

Tufts Medicine System-Wide Policy	Title: Tufts Medicine Conflict of Interest Policy
Issuing Department: Compliance and Internal Audit	Effective Date: March 26, 2026 Date Last Reviewed: March 10, 2026 Next Review Date: March 26, 2027

I. Introduction & Purpose

Tufts Medicine is committed to conducting its affairs in accordance with the highest ethical and legal standards. The purpose of this policy is to identify, manage and/or mitigate Conflicts of Interest (COI) for individuals as well as for Tufts Medicine.

[Part A](#) of the policy describes basic COI principles applicable to the entire Tufts Medicine community (Corporate Conflict of Interest Requirements).

[Part B](#) sets forth the COI requirements that apply to those who participate in research (Research Conflict of Interest Requirements). For these individuals, to the extent that any provision in Part A conflicts with a separate provision in Part B, the more stringent requirement applies (please reach out to the Tufts Medicine Compliance Department with any questions).

Part A Tufts Medicine Corporate Conflict of Interest Requirements

II. Policy Summary

Tufts Medicine Covered Persons, as defined Section IV below, must (1) avoid Conflicts of Interest, and (2) disclose any potential Conflicts of Interest as required in this policy.

Many conflict and potential conflict situations can be managed, but that can only occur when the applicable supervisory personnel and the departments responsible for managing conflicts are aware of the relevant facts. This requires **transparency**, which is the core principle of this policy.

The policy sets forth requirements including with respect to the following:

- [Gifts](#) (Section V.A)
- [Tickets](#) (Section V.B)
- [Meals](#) (Section V.F)
- [Charitable Contributions](#) (Section V.G)
- [Board Participation](#) (Section V.H)
- [Personal Business Opportunities](#) (Section V.I)
- [Consulting and Speaking Engagements](#) (Section V.J)
- [Continuing Medical Education](#) (Section V.K)

The policy additionally describes how Conflicts of Interest and perceived Conflicts of Interest are to be disclosed, reviewed, and managed.

III. Applicability

This policy applies across Tufts Medicine, including Lowell General Hospital, MelroseWakefield Healthcare, Tufts Medicine Care at Home, Tufts Medical Center, Tufts Medicine Integrated Network (for Tufts Medicine-employed individuals), Tufts Medicine's physician organizations, and other Tufts Medicine affiliates.

IV. Definitions

- A. Clinical Vendor** – Any pharmaceutical, medical device, biotechnology, clinical service, medical supply, or healthcare equipment company that provides or is seeking to provide goods or services to Tufts Medicine. Clinical Vendors acting in the research context are considered Clinical Vendors with respect to the requirements of this policy.

There may be instances in which it is challenging to categorize, for conflict-of-interest purposes, whether an outside organization is functioning as (1) a Clinical Vendor, (2) a Non-clinical Vendor or (3) another type of entity for which the provisions of this policy may not be as clearly applicable or relevant. In these instances, please consult with the Compliance Department regarding whether and how this policy will apply to the outside organization.

- B. Conflict of Interest** – Any instance in which a Covered Person's personal activities or personal interests conflict with the activities or interests of Tufts Medicine. These circumstances may include outside work and outside financial interests, as well as ownership or other interests of a Covered Person or an Immediate Family Member. Conflicts can be perceived or actual.

An **actual Conflict of Interest** exists when a personal interest may result in improper **influence** over the activities of a Covered Person.

A **perceived Conflict of Interest** exists when it could be perceived, or appears, that personal interests could improperly influence the performance of duties, whether or not that is, in fact, the case.

Both actual and perceived conflicts of interest must be identified and, if needed, managed or avoided.

- C. Covered Person** – Employees of any Tufts Medicine entity (including physicians and other clinicians), board members (of any Tufts Medicine entity), board committee members (of any Tufts Medicine entity), contractors, temporary employees, volunteers, visiting scientists, and students (including but not limited to medical, dental, nurse, and physician assistant students), regardless of where work is performed.
- D. Gift** – Anything of value that is received by a Covered Person for which the Covered Person did not pay fair market value. Gifts include pens, pads of paper, mugs, books, calendars, travel, meals, and entertainment (such as tickets to sporting events).
- E. Immediate Family Member** - Spouse, domestic partner, parent, grandparent, child, sibling, in-law or step relation, or any other person residing with the Covered Person.
- F. Non-clinical Vendor** – All vendors that are not Clinical Vendors, as defined in this policy (e.g., law firms, accounting firms, and consultants not providing healthcare services).

