure cognitive retention from the meeting. The outcome measure survey provides the CME Committee and AOCD Staff with an initial benchmark of the learner’s knowledge and competence, as well as notates an immediate shift as to whether the learning goals and objectives have been met.

The AOCD is committed to the practice of continuing overall program improvement. The AOCD will actively explore new educational technologies, develop collaborative relationships with other CME providers, and seek to build the capacity to evaluate competency-based outcomes among the clinicians we serve.

Nature and Scope of Content
The content of CME activities produced by the AOCD is determined and initiated by a review of new developments and trends in dermatology as well as its members based on surveys and evaluations received. The CME program approves the activities based upon needs assessment data to ensure that all offerings present current, state-of-the-art information. Specific areas of emphasis include:

1. State-of-the-art clinical information
2. Health systems administration
3. Public health issues
4. Educational methodology
5. Professionalism in medicine
6. Cultural proficiency

The nature and scope of the AOCD CME activity is to provide accredited continuing medical education activities to inform the dermatologist. The activity will provide a mechanism by which its constituents can improve competency, maintain board certification, and cultivate lifelong learning. CME will provide physicians with the opportunity to further develop their knowledge through individual and group learning activities.

Incorporation of Educational Needs
The educational needs underlying the identified professional practice gaps of learners are identified by the Continual Medical Education Committee through a multi-step process. Professional practice gaps are determined by establishing current practice in a particular area. These gaps are then reviewed and compared against best or better practice. Attendees at AOCD CME conferences are also asked for input on areas they feel they need additional education on ranging from patient safety, therapeutic updates and office management. From there, the committee works to understand the underlying educational needs associated with why a gap exists. This is validated through the consultation of experts and governmental
The AOCD requires that all lecturers provide at least three (3) references in support of the material they are presenting. The Continuing Medical Education Committee (CME) reviews all references provided to ensure all scientific research conforms to generally accepted standards of experimental design, data collection, and analysis.

All presentations must include proper citations of peer reviewed journal articles, non-peer reviewed articles, textbooks, or other reference material. Current peer reviewed publications and guidelines to support the lecture content are encouraged. Finally, each presenter must submit their slide series and supporting documentation for committee review 8 weeks prior to their scheduled presentation. The planning committee, and AOCD staff conduct a review of the submitted supporting documentation to ensure validity of the references. If any questions or required revisions are identified during this review, speakers have 10 business days to re-submit content to the planning committee.

The views expressed and the techniques presented by the speakers of the AOCD-sponsored educational meetings are not necessarily shared or endorsed by the AOCD. Anyone with the ability to affect the content of an educational activity must disclose relevant financial relationships with health organizations producing, marketing, re-selling, or distributing health care goods or services consumed by, or used on, patients, as well as any unapproved or off-label uses of medical devices or pharmaceutical agents that they discuss, describe, or demonstrate during their presentations. Meeting attendees should use their independent judgment in applying the information discussed in these educational sessions in the treatment of patients.

Accreditation Statements
Upon completion of the activity planning, the following accreditation statements will appear on printed materials and online. These statements will be updated and reviewed regularly for compliance.

AOA Statement:
The American Osteopathic College of Dermatology is accredited by the American Osteopathic Association to provide osteopathic continuing medical education for physicians. The American Osteopathic College of Dermatology designates this program for a maximum of [number] of AOA Category 1-A credits and will report CME and specialty credits commensurate with the extent of the physician’s participation in this activity.

ACCME Statement:
The American Osteopathic College of Dermatology (AOCD) is accredited by the Accreditation Council for Continuing Medical Education (ACCME) to provide \textit{AMA PRA Category 1 Credits™} continuing medical education for physicians.

The American Osteopathic College of Dermatology (AOCD) designates this program for a maximum of ___ \textit{AMA PRA Category 1 Credits™}, and will report CME and specialty credits commensurate with the extent of the physician’s participation in this activity.

Policy and Procedures on Collection and Managing of Financial Relationships, Resolution of Conflicts of Interest, and Independence
The American Osteopathic College of Dermatology has adopted a policy statement regarding conflicts of interest. The AOCD administrative officers, elected officers, trustees and appointed committee chairs and committee members are required to comply with the conflict of interest policy. The policy specifically requires that trustees, officers and employees not use their respective positions with the AOCD to derive direct or indirect financial profit from or otherwise utilize a position with the AOCD to...
achieve an unfair advantage in issues involving another entity with which they are involved as a board member, officer, employee or in which they have a substantial financial investment. Therefore, any officer, trustee and other appointed officer must submit conflict of interest statement to the AOCD on an annual basis and is expected to update the statement should circumstances change. The key point to addressing conflicts of interest is full disclosure of any relationships that could present a conflict of interest.

The American Osteopathic College of Dermatology (AOCD) follows the ACCME Standards for Commercial Support. Invited speakers have an important role in maintaining these standards. The AOCD requires speakers to base their presentation and recommendations on the ‘best available evidence.’ The AOCD planning committee monitors the presentations, and attendees judge if commercial bias is present. Presenters will be asked to submit their presentations for peer review. In this way the AOCD planning committee identifies bias before publication on our website.

In accordance with the ACCME’s Standards for Commercial Support of Continuing Medical Education, this policy exists to provide guidance for staff, instructors, planners, reviewers and managers of CME activities sponsored by The American Osteopathic College of Dermatology, (AOCD). This policy addresses the underlying philosophy of disclosure to learners, mechanisms to collect disclosure information and the parties from whom financial disclosure shall be collected, the mechanisms to resolve COI, and requirements to make disclosure to learners prior to the start of an activity.

AOCD CME will identify relevant financial relationships prior to awarding AOA Category 1A and/or AMA PRA Category 1 Credit™ for CME activities. All persons in a position to influence or control CME content (course directors, program planning committee members, speakers, authors, and staff) will complete a standardized disclosure form. Information about funding will be requested to identify CME activities at higher risk for commercial bias. *Relevant financial relationships are financial relationships in any amount, which occurred in the twenty-four-month period preceding the time that the individual was asked to assume a role controlling content of the CME activity, and which relate to the content of the educational activity, causing a conflict of interest.*

If a speaker has indicated a financial relationship or interest, the speaker understands that this information will be reviewed to determine whether a conflict of interest may exist, and the speaker may be asked to provide additional information. Any individual refusing to comply with this policy and/or not disclosing relevant financial relationships on a timely basis (DEFINED AS THE INITIAL INVITATION AND TWO REMINDERS) will not participate in, have control of, or responsibility for, the development, management, presentation, or evaluation of AOCD CME activities.

AOCD is guided by what is in the best interest of the public, always deferring to independence from commercial interests, and keeping CME separate from product promotion.

**Transparency to Learners**
Learners will be provided with information on identified COI from any person(s) that affect the content of CME, and that information will be positioned in course materials such that it is read by learners prior to the execution of the CME activity.

**Independence**
AOCD has adopted and strictly implements the ACCME’s Standards for Commercial Support. Our CME planning process is guided by our Policy on Independence. The selection of all persons in a position to control the content, and the evaluation of the activities are all conducted by AOCD. Everyone in a position to control CME content, either committee members and/or staff must complete a conflict-of-interest disclosure agreement form. Specific to committee members, prior to an individual’s
appointment to the Continuing Medical Education Committee, this form explores any relevant financial relationships of an ACCME-defined commercial interest.

**Independent Content Validation**
Conflict of interest may be resolved if the CME material is peer reviewed and:

- All the recommendations involving clinical medicine are based on evidence that is accepted within the profession of medicine as adequate justification for indications and contraindications in the care of patients.
- All scientific research referred to, reported or used in the CME activity in support or justification of patient care recommendations conforms to the generally accepted standards of experimental design, data collection and analysis.
- The Declaration on the disclosure form will request that the person involved in the CME activity affirm their commitment, via signature, to ensure balance, independence, objectivity, and scientific rigor in AOCD CME activities.

Any committee member identified as having a potentially conflicting financial relationship within the past 24-months must recuse themselves immediately from the CME Committee. Additional processes are further detailed in subsequent sections.

