

CME FACULTY DISCLOSURE AND CONTENT VALIDATION

Name ARYAN MEKNAT

Your role in the CME Activity: Presenter Author Planning Committee Moderator Program Director

Activity Title Bedford Spring Cardiovascular Conference Activity Date 10/6/23

Presentation Title /Topic(s) VAD Implant in the setting of concomitant Heart Disease

In compliance with the ACCME's Standards for Commercial Support, everyone in a position to control the content of a CME activity must disclose their relevant financial relationships with commercial interests. "Relevant financial relationships" are defined as financial relationships in any amount occurring within the past 24 months. **Refusal to disclose prohibits participation.**

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	Affiliation/Financial Interest	Name of Commercial Interest
1	Grant/Research Support	
2	Consultant	
3	Speaker's bureau	
4	Stockholder or other ownership interest	
5	Board membership	
6	Other financial or material support	

Yes No I plan to discuss off-label uses of products and/or medical devices in my lecture. If yes, please explain.

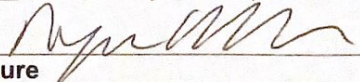
Yes No I plan to discuss unpublished research data in my lecture. If yes, please explain.

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Signature  Date 8/21/23

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CME FACULTY DISCLOSURE AND CONTENT VALIDATION

Name Bart Cherrino

Your role in the CME Activity: Presenter Author Planning Committee Moderator Program Director

Activity Title

Activity Date 1/1/2023 - 12/31/2023

Presentation Title /Topic(s) teaching conference, M&M Journal Club, Grand Rounds

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Bart Cherrino

Signature

Date 10/29/2022

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Your role in the CME Activity: Presenter Author Planning Committee Moderator Program Director

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Activity Date _____

Presentation Title /Topic(s) _____

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Deepak Shan, MD

Signature _____

Date _____

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Your role in the CME Activity: Presenter Author Planning Committee Moderator Program Director

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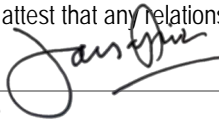
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CME FACULTY DISCLOSURE AND CONTENT VALIDATION

Name SCOTT HAUBREWER

Your role in the CME Activity: Presenter Author Planning Committee Moderator Program Director

Activity Title

Activity Date 1/1/2023-12/31/2023

Presentation Title /Topic(s) teaching conference, M&M, Journal Club, Grand Rounds

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Signature  Date 12/30/22

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CME FACULTY DISCLOSURE AND CONTENT VALIDATION

Name Henry Tomer, MD

Your role in the CME Activity: Presenter Author Planning Committee Moderator Program Director

Activity Title Racial equity access case presentation

Activity Date 1/1/2023-12/31/2023

Presentation Title /Topic(s) Bedford Conference

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Date 9/14/23

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CME FACULTY DISCLOSURE AND CONTENT VALIDATION

Name: CANDICE LEE

Your role in the CME Activity: Presenter Author Planning Committee Moderator Program Director

Activity Title DEBATE

Activity Date 5/19-5/20/23

Presentation Title /Topic(s) High Risk PE therapy is best performed by Interventionalist or a CT surgeon

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Candice Lee
Signature

12/20/22
Date

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CME FACULTY DISCLOSURE AND CONTENT VALIDATION

Name Walter Deluzon

Your role in the CME Activity: Presenter Author Planning Committee Moderator Program Director

Activity Title _____ Activity Date _____

Presentation Title /Topic(s) teaching conference, M&M, Journal Club, Grand Rounds

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Your role in the CME Activity: Presenter Author Planning Committee Moderator Program Director

Activity Title _____

Activity Date _____

Presentation Title /Topic(s) _____

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CME FACULTY DISCLOSURE AND CONTENT VALIDATION

Name William Patrick Rauh

Your role in the CME Activity: Presenter Author Planning Committee Moderator Program Director

Activity Title Bedford Spring Cardiovascular Conference Activity Date 10/6/2023

Presentation Title /Topic(s) Mitral Disease and Malignant Arrhythmia Syndromes

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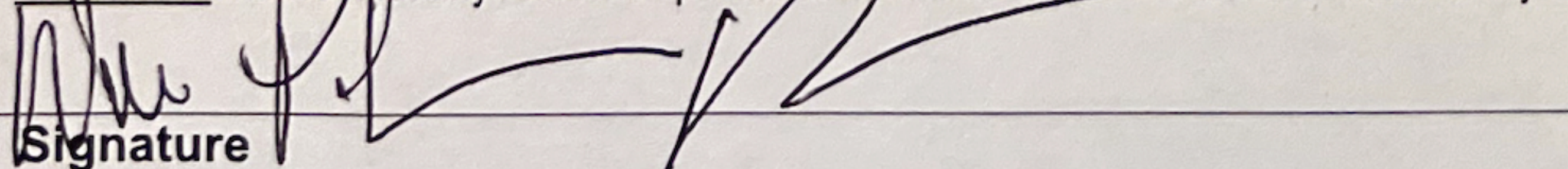
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CME FACULTY DISCLOSURE AND CONTENT VALIDATION

Name SEAN FORREST

Your role in the CME Activity: Presenter Author Planning Committee Moderator Program Director

Activity Title UPDATES IN VASCULAR AND CARDIAC SURGERY Activity Date 10/6-7/2023

Presentation Title /Topic(s) TRICUSPID SURGERY IN THE TRICLIP ERA

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CME FACULTY DISCLOSURE AND CONTENT VALIDATION

Name Shruthi T

Your role in the CME Activity: Presenter Author Planning Committee Moderator Program Director

Activity Title _____ Activity Date 1/1/2023 - 12/31/2023

Presentation Title /Topic(s) teaching conference, M&M Journal Club, Grand Rounds

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CME FACULTY DISCLOSURE AND CONTENT VALIDATION

Name Elisa Taffe

Your role in the CME Activity: Presenter Author Planning Committee Moderator Program Director

Activity Title

Activity Date 1/1/2023 - 12/31/2023

Presentation Title /Topic(s) teaching conference, M&M, Journal Club, Grand Rounds

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	Affiliation/Financial Interest	Name of Commercial Interest
1	Grant/Research Support	
2	Consultant	
3	Speaker's bureau	
4	Stockholder or other ownership interest	
5	Board membership	
6	Other financial or material support	<u>Expert witness for legal cases</u>

Yes No I plan to discuss off-label uses of products and/or medical devices in my lecture. If yes, please explain.

Yes No I plan to discuss unpublished research data in my lecture. If yes, please explain.

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Please return the completed form to ashley.knoch@ahn.org or bernice.sulkowski@ahn.org

CME FACULTY DISCLOSURE AND CONTENT VALIDATION

Name Masaki Tsukashita

Your role in the CME Activity: Presenter Author Planning Committee Moderator Program Director

Activity Title

Activity Date 1/1/2023-12/31/2023

Presentation Title /Topic(s) teaching conference, M&M, Journal Club, Grand Rounds.

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Signature  Date 12/20/22

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CME FACULTY DISCLOSURE AND CONTENT VALIDATION

Name Whitney Taylor

Your role in the CME Activity: Presenter Author Planning Committee Moderator Program Director

Activity Title Bedford Springs Cardiovascular Conference Activity Date 10/06/23

Presentation Title /Topic(s) The ISCHEMIA Study Impact on Coronary Surgery

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Attestation I attest that any relationships/affiliations will not bias or otherwise influence my involvement in the activity.

Whitney Taylor
Signature

08/22/23
Date

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