G. Research – when “research” is referenced in Part A, that term, consistent with Part B, means a systematic investigation designed to develop or contribute to generalizable knowledge. The term encompasses basic and applied research and product development.

V. Specific Activities

A. Gifts.

To avoid (1) the risk of conscious or subconscious bias in decision-making, (2) potential fraud and abuse, and (3) conflict-of-interest concerns, Covered Persons may only give or accept Gifts in limited circumstances. The sections below describe when Covered Persons may and may not give or receive Gifts.

1. Restriction Applicable to all Gifts (no cash)

Gifts in the form of cash or cash equivalents, such as gifts cards and gift certificates are prohibited.

2. Vendor Gifts

A. Gifts from Clinical Vendor:

A Covered Person **may not** accept a gift from a Clinical Vendor.

B. Gifts from Non-clinical Vendors:

A Covered Person **may** accept a Gift from a Non-clinical Vendor under the following circumstances:

- The Gift, as noted above, is non-monetary. That is, it is not cash or a cash equivalent, such as gifts cards and gift certificates;
- The Gift is (1) a food item or beverage item, or (2) a small item such as a pen, pad of paper, mug, book, or calendar; and
- It has a value of \$25 or less (nominal value). All Gifts received from the same person or entity may not exceed \$100 annually.
- **Return & reporting over items over \$25:** Non-monetary Gifts valued at more than \$25 should be reported to your supervisor. These items should be returned to the giver with a letter explaining our policy. The Compliance Department can assist you with the letter. If it is not practical to return the Gifts (e.g., flowers, unwrapped food, or other perishable items), then the items should be placed in a public Tufts Medicine area where other employees may also enjoy them.

C. No Gifts during vendor purchasing-decision or request-for-proposal (RFP) processes

During any period of time when Tufts Medicine is considering which vendor to engage to provide products or services to the organization, a Covered Person **may not** accept a Gift from any vendor involved in that process or consideration.

3. Specific Gift types and scenarios

A. Employee-to-employee Gifts

Employee-to-employee Gifts are permitted:

- If none of the funds come directly or indirectly from Tufts Medicine, and
- The Gifts align with the general guidance from our Code of Conduct that “[w]hile we wish to avoid any strict rules, no one should ever feel compelled to give a gift to anyone, and any gifts offered or received should be appropriate to the circumstances. A lavish gift to anyone in a management role would clearly violate organization policy.”

B. Tickets

Free or subsidized tickets to sporting events, concert performances, plays, and other forms of entertainment:

- From a **Clinical Vendor** are not permitted.
- From a **Non-Clinical Vendor** are permitted under the following circumstances:
 - The Covered Person obtains **pre-approval** from (1) the Covered Person’s supervisor if an employee, or (2) the Compliance Department if the Covered Person is a non-employee to whom this policy becomes applicable (e.g., temporary worker or contractor).
 - The reasonable fair market value is \$150 or under. For tickets valued over \$150, the recipient may seek guidance from the Compliance Department, which may, in rare cases, grant an exception.
 - The Non-clinical Vendor must be present for the event; and
 - A business topic needs to be discussed (i.e., the event is not purely entertainment or recreational). The Non-clinical Vendor may, for example, provide training content or discuss the products or services provided to Tufts Medicine.
 - **Vendor selection:** In addition, as noted above, during any period of time when Tufts Medicine is considering which vendor to engage to provide products or services to the organization, a Covered Person may not accept a free or subsidized ticket from any Vendor involved in that process or consideration.

C. Gift from a patient or patient family member

Patients may wish to present a Covered Person with a gift as a token of their appreciation. While these gestures are often made with the best intentions, it’s essential to ensure that we avoid situations that could create, or appear to create, Conflicts of Interest, or raise potential fraud and abuse concerns. For this reason, Covered Person may not accept a gift from a patient or a member of a patient’s family. These items should be returned to the giver with a letter explaining our policy. The Compliance Department can assist you with the letter.

As with Non-clinical vendor gifts, if it is not practical to return a Gift (e.g., flowers, unwrapped food, or other perishable items), then the item should be placed in a public area where other employees may also enjoy them. In these situations, the recipient may also consult with the Compliance Department on how to appropriately proceed.

If appropriate to the circumstances, see also Section V.G below for guidance regarding Charitable Contributions.

D. Referral sources

Gifts may not be provided to referral sources, except as permitted by applicable law and approved by the Legal Department.