**Names of speakers and authors for the activity will not be supplied to a commercial supporter during the process of applying for an educational grant.**

The AOCD must make all decisions regarding the disposition and disbursement of commercial support. The AOCD cannot be required by a commercial interest to accept advice or services concerning teachers, authors, or participants or other education matters, including content, from a commercial interest as conditions of contributing funds or services. All commercial support associated with a CME activity must be given with the full knowledge and approval of the AOCD. No other payment shall be given to the director of the activity, planning committee members, teachers or authors, joint provider, or any others involved with the supported activity. The AOCD must disclose the above information to learners *prior* to the beginning of the educational activity.

**AOCD Guidelines for Commercial Supporters of CME Activities, Disclosure and Disbursement**

The American Osteopathic College of Dermatology will adhere to the *ACCME’s Standards for Commercial Support*. AOCD solicits and receives commercial support for a limited number of hands-on didactic CME Activities. When AOCD solicits support, we do so in accordance with ACCME Standards for Commercial Support and would oversee disbursement for all awarded commercial support funds and/or in-kind support. In addition, AOCD ensures that a Letter of Agreement (LOA) or Grant Proposal are in place for all awarded commercial support funds, defining the terms, purposes, and conditions of the grant. AOCD ensures that all LOA’s and Grant Proposals are signed both by the commercial interest and AOCD. Lastly, AOCD would thoroughly document all commercial support expenditures.

AOCD complies with each company’s reconciliation process. Each company has a different format to use, but generally requires an outcomes budget of the activity. Letters of agreement are required for all sponsorships which the Company acknowledges funds from their corporate membership *may be used to provide support for continuing medical education activities held during the year*. As an accredited provider of continuing medical education (CME), it is critical that the ACCME Standards for Commercial Support are strictly enforced and adhered to by all. It is required that all aspects of content planning, development and presentation for a CME activity are independent of any commercial influence.
AOCD understands that this course includes hands-on training using products or equipment from any company, and it is very important that company representatives are here and that the equipment is used properly. Because the CME rules are often complex, AOCD is interested in proactively communicating our expectations about what is and is not allowed.

Commercial Supporters in attendance are asked to agree to the following:

1. WILL NOT make any suggestions or recommendations related to content or faculty of this or future courses.

2. WILL NOT bring promotional materials of any kind to the educational sessions nor will distribute any promotional or product-message materials to physicians at any point during the educational activity. Distribution of promotional or product-message materials to physicians in an area(s) designated by AOCD that is outside of the room(s) used for the CME educational activities and outside of the obligate path to the CME educational activities may be permitted.

3. WILL NOT discuss, sell or promote any product as a representative at this course. However, this may occur in an area(s) designated by AOCD that is outside of the room(s) used for the CME educational activities and outside of the obligate path to the CME educational activities.

4. UNDERSTAND that it is the role of the faculty selected by AOCD to teach the participants. Representatives will only assist the faculty as requested.

5. WILL NOT exchange business cards or other contact information during any educational sessions. However, may exchange business cards or other contact information at other times.

6. WILL NOT provide any honoraria, gifts or funds of any kind to faculty or participants during the AOCD CME activity.

7. A violation of any of these guidelines will result in being removed from the CME activity immediately and having the behavior reported to AOCD’s primary contact within the company, as well as the AOCD CME Committee and AOCD Board of Trustees.

Representatives of commercial support may attend an educational activity, but may not engage in promotional activities while in the room where the CME activity takes place. No commercial promotional materials shall be displayed or distributed in the same room as the CME activity. Exhibits are permitted at AOCD meetings, however, they shall not influence nor interfere with the presentation of the CME activity or be in the obligate pathway to the CME activity.

Should you have any questions regarding the facilities, handouts, program content, or concerns about CME compliance feel free to contact the AOCD representative:

Marsha A. Wise, BS, Executive Director
P.O. Box 7525
Kirksville, MO 63501
660-665-2184
800-449-2623

Cancellation and Refund Policy
Full refunds (less $100 processing fee) are available if requested in writing at least one month prior to the date of the Program. The AOCD is not responsible for “acts of god” such as inclement weather, delays in airline travel, or governmental restrictions on travel due to national emergencies. Refunds will not be made if participants are delayed or unable to attend because of these issues. We reserve the right to withdraw the program or to make changes in the published itinerary whenever conditions warrant or if it is deemed necessary.

Document Retention and Destruction Policy
This Document Retention and Description Policy of the American Osteopathic College of Dermatology (AOCD) identifies the record retention responsibilities of the Board of Trustees, staff, volunteers, and outsiders for maintaining and documenting the storage and destruction of the college's documents and records.

I. RULES
The college’s Board of Trustees, staff, volunteers, and outsiders (i.e. independent contractors via agreements with them) are required to honor these rules:
A. paper or electronic documents indicated under the terms for retention below will be transferred and maintained by staff;
B. all other paper documents will be destroyed after three years of creation/receipt; and
C. no paper or electronic documents will be destroyed or deleted if pertinent to any ongoing or anticipated government investigation or proceeding or private litigation.

II. TERMS FOR RETENTION
A. General Overview:
   1. Retain PERMANENTLY
      • Governance records – charter and amendments, bylaws, other organizational documents, governing board and board committee minutes.
      • Tax records – filed state and federal tax returns/reports and supporting records, tax exemption determination letter and related correspondence, files related to tax audits.
      • Intellectual property records – copyright and trademark registrations and samples of protected works.
      • Financial records – audited financial statements, attorney contingent liability letters.

Document Retention and Destruction Policy
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2. Retain for TEN YEARS
   • Pension and benefits records – pension (ERISA) plan participant/beneficiary records, actuarial reports, correspondence with government agencies, and supporting records.
   • Government relations records – state and federal lobbying and political contribution reports and supporting records.

3. Retain for THREE YEARS
   • Employee/employment records – employee names, addresses, social security numbers, dates of birth, INS Form I-9, resume/application materials, job descriptions, dates of hire and termination/separation, evaluations, compensation information, promotions, transfers, disciplinary matters, time/payroll records, leave/comp time/FMLA, engagement and discharge correspondence, documentation of basis for independent contractor status (retain for all current employees and independent contractors, as well as for separated/terminated independent contractors).
• Lease/insurance/and contract/license records – software license agreements, vendor, hotel, and service agreements, independent contractor agreements, employment agreements, consultant agreements, and all other agreements (retain during the term of the agreement and for three years after the termination/expiration/non-renewal of each agreement.)

4. Retain for ONE YEAR
• All other electronic records, documents, and files – correspondence files, past budgets, bank statements, publications, employee manuals/policies and procedures, survey information.

B. Detailed Document Retention

<table>
<thead>
<tr>
<th>Retention Period</th>
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<tbody>
<tr>
<td>Accident reports and claims (settled cases)</td>
</tr>
<tr>
<td>Accounts payable ledgers and schedules</td>
</tr>
<tr>
<td>Accounts receivable ledgers and schedules</td>
</tr>
<tr>
<td>Audit reports of accountants</td>
</tr>
<tr>
<td>Bank reconciliations</td>
</tr>
<tr>
<td>Capital stock and bond records; ledgers; transfer registers; stubs showing issues; record of interest coupons; options; etc.</td>
</tr>
<tr>
<td>Cash books</td>
</tr>
<tr>
<td>Charts of accounts</td>
</tr>
<tr>
<td>Checks (canceled, but see exception below)</td>
</tr>
<tr>
<td>Checks (canceled for important payments, i.e., taxes; purchases of property; special contracts; etc. Checks should be filed with the papers pertaining to the underlying transaction)</td>
</tr>
<tr>
<td>Correspondence (routine) with members, customers, or vendors</td>
</tr>
<tr>
<td>Correspondence (general)</td>
</tr>
<tr>
<td>Correspondence (legal and important matters only)</td>
</tr>
</tbody>
</table>