E. Sample medications

With respect to sample medications:

- Covered Persons may not accept sample medications for **personal use**.
- If the applicable policies and guidance provided by the Tufts Medicine Pharmacy Department are followed, Covered Persons may accept sample medications for **patient use**.

In all circumstances, no Tufts Medicine entity or Covered Person may seek payment or reimbursement for the sample medication or its administration.

F. Meals

This section describes when Covered Persons may and may not provide or accept meals. Note: in the circumstances where it is not appropriate to accept a meal (see below), it may be reasonable for the Covered Person to pay their own way; Covered Persons may consult with their supervisors or the Compliance Department for guidance.

1. Meals provided or funded by Vendors

A. Clinical Vendor:

A Covered Person **may not** accept a meal that is provided or funded by a Clinical Vendor, with the single exception for off-campus CME described at Section V.K.2.

B. Non-clinical Vendors:

A Covered Person may accept a meal from a Non-clinical Vendor under the following circumstances:

- The reasonable market value of the meal is \$150 or under. For meals valued over \$150, the recipient may seek guidance from the Compliance Department, which may, in rare cases, grant an exception.
- The Non-clinical Vendor must be present. Takeout meals or meals to be eaten without a Vendor present (such as “dine and dash” programs) are not permitted.
- A business topic needs to be discussed (i.e., the event is not purely entertainment or recreational). The Non-clinical Vendor may, for example, provide training content or discuss the products or services provided to Tufts Medicine; and

- The meal is not provided on Tufts Medicine premises. The Compliance Department may, in rare cases, grant an exception to this location requirement.
- **Vendor selection:** In addition, as noted with respect to Gifts above, during any period of time when Tufts Medicine is considering which vendor to engage to provide products or services to the organization, a Covered Person may not accept a meal from any Vendor involved in that process or consideration.

With respect to Vendor meals at CME or professional society events, see Section V.K.2.

C. Social events and vendor funding:

Social events, such as departmental holiday parties, should not be sponsored by Clinical or Non-clinical Vendors, even if the event is open to all employees in the department or work unit. The Compliance Department may, in rare cases, grant an exception to this provision.

D. Referral sources

Meals may not be provided to referral sources, except as permitted by applicable law and approved by the Legal Department.

G. Charitable Contributions

This section provides guidance regarding charitable contributions.

1. All Charitable Contributions.

Charitable contributions to Tufts Medicine do not influence clinical decision-making, access to care, or services.

2. Monetary Contributions

If an individual (e.g., a patient or a patient's family member) wishes to make a monetary charitable contribution to Tufts Medicine, the contribution should be coordinated through the Tufts Medicine Development Office. Donors may designate their contribution to benefit a specific Tufts Medicine entity, program, or fund; all designations will be honored.

3. In-Kind Contributions

- Donations of physical items intended for patient benefit (such as infant formula, glucometers, or comfort items) and non-patient-facing items (e.g., equipment, services, supplies) must be coordinated with the Development Office before acceptance.
- Employees are not permitted to solicit in-kind donations from Vendors.
- The Development Office will consult with the Tufts Medicine Supply Chain Department, as needed, regarding the need and appropriateness of the item. Tufts Medicine may, in its sole discretion, determine that a proposed in-kind gift should be declined if it does not

align with institutional needs or requirements.

4. Vendor Charitable Contributions

- If a Vendor (Clinical or Non-Clinical) wishes to make a charitable contribution to Tufts Medicine, the contribution must be coordinated with the Development Office.
- The Development Office will consult with the Legal Department to review the proposed contribution and ensure regulatory compliance.
- Vendor charitable contributions may not be conditioned on purchasing, referral, or contracting decisions.

5. Charitable contribution intended to support Tufts Medicine research or research departments

Contributions intended to support research and/or education or designated for a clinical or research institute or clinical department engaging in research (including educational or unrestricted departmental funds) require coordination with the appropriate Department Chair/Institute Director, the Office of the Vice President of Research Administration, and the Development Office to ensure proper review, approval, and compliance with institutional policies.

A Covered Person cannot contribute to (1) the Covered Person's own research program or the research program of an Immediate Family Member, or (2) projects in which the Covered Person or an Immediate Family Member is involved. This restriction does not prohibit a Covered Person from making a charitable contribution to Tufts Medicine that is deposited into a general institutional fund or other fund over which the Covered Person has no control, oversight, or involvement in the use of the funds.

6. Clinical Study Sponsor-Provided Equipment

There may be instances in which a clinical study sponsor provides a piece of equipment or electronics and then indicates at the end of the study that the item does not need to be returned. If this occurs, study personnel should contact the Office of the Vice President of Research Administration and the Compliance Department, who will coordinate and provide guidance.

7. Review and Acceptance of Charitable Contributions

All charitable contributions, monetary or in-kind, will be reviewed and accepted in accordance with Tufts Medicine policies.

H. Board Participation By A Covered Person (Tufts Medicine Employees)

When a Covered Person who is a Tufts Medicine employee accepts an appointment as a board member or board committee member of another, outside company or organization, the Covered Person may be taking on a fiduciary duty to act in the best interests of that organization.

Outside board participation must be disclosed to, and approved by, the Covered Person's supervisor and reported to the Compliance Department (for those who participate in the annual Conflict of Interest disclosure process, the reporting may be done through this process—see Section VII.B).

If an individual receives compensation for serving as an officer or a board member of another company or organization, this compensation arrangement must be reviewed and approved in advance by the Tufts Medicine Legal Department.

I. Personal Business Opportunities

This section addresses the procedures that apply when a Covered Person seeks to pursue an outside, personal (non-Tufts Medicine) business opportunity.

1. Tufts Medicine Covered Persons (Tufts Medicine Employees)

A Covered Person who is a Tufts Medicine employee may take advantage of a personal business opportunity that may be of interest to, competitive with, or impact the interests of Tufts Medicine only if the conditions below are met:

- The Covered Person discloses the opportunity to the employee's supervisor and to the Compliance Department (if the Covered Person is a non-employee to whom this policy becomes applicable, the disclosure to the Compliance Department is sufficient);
- Both the Covered Person's supervisor and the Compliance Department approve of the Covered Person pursuing the opportunity (the Compliance Department may approve if the Covered Person is a non-employee to whom this policy becomes applicable);
- The Covered Person adheres to any conditions implemented to manage any conflict considerations; and
- The Covered Person has not and does not impermissibly share any Tufts Medicine confidential or proprietary information with any third parties.

In addition to the requirements above, a Covered Person should additionally adhere to all Tufts Medicine policies, including, as applicable, the Vendor Contracts Policy.

2. Tufts Medicine Board and Board Committee Members (Non-employees)

This section addresses personal business opportunities for Tufts Medicine and Tufts Medicine entity Board Members and Board Committee Members who are not Tufts Medicine employees. These individuals may take advantage of an outside, personal business opportunity that may be of interest to, competitive with, or impact the interests of Tufts Medicine (e.g., when Tufts Medicine is considering whether to purchase goods or services and the Board or Board Committee Member has a relationship with the vendor) only if the conditions below are met:

- There is full disclosure of the opportunity to the Member's Board or Board Committee Chairperson, as applicable, and the Compliance Department;
- Both the relevant Board or Board Committee (see below) and the Compliance Department approve of the Board or Board Committee Member pursuing the

opportunity.

If the individual is a Tufts Medicine Board Member or Tufts Medicine Board Committee Member, the Tufts Medicine Board must approve. If the individual is a Board Member or Board Committee Member of a Tufts Medicine entity, (e.g., a hospital Board Member), the Tufts Medicine Governance & Nominating Committee must approve.

To approve, a majority of the non-interested Board or Board Committee Members must determine that it is appropriate for the Board or Board Committee Member to proceed with the opportunity (with the Board or Board Committee Member recusing).

The reviewing Board or Board Committee should consider, among other things, whether: (1) Tufts Medicine has a present or potential future interest in availing itself of the proposed opportunity, (2) the terms of the proposed opportunity are fair, reasonable, and competitive, and (3) allowing the opportunity to proceed is in the best interest of Tufts Medicine.

- The Board or Board Committee Member adheres to any conditions implemented to manage any conflict considerations; and
- The Board or Board Committee Member has not and does not impermissibly share any Tufts Medicine confidential or proprietary information with any third parties.

J. Consulting and Speaking Engagements (Tufts Medicine Employees)

This Section V.J applies to Tufts Medicine employees. For Board Members and Board Committee Members who are not also Tufts Medicine employees, see Section V.I.2.

1. Consulting engagements: disclosure and approval over \$5,000

If a Covered Person participates in an outside, personal consulting engagement, the Covered Person must follow the requirements below:

- Adhere to the requirements of this policy;
- Obtain the review and pre-approval of the Legal Department where the anticipated compensation is \$5,000 or greater from any single source in a calendar year.
 - Below the \$5,000 threshold, Covered Persons are encouraged to consult with the Legal Department to ensure that Tufts Medicine's and the Covered Person's interests are protected, e.g., with respect to intellectual property considerations.
- Disclose compensation of \$5,000 or greater from any single source in the most recent calendar year. Disclosure should be made to the Compliance Department at compliance@tuftsmedicine.org. Those who participate in the Annual Disclosure process discussed at Section VII.B may use that process to make their disclosure.