Document Retention and Destruction Policy
Page 3

• Deeds, mortgages and bills of sale Permanently
• Depreciation schedules Permanently
• Duplicate deposit slips | 2 years |
• Expense analyses and expense distribution schedules | 7 years |
• Financial statements (end-of-year, other months optional) | Permanently |
• General and private ledgers (and end-of-year trial balances) | Permanently |
• Insurance records, current accident reports, claims, policies, etc. | Permanently |
• Internal audit reports (in some situations, longer retention periods may be desirable) | 3 years |
• Inventories of products, materials and supplies | 7 years |
• Invoices to members and customers | 7 years |
• Invoices from vendors | 7 years |
• Journals | Permanently |
• Membership applications | 3 years |
• Minutes of directors and committees, including by-laws and charter  Permanently
• Notes receivable ledgers and schedules  7 years
• Option records (expired)  7 years
• Payroll records and summaries, including payments to pensioners  7 years
• Petty cash vouchers  3 years
• Physical inventory tags  3 years
• Property appraisals by outside appraisers  Permanently
• Property records, including: costs; depreciation reserves; end of year trial balances; depreciation schedules; blueprints and plans  Permanently
• Purchase orders (except purchasing department copies)  2 years
• Receiving sheets  2 years
• Requisitions  2 years
• Sales records  7 years
• Savings bond registration records of employees  3 years
• Scrap and salvage records (inventories, sales, etc.)  7 years
• Stock and bond certificates (canceled)  7 years
• Stockroom withdrawal forms  2 years
• Subsidiary ledgers  7 years
• Tax returns and worksheets; revenue agents’ reports and other documents relating to determination of income tax liability  Permanently
• Time books  7 years
• Voucher register and schedules  7 years
• Vouchers for payments to vendors, employees, etc. (Includes: allowances and reimbursement of employees, officers, etc., for travel and entertainment expenses.)  7 years

Document Retention and Destruction Policy
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C. Exceptions to these rules and terms for retention may be granted only by the College’s executive director, in conjunction with the College’s President.

D. CME and Accreditation Programs
   An AOA accredited CME Sponsor must maintain its files for a minimum of 6 years and at least two full 3-year CME cycles.

Document Retention/Integrity Policy
Adoption by the board of a written policy establishing standards for document integrity, retention and destruction, and guidelines for handling electronic files, backup procedures, archiving of documents, and regular checkups on the reliability of the system.

Record Archive:
• The AOCD is in the process of performing electronic archiving of documents.
Private foundations must keep records for federal tax purposes for as long as they may be needed to document evidence of compliance with provisions of the Internal Revenue Code. Generally, this means the organization must keep records that support and item of income or deduction on a return until the statute of limitations for that return runs out. The statute of limitations has run out when the AOCD can no longer amend its return to claim a credit or refund, and the IRS can no longer assess additional tax. Generally the statute of limitations runs three years after the date of the return is due or filed, whichever is later.

Record Retention Periods
- Permanent records should be kept permanently and include board minutes.
- Employment Tax Records must be kept for at least four years after the date the tax becomes due or is paid, whichever is later.
- Records for Non-Tax Purposes should be kept until they are no longer needed for non-tax purposes.
- CME Documentation must be kept for a minimum of 6 years and at least two full 3-year CME Cycles.

Backup Procedures:
- Back up of files on all AOCD computers is done nightly.
- Regular checkups on the reliability of the backup system and procedures will be performed.

EQUAL OPPORTUNITY POLICY
The American Osteopathic College of Dermatology, an affiliate of the American Osteopathic Association, is a growing organization dedicated to promoting the practice of dermatology on a national level. The AOCD is the organization responsible for Residencies and Continuing Medical Education nationwide. We are committed to providing up-to-date information and instruction for our members. It is the policy of the AOCD to provide equal employment opportunities and equal membership opportunities to all individuals without regard to race, color, religion, national origin, sex, marital status, age, physical or mental disability or any other protected status.

Executive Session Policy
The AOCD Board of Trustees may call for an Executive Session to discuss issues that may compromise the attorney client privilege. During an executive session, only individuals whose presence is reasonably necessary in order for the College to carry out its executive session responsibilities may attend.

The discussions and actions of the Executive Session will be recorded in the form of minutes. A motion is made to enter the Executive Session. When a second is received, it is discussed and voted on. The motion and vote will be recorded in the session minutes.

The Executive Session is closed to the public and general membership. The executive session is called to order when required individuals are present.

When the business of the executive session is complete, the President announces that the executive session is over and the recording equipment is turned off. If the public meeting is to resume, the President announces that the public meeting is reopened.
When a board of directors must discuss matters of a confidential nature, such as personnel or property issues, it may do so in a private session called an executive session or “in camera” (from the Latin legal term meaning “in chambers”). A typical procedure for convening an executive session is as follows:

1. A board member moves that the board go into executive session. If the motion is adopted by a majority of members, all present who are not members, or essential to the matter to be considered, may be excluded from the meeting.

2. The secretary records in the minutes that the motion was carried. If there is some compelling reason to do so, the secretary may include the time and the names of the members present.

3. The board conducts its confidential business. Anyone not a board member must be invited by the board to attend.

4. Minutes of the executive session are confidential. The secretary takes minutes but keeps them separate from the public minutes.

5. The board reviews and approves the confidential minutes the next time it goes into executive session. If copies are distributed, the secretary collects them before the end of the executive session and destroys them immediately. (It's a good idea to bring a shredder to the meeting!) If there is only one copy, the secretary reads the minutes aloud and the chair asks for corrections and/or approval.

6. When the executive session is adjourned, the “public” minutes should record that the executive session has concluded.

7. If, while in executive session, you have decided that secrecy should be lifted from a decision, the secretary records the decision in the “public” minutes. Otherwise, all directors are bound to respect the confidentiality of the session.
GOOD GOVERNANCE
Code of Ethics
The AOCD subscribes to, abides by and adopts by reference the Code of Ethics of the American Osteopathic Association as revised from time to time and requires adherence thereto by its members.

The American Osteopathic Association has formulated this code to guide its member physicians in their professional lives. The standards presented are designed to address the osteopathic physician’s responsibilities to others involved in health care, to patients and to society. This Code of Ethics is adopted by the American Osteopathic College of Dermatology.

Further, the American Osteopathic Association has adopted the position that physicians should play a major role in the development and instruction of medical ethics.

Section 1. The physician shall keep in confidence whatever she/he may learn about a patient in the discharge of professional duties. The physician shall divulge information only when required by law or when authorized by the patient.

Section 2. The physician shall give a candid account of the patient's condition to the patient or to those responsible for the patient's care.

Section 3. A physician-patient relationship must be founded on mutual trust, cooperation, and respect. The patient, therefore, must have complete freedom to choose her/his physician. The physician must have complete freedom to choose patients whom she/he will serve. However, the physician should not refuse to accept patients because of the patient's race, creed, color, sex, national origin or handicap. In emergencies, a physician should make her/his services available.

Section 4. A physician is never justified in abandoning a patient. The physician shall give due notice to a patient or to those responsible for the patient's care when she/he withdraws from the case so that another physician may be engaged.

Section 5. A physician shall practice in accordance with the body of systematized and scientific knowledge related to the healing arts. A physician shall maintain competence in such systematized and scientific knowledge through study and clinical applications.

Section 6. The osteopathic medical profession has an obligation to society to maintain its high standards and, therefore, to continuously regulate itself. A substantial part of such regulation is due to the efforts and influence of the recognized local, state and national associations representing the osteopathic medical profession. A physician should maintain membership in and actively support such associations and abide by their rules and regulations.

Section 7. Under the law a physician may advertise, but no physician shall advertise or solicit patients directly or indirectly through the use of matters or activities, which are false or misleading.

Section 8. A physician shall not hold forth or indicate possession of any degree recognized as the basis for licensure to practice the healing arts unless he is actually licensed on the basis of that degree in the state in which she/he practices. A physician shall designate her/his osteopathic school of practice in all professional uses of her/his name. Indications of specialty practice, membership in professional societies, and related matters shall be governed by rules promulgated by the American Osteopathic Association.