Consulting on CME Development: This section applies to consulting engagements related to the development of CME. See Section V.K below for the requirements related to speaking at CMEs.

Research Participants: This section does not apply to those who participate in research; Covered

Persons who participate in research should review Part B (Research Conflict of Interest Requirements) regarding consulting relationships.

2. Speaking engagements: disclosure and approval

A Covered Person may participate in outside speaking engagements under the circumstances below. For speaking at CME events, see Section V.K below.

- **Industry Sponsorships (Clinical Vendors)**
 - If a Covered Person proposes to be paid for speaking at an event sponsored by a Clinical Vendor (sometimes referred to as an “industry-sponsored” event) and the event is not a Continuing Medical Education (CME) event, the Covered Person must follow the requirements set out at Appendix 4, including filling out the form at Appendix 5.
 - This requirement applies to all Covered Persons, including those who participate in research.
- **Direct Costs and Speaking (All Vendors):**
 - A Vendor is not permitted to pay for or reimburse Covered Persons for the direct costs (including attendance fees, travel and lodging expenses) of attending a professional conference or other vendor-sponsored event unless the Covered Person is a speaker.
 - This requirement applies to all Covered Persons, including those who participate in research, and to both Clinical Vendors and Non-clinical Vendors.

K. Continuing Medical Education Activities & Speaking at CME Events

Vendor support for educational activities helps further Tufts Medicine’s ability to carry out its educational mission. However, these situations must be carefully managed to ensure that such support does not introduce bias into the educational content. The following requirements apply to proposed Continuing Medical Education (CME) offerings.

1. Tufts Medicine-sponsored CME (on-campus) events

All CME events held at a Tufts Medicine location or sponsored by Tufts Medicine must fully comply with the standards set forth by the Accreditation Council on Continuing Medical Education (“ACCME”), whether or not Continuing Medical Education (“CME”) credit is awarded.

Vendor support for CME activities must be made to the appropriate clinical department. The Department Chair will determine the suitability of the Vendor support, receive and account for the monetary support, and distribute funds for CME–certified activities and programs through a central repository. Full documentation, including a signed commercial support agreement reviewed by the Legal Department, is required.

2. Non-Tufts-Medicine-sponsored (Off-Campus) events

Vendor support of off-campus CME, third-party educational conferences, or professional meetings (together “Non-Tufts Medicine Events”), in whole or in part, can benefit the health of the public by ensuring that current, evidence-based medical information is provided to healthcare

practitioners. In order to ensure that potential for bias is minimized and that Non-Tufts Medicine Events are not a guise for sales and/or marketing activities, all Non-Tufts Medicine Events in which Covered Persons attend or participate must conform to the following guidelines, as determined by the Covered Person's Department Chair, supervisor (for a Covered Person who does not report up to a Chair), or Compliance Department (for non-employee Covered Persons):

- A.** If a Vendor provides funding to support a Covered Person's attendance at a Non-Tufts Medicine Event, the attendee(s) must be determined and approved by the relevant Tufts Medicine Department Chair or Division Chief (or other Supervisor), and may not be limited to attendees selected by Vendor sponsor(s);
- B. Payment or Reimbursement of Costs:** As noted above, a Vendor is not permitted to pay for or reimburse Covered Persons for the direct costs (including attendance fees, travel and lodging expenses) of attending a professional conference or other vendor-sponsored events unless the Covered Person is a speaker.
- C. Speaking at a CME Event:**
 - i. A Covered Person's presentation materials for a CME may not be subject to a Vendor's influence or control over the content, tone, or views presented.
 - ii. As noted in (B) immediately above, if a Covered Person attends a CME event, a Vendor is not permitted to pay for or reimburse the Covered Person for the direct costs (including attendance fees, travel and lodging expenses) of attending the CME unless the Covered Person is a speaker.
 - iii. Speaking at a CME event is not subject to the disclosure requirements of this policy.

For guidance regarding industry-sponsored speaking engagements that are not associated with a CME, see Appendix 4 and Appendix 5.