Section 9. A physician should not hesitate to seek consultation whenever she/he believes it advisable for the care of the patient.
Section 10. In any dispute between or among physicians involving ethical or organizational matters, the matter in controversy should first be referred to the appropriate arbitrating bodies of the profession.

Section 11. In any dispute between or among physicians regarding the diagnosis and treatment of a patient, the attending physician has the responsibility for final decisions, consistent with any applicable osteopathic hospital rules or regulations.

Section 12. Any fee charged by a physician shall compensate the physician for services actually rendered. There shall be no division of professional fees for referrals of patients.

Section 13. A physician shall respect the law. When necessary a physician shall attempt to help to formulate the law by all proper means in order to improve patient care and public health.

Section 14. In addition to adhering to the foregoing ethical standards, a physician shall recognize a responsibility to participate in community activities and services.

Section 15. It is considered sexual misconduct for a physician to have sexual contact with any current patient whom the physician has interviewed and/or upon whom a medical or surgical procedure has been performed.

Section 16. Sexual harassment by a physician is considered unethical. Sexual harassment is defined as physical or verbal intimation of a sexual nature involving a colleague or subordinate in the workplace or academic setting, when such conduct creates an unreasonable, intimidating, hostile or offensive workplace or academic setting.

Section 17. From time to time, industry may provide some AOA members with gifts as an inducement to use their products or services. Members who use these products and services as a result of these gifts, rather than simply for the betterment of their patients and the improvement of the care rendered in their practices, shall be considered to have acted in an unethical manner. (Approved July 2003)

Section 18. A physician shall not intentionally misrepresent himself/herself or his/her research work in any way.

Section 19. When participating in research, a physician shall follow the current laws, regulations and standards of the United States or, if the research is conducted outside the United States, the laws, regulations and standards applicable to research in the nation where the research is conducted. This standard shall apply for physician involvement in research at any level and degree of responsibility, including, but not limited to, research, design, funding, participation, either as examining and/or treating provider, supervision of other staff in their research, analysis of data and publication of results in any form for any purpose.

**Due Diligence**

The directors of the AOCD must exercise due diligence consistent with a duty of care that requires a director to act:

1. In good faith;
Directors should see to it that policies and procedures are in place to help them meet their duty of care. Such policies and procedures should ensure that each director:

1. Is familiar with the activities of the AOCD and knows whether those activities promote AOCD’s mission and achieve its goals;
2. Is fully informed about the AOCD’s financial status; and
3. Has full and accurate information to make informed decisions.

**Duty of Loyalty**

The directors of the AOCD owe it a duty of loyalty. The duty of loyalty requires a director to act in the interest of the charity rather than in the personal interest of the director or some other person or organization. In particular, the duty of loyalty requires a director to avoid conflicts of interest that are detrimental to the AOCD. To that end, the Board of Directors should adopt and regularly evaluate an effective conflict of interest policy that:

1. Requires directors and staff to act solely in the interests of the AOCD without regard to personal interests;
2. Include written procedures for determining whether a relationship, financial interest, or business affiliation results in a conflict of interest; and
3. Prescribes a certain course of action in the event a conflict of interest is identified.

Directors and staff should be required to disclose annually in writing any known financial interest that the individual, or a member of the individual’s family, has in any business entity that transacts with the AOCD.

**Conflict of Interest**

This policy applies to all members of the AOCD.

The Board of Trustees voted (January 26, 2019) that BOT, CME committee and Activity Moderators will not be speakers for Product Theaters held at AOCD conferences due to conflict of interest.

Members of the AOCD may become involved in situations where their loyalties are divided or where their personal interest may conflict with their duty to the AOCD. Situations can also arise in which members may be tempted to act in violation of their duty of loyalty to the AOCD. This policy sets standards to govern conduct in such situations.

The concept of "conflict of interest" covers a wide range of situations where what is at stake for individuals conflicts with their official responsibilities and the confidence vested in them. This type of "interest" may, for instance, be related to financial gain, professional advancement or academic promotion, commitments to third parties, allegiance to institutions, and roles or responsibilities of a professional, administrative, or academic nature.

For the purposes of this Policy, a conflict of interest is defined as follows:

A member is involved in a conflict of interest when:

1. the member owes a duty of loyalty in some matter to act in the interests of a person, group of persons, or institution; and
2. at the same time, the member has a personal interest in the matter or owes a duty of loyalty to act in the matter in the interests of a different person, group of persons, or institution.

A conflict of interest exists under this definition even if the action or decision called for under the first duty is identical with the personal interest or with the action or decision required under the second duty.

**Fundraising Policy**
The board of directors should adopt and monitor compliance with a fundraising policy to ensure that all solicitations comply with federal and state law requirements and are accurate and candid, and that any paid fundraisers are subject to proper oversight.
Introduction
Members of the Board of Trustees and staff carry certain duties and responsibilities for the well being of the organization. The Code of Conduct outlines some of those duties and responsibilities in accordance with governing documents.

Confidentiality
Board members and staff will have access to information, that if revealed to outsiders, could be damaging or sensitive to other members or staff, harmful to the best interests of the organization, or even create legal liability. Information provided to the board and staff may concern personnel, financial, contractual, membership or legal matters. It will often be confidential and is intended for use in decision making and governance. Information shall be held in the strictest of confidence and shall not be divulged to any outside party, including other members, without authorization of the board chair or organization executive director.

Conflicts of Interest
Board members and staff members owe a high fiduciary duty to the organization. Thus, no board or staff member shall maintain any business enterprise or other activity that directly conflicts with the interests of the organization. Staff members shall not solicit members for any reason that is not directly related to official business.

Violations
Violations of the Code of Conduct may result in disciplinary action in accordance with the governing documents. Discipline may include removal of a board member from office or termination of a staff member.

Acknowledgement of Receipt
I acknowledge that I have received and read a copy of the Code of Conduct and that I am responsible for compliance.

____________________________________________________________
Board Member Signature Date
Board of Trustee Commitment Form

As a member of the Board of Trustees, I will:

- Perform my duties so as to honor the trust of the membership that elected me.
- Comply with all applicable statutes and regulations applying to non-profit organizations and the terms of the Articles of Incorporation, the bylaws, and the policies adopted by the Board.
- Protect the interests of the association as determined by its Board, its mission and prudent business practice.
- Refrain from using my position on the Board for my own personal advantage or the advantage of any special interests inside or outside of the association.
- Protect the confidentiality of private or confidential information to which I become a party as a member of the Board, i.e. member lists, financial information, public policy goals, etc.
- Refrain from asserting authority as a Board member except when participating in a meeting of the Board or as the Board delegates to me; recognizing the chair of the Board has the final authority.

Accept my personal responsibility to:

- Attend the meetings of the Board and of Board committees to which I have accepted appointment.
- Review all information and materials sent to me in connection with Board business and to provide to the Board my best attention and judgment.
- Conduct myself so as to reflect credit on the association and the Board of Trustees.
- Respect the integrity and abilities of my fellow Board members and strive to advance the unity and harmony of the Board, recognizing all actions, whether or not I agree, belong in one to the board and not to individuals.
- Tender my resignation from membership on the Board if I am, or become, unable to serve in accordance with the provisions of this commitment.

____________________________________________________________
Board Member Signature  Date
Confidentiality Agreement

American Osteopathic College of Dermatology

This is to certify that I, __________________________, an employee, or Board/Committee member of the American Osteopathic College of Dermatology understand that any information (written, verbal or other form) obtained during the performance of my duties must remain confidential.

I understand that any unauthorized release or carelessness in the handling of this confidential information is considered a breach of the duty to maintain confidentiality.

I further understand that any breach of the duty to maintain confidentiality could be grounds for immediate dismissal and/or possible liability in any legal action arising from such breach.

__________________________________________
Signature

__________________________________________
Date

__________________________________________
Signature of Staff Witness

__________________________________________
Date
CONFLICT OF INTEREST POLICY STATEMENT

The American Osteopathic College of Dermatology has adopted a policy statement regarding conflicts of interest. The AOCD administrative officers, elected officers, trustees and appointed committee chairs and committee members are required to comply with the conflict of interest policy. The policy specifically requires that trustees, officers and employees not use their respective positions with the AOCD to derive direct or indirect financial profit from or otherwise utilize a position with the AOCD to achieve an unfair advantage in issues involving another entity with which they are involved as a board member, officer, employee or in which they have a substantial financial investment. Therefore, any officer, trustee and other appointed officer must submit conflict of interest statement to the AOCD on an annual basis and is expected to update the statement should circumstances change. The key point to addressing conflicts of interest is full disclosure of any relationships that could present a conflict of interest.

By signing this Conflict of Interest Statement, I confirm that I have disclosed on the attached page all of the situations, interests or affiliations that present an actual or potential conflict of interest with the performance of my official duties in the best interest of the AOCD and that except for these relationships, I have no personal material interest or outside affiliation. This includes relationships that not only have the potential for direct and indirect personal profits, but also any entity for which a member of my immediate family or I serve as an officer, director, employee or otherwise hold a significant financial interest. It is recognized that it is not possible to present a listing of all of the outside personal interest, activities or affiliations on the part of the undersigned which might be considered as being, in fact or appearance, in conflict with his or her duty of loyalty to the AOCD and contrary to its best interests. The following, however, are to the best of my knowledge and belief specific situations, interests or affiliations where there are actual or potential conflicts:

I understand that I must also disclose any actual or potential conflicts of interest that may arise in the future.

Set forth below is a list and description of other entities with which the undersigned is affiliated and/or has a material financial interest and may give rise to a conflict of interest:

1. Within the past five years, I have served as a director, officer or been an employee of the following organizations with which the AOCD does business (please include colleges of osteopathic medicine, specialty affiliates, divisional affiliates, philanthropic organizations and/or other organizational members of the osteopathic family)

______________________________________________________________________________
______________________________________________________________________________

2. I am a director or officer or employee or have a material financial interest in the following entities with which the AOCD transacts business (where appropriate, please identify the nature of the AOCD’s relationship with that entity):

________________________________________________________________________________________
____________________________________________________________

3. A member of my immediate family is a director or officer or employee or has a material financial interest in the following entities with which the AOCD does business (please identify the family member and the nature of the AOCD’s relationship with that entity):

______________________________________________________________________________
4. The following are other relationships that could present an actual or perceived conflict of interest.

[ ] In the past 24 months, I have not had any financial relationships with any ineligible companies.

Please indicate the names of the organizations from the last 24 months with which you have a financial relationship or interest, and the specific clinical areas that correspond to the relationship. If more than four relationships please list on separate page:

Examples of financial relationships include employee, researcher, consultant, advisor, speaker, independent contractor (including contracted research), royalties or patent beneficiary, executive role, and ownership interest. Individual stocks and stock options should be disclosed; diversified mutual funds do not need to be disclosed. Research funding from ineligible companies should be disclosed by the principal or named investigator even if that individual’s institution receives the research grant and manages the funds.

<table>
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<tr>
<th>Organization with which Relationship Exists</th>
<th>Has the Relationship ended?</th>
<th>Nature of Financial Relationship</th>
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[ ] I affirm that I have disclosed all relationships that could to the best of my knowledge.

An ineligible company is any entity producing, marketing, re-selling, or distributing health care goods or services consumed by, or used on, patients. Providers of clinical service directly to patients are not considered to be ineligible companies – unless the provider of clinical service is owned, or controlled by, a defined ineligible company.

Print: ______________________________ Date________________________

Signature: ______________________________

This form is provided electronically to allow for ample space for responses.
Policy and Procedures on Collection and Managing of Financial Relationships and Resolution of Conflicts of Interest

AOCD CME will identify relevant financial relationships prior to awarding AOA Category 1A and/or AMA PRA Category 1 Credit™ for CME activities. All persons in a position to influence or control CME content (course directors, program planning committee members, speakers, authors, and staff) will complete a standardized disclosure form. Information about funding will be requested to identify CME activities at higher risk for commercial bias.

Purpose
In accordance with the ACCME’s Standards for Commercial Support of Continuing Medical Education, the Policy on Collection of Financial Relationships and Resolution of Conflicts of Interest (COI) exists to provide guidance for staff, instructors, planners, reviewers and managers of CME activities sponsored by The American Osteopathic College of Dermatology, (AOCD). This policy addresses the underlying philosophy of disclosure to learners, mechanisms to collect disclosure information and the parties from whom financial disclosure shall be collected, the mechanisms to resolve COI, and requirements to make disclosure to learners prior to the start of an activity.

Guiding Principles Relating to COI and its Disclosure
AOCD is guided by what is in the best interest of the public, always deferring to independence from commercial interests, and keeping CME separate from product promotion. The following are guiding principles for the collection, management and resolution of COI.

Policy
Identifying Conflict of Interest
A Financial Disclosure Form shall be provided to individuals involved with a CME activity that have the following roles:

- Instructor/Faculty
- Reviewer/Planner/Course Director/Editor or Writer
- Staff, who manage the content/development of the CME activity (not logistics)

Recipients of financial disclosure forms must complete and return the document within three weeks of receiving it as a condition for participation in the role of planner/reviewer/course director/faculty/author/editor or writer/staff manager and/or contracted medical writer for the CME activity.

Timeframes
- For planning committee members, disclosure and resolution should occur before topics and speakers are selected.
- For speakers and authors, disclosure and resolution must occur before invitations to speak are made or manuscripts finalized. Note: In instances where conflicts that could substantively alter the program content or speakers are likely, disclosure and resolution for speakers should occur before topics and speakers are finalized.

Reporting guidance is as follows:
Any personal financial relationship during the previous 24-month period represents a potential conflict of interest, and therefore must be reported.

A COI is present when both (a) the relationship is financial and occurred within the past 24 months and (b) the individual has the opportunity to affect the content of CME.

**Processing COI Forms**

Staff project managers have primary responsibility for initial processing of conflict of interest forms and documenting reported information that requires resolution. The Executive Director will be consulted with cases in which the resolution is unclear or where disqualification is an option. The Chair of the AOCD CME Committee is an additional resource for resolution of COI when the Executive Director is not available or in cases when he/she recues him/herself.

**Options for resolution of COI include:**

- Substitution of a person with no COI or minimal levels of COI
- Review of CME content by a qualified reviewer that is not the person that developed the content
- Referencing the best available evidence in all CME activities in which potential conflicts exist
- Requesting the instructor or planner to sever financial relationships with the commercial interest
- Assigning the person with COI to a role in which therapeutic options will not be recommended
- Excluding that part of the instruction or disqualification of the presenter

**Documenting Resolution of COI**

**For Faculty:**

Completed Financial Disclosure Forms will be maintained in the activity file. The resolution of COI by staff and/or the AOCD CME Committee will be documented on the Resolution of COI Form.

**For Planners:**

- Staff and/or the AOCD CME Committee will take cognizance of planners from whom disclosure forms indicate a COI.

**Mechanisms to resolve COI for planners are as follows:**

- Replace planners with COI with other experts that are not conflicted, if possible.
- When replacing planners is not feasible, staff and/or the AOCD CME Committee must provide stringent oversight of the planning process to ensure objectivity, fair balance and absence of commercial bias.
- Faculty/Planner Agreements—on which the Planner attests that he or she will plan the activity objectively, with fair balance and without commercial bias—must be provided, signed by the planner, and received by AOCD prior to the commencement of planning.
- Should new planners be added after the planning process begins, those persons shall not commence their work until their financial relationships disclosure has been received and there is resolution of any relevant COI.
- When COI is present, final presentation content must be reviewed prior to the execution of the activity and documentation provided that demonstrates objectivity, fair balance and absence of commercial bias.

**Independent Content Validation**

Conflict of interest may be resolved if the CME material is peer reviewed and:

- All the recommendations involving **clinical medicine** are based on evidence that is accepted within the profession of medicine as adequate justification for indications and contraindications in the care of patients.
- All **scientific research** referred to, reported or used in the CME activity in support or justification of patient care recommendations conforms to the generally accepted standards of experimental design, data collection and analysis.
The Declaration on the disclosure form will request that the person involved in the CME activity affirm their commitment, via signature, to ensure balance, independence, objectivity, and scientific rigor in AOCD CME activities.

For Reviewers:
- Reviewers should not have any relevant COI
- If COI is present, another reviewer should be selected with no COI
- In those rare instances where every potential reviewer has one or more conflicts and there is no qualified reviewer without COI, then two reviewers should be utilized as a check-and-balance

Implementation
For Instructors:
- Financial Disclosure Forms will be attached to the Faculty Letter with clear instructions on due date for their return
- Failure to return financial disclosure information will result in disqualification
- Instructors that have current promotional relationships with a CI on the same topic as the CME activity may have an irreconcilable COI; should their level of expertise require their continued involvement in planning, they will be recused from specifying treatment options in course content

For Planners and Managers
- As soon as external physician planners and reviewers for the activity are identified, a Financial Disclosure Form must be provided to them in writing with instructions to complete and immediately return
- Staff that affect the content of CME, or contracted medical writers, will complete a disclosure form annually and that information shall be transparent to the learners AOCD CME Committee members will complete a disclosure form annually

Transparency to Learners
Learners will be provided with information on identified COI from any of the above categories of persons that affect the content of CME, and that information will be positioned in course materials such that it is read by learners prior to the execution of the CME activity.

MECHANISM TO MANAGE FACULTY WHO VIOLATE STANDARDS
All AOCD CME activities will be evaluated by learners and possibly peer reviewers to determine if the content was free of commercial bias. All those identified as having influence and/or control of CME content perceived as either manifesting conflicts of interest or being biased may be disqualified from consideration as resources (planning group member, authors, faculty, etc) in subsequent CME activities.

Step 1: Staff conducts an evaluation of the CME activity to, among other things, determine the perception of commercial bias. All AOCD CME activities must include a mechanism for evaluating the perception of commercial bias (eg, inclusion of a question on the attendee evaluation form of the activity and/or faculty; inclusion of a question on the monitor evaluation form of the activity and/or faculty, etc.) Staff may request that there is a peer monitoring of that activity.

Step 2: Staff reviews evaluation data to assess perception of commercial bias in the CME activity.

Step 3: Staff documents these findings along with any additional documentation related to the assessment of the evaluation data in the CME activity file and communicates this information to the course director and/or planning committee.

Step 4: Any concerns as a result of the evaluation data should be handled accordingly including disqualification in future CME activities. Each violation will be considered on a case-by-case basis.
Harassment Policy
It is American Osteopathic College of Dermatology's policy to prohibit intentional and unintentional harassment of any individual by another person on the basis of any protected classification including, but not limited to, race, color, national origin, disability, religion, marital status, veteran status, sexual orientation or age. The purpose of this policy is not to regulate our employees' personal morality, but to ensure that in the workplace, no one harasses another individual.

If an employee feels that he or she has been subjected to conduct which violates this policy, he or she should immediately report the matter to Secretary Treasurer. If the employee is unable for any reason to contact this person, or if the employee has not received a satisfactory response within five (5) business days after reporting any incident of what the employee perceives to be harassment, the employee should contact the President. If the person toward whom the complaint is directed is one of the individuals indicated above, the employee should contact any higher-level manager in his or her reporting hierarchy. Every report of perceived harassment will be fully investigated and corrective action will be taken where appropriate. All complaints will be kept confidential to the extent possible, but confidentiality cannot be guaranteed.

In addition, the AOCD will not allow any form of retaliation against individuals who report unwelcome conduct to management or who cooperate in the investigations of such reports in accordance with this policy. If an employee feels he or she has been subjected to any such retaliation, he or she should report it in the same manner in which the employee would report a claim of perceived harassment under this policy. Violation of this policy including any improper retaliatory conduct will result in disciplinary action, up to and including discharge. All employees must cooperate with all investigations.

Sexual Harassment
It is American Osteopathic College of Dermatology's policy to prohibit harassment of any employee by any Supervisor, employee, customer or vendor on the basis of sex or gender.

The purpose of this policy is not to regulate personal morality within the AOCD. It is to ensure that at the AOCD all employees are free from sexual harassment. While it is not easy to define precisely what types of conduct could constitute sexual harassment, examples of prohibited behavior include unwelcome sexual advances, requests for sexual favors, obscene gestures, displaying sexually graphic magazines, calendars or posters, sending sexually explicit e-mails, text messages and other verbal or physical conduct of a sexual nature, such as uninvited touching of a sexual nature or sexually related comments.

Depending upon the circumstances, improper conduct also can include sexual joking, vulgar or offensive conversation or jokes, commenting about an employee's physical appearance, conversation about your own or someone else's sex life, or teasing or other conduct directed toward a person because of his or her gender which is sufficiently severe or pervasive to create an unprofessional and hostile working environment.

If the employee feels that he or she has been subjected to conduct which violates this policy, the employee should immediately report the matter to Secretary Treasurer. If unable for any reason to contact this person, or if the employee has not received a satisfactory response within five (5) business days after reporting any incident of perceived harassment, the employee should contact the President. If the person toward whom the complaint is directed is one of the individuals indicated above, the employee should contact any higher-level manager in his or her reporting hierarchy. Every report of perceived harassment will be fully investigated and corrective action will be taken where appropriate. All complaints will be kept confidential to the extent possible, but confidentiality cannot be guaranteed.
In addition, the AOCD will not allow any form of retaliation against individuals who report unwelcome conduct to management or who cooperate in the investigations of such reports in accordance with this policy. If an employee feels that he or she has been subjected to any such retaliation, the employee should report it in the same manner in which a claim of perceived harassment would be reported under this policy. Violation of this policy including any improper retaliatory conduct will result in disciplinary action, up to and including discharge. All employees must cooperate with all investigations.

**Membership Renewal Policy**

Effective:  February 24, 2014

Members who do not pay dues for one full year will have a $150.00 administrative fee applied in addition to the appropriate membership fees when renewing membership status in the AOCD.

A member whose dues remain unpaid for 2 or more years will have a $150.00 administrative fee applied in addition to the appropriate current membership fees including all past dues, when renewing membership status in the AOCD.

*Examples:*

A member who does not pay dues for 2014, but renews in 2015, their annual fee will be $575.00

A member who does not pay dues for 2014, 2015, but renews in 2016, their annual fee will be $625.00
Social Media Policy
AOCD Members who participate in Social networking sites are encouraged to act responsibly in their communication and regularly track their on-line presence. Members should protect confidential information, the privacy of patients, colleagues, and copyright and fair use laws.

AOCD Members are encouraged to review and follow the American Medical Association’s Policy on “Professionalism in the Use of Social Media” which was adopted for use November 2010.

Professionalism in the Use of Social Media
American Medical Association, November 2010

The Internet has created the ability for medical students and physicians to communicate and share information quickly and to reach millions of people easily. Participating in social networking and other similar Internet opportunities can support physicians’ personal expression, enable individual physicians to have a professional presence online, foster collegiality and camaraderie within the profession, provide opportunity to widely disseminate public health messages and other health communication. Social networks, blogs, and other forms of communication online also create new challenges to the patient-physician relationship. Physicians should weigh a number of considerations when maintaining a presence online:

(a) Physicians should be cognizant of standards of patient privacy and confidentiality that must be maintained in all environments, including online, and must refrain from posting identifiable patient information online.

(b) When using the Internet for social networking, physicians should use privacy settings to safeguard personal information and content to the extent possible, but should realize that privacy settings are not absolute and that once on the Internet, content is likely there permanently. Thus, physicians should routinely monitor their own Internet presence to ensure that the personal and professional information on their own sites and, to the extent possible, content posted about them by others, is accurate and appropriate.

(c) If they interact with patients on the Internet, physicians must maintain appropriate boundaries of the patient-physician relationship in accordance with professional ethical guidelines, just as they would in any other context.

(d) To maintain appropriate professional boundaries physicians should consider separating personal and professional content online.

(e) When physicians see content posted by colleagues that appears unprofessional they have a responsibility to bring that content to the attention of the individual, so that he or she can remove it and/or take other appropriate actions. If the behavior significantly violates professional norms and the individual does not take appropriate action to resolve the situation, the physician should report the matter to appropriate authorities.

(f) Physicians must recognize that actions online and content posted may negatively affect their reputations among patients and colleagues, may have consequences for their medical careers (particularly for physicians-in-training and medical students), and can undermine public trust in the medical profession. (I, II, IV)
TELEPHONE ADVICE
The public, through the use of internet search engines, will often times come across the AOCD website and view it as a source of medical information. The AOCD office routinely receives telephone calls from the general public asking questions regarding conditions and medications.

It is the recommendation of the American College of Osteopathic Dermatology Board of Trustees that staff members do not provide ANY medical advice via the telephone.

AOCD Staff should be instructed to help the caller locate a Board Certified Dermatologist in their area using the AOCD’s “Find a D.O.” page on the web site.

At no time should staff attempt to offer medical advice and staff should clearly state to the caller staff is not qualified to offer such advice.

Individuals describing potential life or limb threatening emergencies should be instructed to call 9-1-1 or seek emergency care.

Trademark Policy Use
Fellow Members in good standing with the AOCD who wish to display the AOCD logo on their practice webpage shall sign and follow the Trademark Agreement drafted by the AOCD along with Joshua Prober, JD of the American Osteopathic Association.

Upon termination of membership in the AOCD, whether such termination is voluntary or by action of the AOCD Board of Trustees, Member shall cease and desist from all further use of the Marks.
Trademark Usage Agreement
American Osteopathic College of Dermatology

This Trademark Usage Agreement (the "Agreement") is effective as of the day of______, 20__, and is entered into by and between the American Osteopathic College of Dermatology,(Vendor) a Not For Profit Organization, with its principal place of business located at, 2902 North Baltimore Street, Kirksville, Missouri, and ________________ (Member) who is affiliated with the organization as an AOCD Fellow member.
(For clarification purposes, the term “member” refers to AOCD Fellow Member from this point forward)

WHEREAS, The AOCD Fellow Member desires to have the trademark(s) and/or logo(s) (collectively, the “Marks”) of the American Osteopathic College of Dermatology placed upon Member’s practice webpage and Vendor desires to grant Member a limited use license to use the Marks for this purpose providing the member is in good standing with the American Osteopathic College of Dermatology.

NOW, THEREFORE, in consideration of the promises contained herein, and for other good and valuable consideration, the receipt and sufficiency of which is hereby acknowledged, the parties agree as follows:

AOCD hereby grants to Members the limited, non-exclusive and non-transferable right and license (without any right or power to sub-license) to use Vendor’s Marks for the sole purpose of placement on member’s practice website page. The Marks shall not be used by Members for any other purposes.

The Member shall provide a link to the American Osteopathic College of Dermatology’s web page near the placement of organization mark/logo. www.aocd.org

The Marks shall not be used by Members for any other purposes.

Member hereby acknowledge AOCD is the owner of all right, title and interest in and to the Marks and shall not do any act which impairs the same. Members shall not represent that Members have any ownership or other rights in the Marks and acknowledge that Members use of the Marks will not create in Members’ favor any right, title or interest in or to the Marks.

This license agreement shall expire upon the earlier date of _______ [DATE] or upon termination of membership in the AOCD, whether such termination is voluntary or by action of the AOCD Board of Trustees. Upon such expiration, Member shall cease and desist from all further use of the Marks.

The parties intend and agree that a copy or facsimile of this Agreement with their signatures thereon, shall be treated as an original, and shall be as binding, valid, genuine, and authentic as an original-signature document for all purposes.

IN WITNESS WHEREOF, the parties have executed this Agreement as of the date first set forth above.

AOCD (Vendor) ____________________________ (Member)
By: ____________________________
Name: ____________________________
Title: ____________________________

Travel Reimbursement Policy

Updated by Marsha Wise
AOC Policy Manual
Page 41
3/17/2021
The AOCD recognizes and appreciates the efforts of those traveling for AOCD purposes. Travelers should understand the AOCD’s travel policies, be comfortable while traveling and receive timely reimbursement. At the same time, travel costs submitted for reimbursement must be incurred in accordance with these guidelines.

The primary responsibility for the expense report items being properly documented and within AOCD policy rests with the traveler and the approving supervisor. The Executive Director will review expense reports on a sample basis for compliance with this policy, and forward taxable reimbursements, if any, to payroll for inclusion on W-2 wages.

The traveler is responsible for the submission of all forms related to his/her travel. The traveler may delegate responsibility for preparation of the forms to an associate but the traveler and the authorizing supervisor will retain accountability for travel expenses. A completed and signed Travel Expense Report form should be submitted within a reasonable time period (normally not to exceed 45 days). Either originals or copies of receipts can be mailed, faxed or emailed to the AOCD office with the expectation that originals will not be returned to the sender.

Purpose of Policy
1. Ensure clear and consistent understanding of policies and procedures.
2. Ensure compliance with state, federal and AOCD regulations.
3. Ensure equitable consideration to both the traveler and the AOCD.
4. Provide guidelines covering AOCD travel and other business expenses, as well as the documentation required for substantiation

Rules for Accountable Plan for Travel Reimbursement
The AOCD’s travel expense reimbursement program meets the Internal Revenue Service (IRS Publication 463) definition of an accountable plan. As a result, expenses and reimbursements that conform to this policy are not reported as taxable income to the individual. Under the accountable plan, business travel expense reimbursement must meet two requirements:
1. Reimbursements must be made for business expenses only. A business expense is defined as:
   “A clear and understandable reason for travel that is specific enough to explain how the AOCD benefits from the expenses being claimed (it should answer who, what, when, where, and why).”
2. Travelers must provide a statement substantiating the amount, dates, use and business purpose of expenses within a reasonable time (normally not to exceed 45 days) after the expenses are incurred. Receipts must be attached to the expense report.

Calculation of Business Mileage
Business travel mileage shall be reimbursed according to current IRS reimbursement rates and computed between the travel site destination and the AOCD or residence if leaving directly from the residence, whichever is less.

Lodging
Reasonable and necessary amounts are allowed for lodging, usually based on single occupancy rates. A receipted, itemized statement furnished by the hotel or motel is required for all lodging expenses. Summary statements provided by credit card companies will not be accepted as backup for lodging reimbursement.
Meals
Per Diem: The purpose of per diem payments is to defray other the expenses incurred while performing AOCD duties. The rate of $125.00 per day shall be the daily per diem rate. Individuals will not be required to submit receipts for any expense as the per diem payment is designed to defray all meals, ground transportation, fees, tolls, parking, and incidental expenses such as tips.

Taxi, Rental Car or other Local Transportation
The cost of taxis and other local transportation to and from hotels, airports or railroad stations in connection with business activities is reimbursable. Rental cars may be utilized if the business purpose is documented.

Internet Server Access While Traveling:
Travelers will be reimbursed for the cost of internet connections for the purpose of administering AOCD business.

Other Reimbursable Expenses: Reimbursement will be allowed for other expenses under the following circumstances:
1. Shipping of AOCD materials not carried by the traveler
2. Baggage handling
3. Business expense such as copying and fax
4. Currency conversion fees
5. Laundry if in travel status more than five days

Type of Documentation Required
1. E-Tickets: Airline “receipt/itinerary” and charge card receipt as long as the amount, date, name of flyer and destination is shown.
2. Car Rental: Car rental agreement and charge card receipt
3. Personal Auto: Miles driven
4. Lodging: Itemized hotel bill and charge card receipt
5. Meals: Hotel bill, charge card or restaurant receipt (plus business purpose if business entertainment meal)
6. Conference: Conference agenda and paid receipt (if paid by employee)
7. Telephone, Fax, Internet: Hotel bill or other connection charge receipt
8. Taxi, other: Receipt of bill

Receipts are required for all expenses indicated above. Photocopies of invoices, credit card statements or record of charge slips accompanying the monthly billing statements, receipts or restaurant stubs are acceptable. A receipt is defined as a written acknowledgment that a specified remittance, article or delivery has been made. At a minimum, the name of the payee, date and amount should appear on the receipt.

Lost Receipts
In the event a receipt is lost, a written statement from the traveler stating that the original receipt is not available and that reimbursement has not been previously received must be attached to the expense report.

Compliance with the Americans with Disabilities Act
All travelers are to be afforded equal opportunity to travel for official business. If expenditures outside this policy are necessary to provide accommodation, the circumstances should be noted on the travel expense report.
Questions/Policy Updates:
Questions about this policy should be addressed to the Executive Director. Any disputes between the traveler and the Executive Director may be forwarded to the President or Secretary/Treasurer for a final decision.

VIRTUAL MEETING POLICY
Purpose
This policy is intended to establish the process of virtual meeting of all board members. The policy is reviewed once a year and maintained in each member’s Administrative Manual. The policy has been reviewed and authorized by the board.

Definition of a Virtual Meeting
Any or all directors may participate in a meeting of the board of directors, or a committee of the board, by means of a telephone or video conference or by any means of communication by which all persons participating in the meeting are able to hear one another, and such participation shall constitute presence at the meeting.

Policy Statement
Like all meeting, virtual meetings are conducted within AOCD bylaws, policies and the laws of the State of Missouri which govern Not for Profit Organizations (Chapter 355, Non Profit Corporation Law, Section 355.376). Any AOCD member who has questions about policies in the virtual environment should consult the appropriate AOCD staff liaison.

Three days in advance of the meeting, an agenda, including the virtual meeting information, should be emailed or posted to the participant as a public post at the official AOCD websites. Results of the meeting must be made public no fewer than 30 days after the meeting’s conclusion in the form of meeting notes or minutes as a public post to the AOCD websites.
AOCD Virtual Programs Code of Conduct

AOCD is committed to providing a safe, productive, and welcoming environment for all meeting participants, faculty and staff. All participants, including, but not limited to, attendees, speakers, volunteers, exhibitors, AOCD staff members, service providers, and all others are expected to abide by this Virtual Programs Code of Conduct. This Policy applies to all AOCD meeting-related events, including lecture sessions, exhibitor hall and social networking activities.

AOCD has zero-tolerance for any form of discrimination or harassment, including but not limited to sexual harassment by participants or our staff at our meetings. If you experience harassment or hear of any incidents of unacceptable behavior, AOCD asks that you inform either Marsha Wise, Executive Director at mwise@aocd.org or 800-449-2623, so that we can take the appropriate action.

Unacceptable Behavior is defined as:

- Harassment, intimidation, or discrimination in any form.
- Verbal abuse of any attendee, speaker, volunteer, exhibitor, AOCD staff member, service provider, or other meeting guest.
- Examples of verbal abuse include, but are not limited to, verbal comments related to gender, sexual orientation, disability, physical appearance, body size, race, religion, national origin, inappropriate use of nudity and/or sexual images in public spaces or in presentations, or threatening or stalking any attendee, speaker, volunteer, exhibitor, AOCD staff member, service provider, or other meeting guest.
- Disruption of presentations during sessions, in the exhibit hall, or at other events organized by AOCD throughout the virtual meeting. All participants must comply with the instructions of the moderator and any AOCD virtual event staff.
- Presentations, postings, and messages should not contain promotional materials, special offers, job offers, product announcements, or solicitation for services. AOCD reserves the right to remove such messages and potentially ban sources of those solicitations.
- Participants should not copy or take screen shots of Q&A or any chat room activity that takes place in the virtual space.

AOCD reserves the right to take any action deemed necessary and appropriate, including immediate removal from the meeting without warning or refund, in response to any incident of unacceptable behavior, and AOCD reserves the right to prohibit attendance at any future meeting, virtually or in person.
AOCD Release Policy

1. I, the CME Presenter, represent and warrant that:

   A. the Presentation, and any materials furnished by me for the Presentation;
      I. are original works created by me subject to subsection 1.B below;

      II. do not, and will not, infringe the rights of any third party, including without limitation any intellectual property rights, rights of publicity, rights of personality, rights of privacy, rights of payment or royalties, or any other rights of third parties not specifically identified in this subsection;

      III. do not contain any defamatory or illegal content, or invade any person’s right of privacy or publicity;

      IV. result in any tort, injury, damage, or harm to any third party; or

      V. otherwise violates any applicable laws or regulations or relevant industry codes; and

   B. I have all necessary approvals, licenses, and authorizations to use any third party intellectual property rights to the extent that the Presentation or any materials furnished by me for the Presentation contain any such rights and to grant the rights granted therein.

2. I grant to the AOCD Conference the following:

   A. permission to record the Presentation, whether such recording occurs via audio, digital, or any other form or method of copying, recording, transmission, now known or hereafter devised including, without limitation, copying or recording by phonographic, photographic, magnetic, laser, electronic, or any other means and whether on film, microfilm, slides, transparencies, online Internet, CD-ROM, magnetic tape, cassettes, videodisks, floppy disks, or any other human or machine readable medium;

   B. a non-exclusive, royalty-free, sub-licensable, transferrable perpetual license to use, in whole or in part, all intellectual property rights in any literary, audio, audio-visual, artistic and photographic works (including, without limitation, written speeches, visual aids, and other visual and/or written materials used, performed, displayed, or provided by me) in connection with the Presentation;

   C. the right to use and distribute my name, picture, likeness, biographic and/or other information in connection with the Presentation and/or any recording and/or materials and broadcast or transmission thereof (including, without limitation, use in printed or electronic media); and

   D. to reproduce and make derivative works based upon the Presentation and or materials, and to distribute, display, publish, and perform the presentation and/or materials to the intended audience or any other audience as the AOCD deems appropriate in its sole discretion, in whole or in part, by means of the Internet, via physical media, print media, or by any other means, including, without limitation, to prepare transcripts of the Presentation or recording and to publish the Presentation and the materials therefrom in any other publication.

Signed: ____________________________  Date: __________________
Printed Name of Presenter: ____________________________________ (‘‘CME Presenter’’) Presenter
Contact Details: __________________________________________________________
Day of Presentation Mobile Contact Number: _____________________________
CME Presentation Title: _______________________________________________ (‘‘Presentation’’)
AOCD Conference Date: ___________________________ (‘‘Event’’)
Whistleblower Policy
This Whistleblower Policy of the American Osteopathic College of Dermatology (AOCD) encourages staff and volunteers to come forward with credible information on illegal practices or serious violations of adopted policies of the College; specifies that the College will protect the person from retaliation; and identifies where such information can be reported.

1. Encouragement of Reporting
   The College encourages complaints, reports, or inquiries about illegal practices or serious violations of the College’s policies, including illegal or improper conduct by the College itself, by its leadership, staff, or by others on the College’s behalf. Appropriate subjects to raise under this policy would include financial improprieties, accounting, or audit matters, ethical violations, or other similar illegal or improper practices or policies.

2. Protection from Retaliation
   The College prohibits retaliation by or on behalf of the College against staff or volunteers for making good faith complaints, reports, or inquiries under this policy or for participating in a review or investigation under this policy. This protection extends to those who allegations are made in good faith, but prove to be mistaken. The College reserves the right to discipline persons who make bad faith, knowingly false, or vexatious complaints, reports, or inquiries or who otherwise abuse this policy.

3. Where to Report
   Complaints, reports, or inquiries may be made under this policy on a confidential or anonymous basis. They should describe in detail the specific facts demonstrating the bases for the complaints, reports, or inquiries. They should be directed to the College’s executive director or president; if both of those persons are implicated in the complaint, report, or inquiry, it should be directed to the vice president/treasurer. The College will conduct a prompt, discreet, and objective review or investigation. Staff or volunteers must recognize that the College may be unable to fully evaluate a vague or general complaint, report, or inquiry that is made anonymously.