- D. Meals at CME or professional society events:** Meals offered by a professional society or continuing medical education (CME) provider or other professional conference or meeting organizer during the course of a CME event or other professional conference or meeting are permissible if the meals offered by the event organizer/CME provider are offered across the board to all participants out of the event budget at the discretion of the organizer.

With respect to meals at a professional society or CME event that are provided or funded by **Clinical and Non-Clinical Vendors**, a Covered Person may accept a meal if:

- (1) the meal is offered at the event location;
- (2) the meal is offered across the board to all participants;
- (3) the value of the meal is modest by local standards and not part of an entertainment or recreational event; and
- (4) if it is a CME event, CME credit is awarded at the event in alignment with the standards set forth by the Accreditation Council on Continuing Medical Education ("ACCME").

VI. Conflict of Commitment

A conflict of commitment occurs when an individual's outside activities adversely affect that person's ability to meet Tufts Medicine responsibilities (e.g., there is a perceptible reduction in the time and energy devoted to Tufts Medicine activities).

Conflicts of Commitment are prohibited.

A Covered Person who is a Tufts Medicine employee may not accept full-time salaried employment at another entity while employed full-time by Tufts Medicine without approval of the Covered Person's supervisor and the Compliance Department.

In all individual cases, the appropriate Department Chair, Division Chief, Institute Director, or supervisor may determine whether external activities constitute a prohibited Conflict of Commitment and, if so, may not allow the Covered Person to participate in the activity on that basis. Conflicts of Commitment determinations may also be subject to further review by the Compliance Department.

Potential Conflict of Commitment scenarios in the research federal effort-reporting context should be reviewed with the Office of the Vice President of Research Administration.

VII. Conflict of Interest Program

A. Program Administration

The Tufts Medicine Compliance Department administers this policy and the related Conflict of Interest controls.

B. Annual Disclosure

Annually, Tufts Medicine Leaders, who include Board Members, Board Committee Members, officers, senior management, and physician leaders are required to make conflict-of-interest disclosures (see Appendix 1). All submissions are made via the conflict-of-interest tool maintained by the Compliance Department.

C. Ongoing Obligation to Disclose (during the year)

During the year (between annual disclosures), Tufts Medicine Leaders are required to submit an updated disclosure to the Compliance Department if there is a material change with respect to the information provided in the annual disclosure. For example, if a Covered Person serves on an outside entity's Board and the outside entity changes its business strategy such that it will soon become a direct Tufts Medicine competitor, that is a material change that should be disclosed. Send updated disclosures to the Compliance Department at compliance@tuftsmedicine.org.

D. Review of Disclosures

The Compliance Department will review the annual and updated disclosures in a manner that considers the totality of the facts and circumstances.

E. Management of Conflicts

If the Compliance Department determines that management of a Conflict of Interest is required, the Compliance Department will prepare a management plan. In preparing the plan, the Compliance Department will, as needed, consult with the Legal Department and the individual's

supervisor.

The following are examples of standard conditions or restrictions that may be put in place to manage a conflict:

- **Recusal:** The Covered Person may be directed to not participate in certain Tufts Medicine decisions and management activities.
- **Confidentiality:** The Covered Person may be instructed to not share any confidential Tufts Medicine information with an outside entity and to not share any confidential information of the outside entity with Tufts Medicine.

F. Conflicts that cannot be effectively managed

There may be situations where the Compliance Department determines that a management plan cannot effectively address a Conflict of Interest. In these instances, the Covered Person may be required to eliminate the conflict, such as by not proceeding with a proposed activity.

Factors in this decision may include the nature and significance of the conflict, the potential for having an adverse impact on the business or reputation of Tufts Medicine, and/or the level of difficulty involved in managing the conflict.

G. Potential violations of the policy

The Compliance Department will investigate potential violations of this policy, and will, as appropriate, coordinate with a Covered Person’s supervisor, Department Chair, Operational Leader, or the Tufts Medicine Legal Department.

H. Review of federal and state website resources

As part of the conflict-of-interest review process and to support transparency and policy compliance, the Compliance Department may review federal and state websites, such as the CMS Open Payments database, which documents payments from Clinical Vendors to healthcare providers.

I. Exceptions

The Compliance Department may, after review and consideration, grant exceptions to this policy. Requests for exceptions may be emailed to compliance@tuftsmedicine.org and should include a description of the relevant circumstances and basis for the requested exception.

Part A Related Documents & Policies

Tufts Medicine Code of Conduct Policy
Tufts Medicine Vendor Contracts Policy

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Part B Tufts Medicine Research Conflict of Interest Requirements

I. Introduction

As a health system dedicated to excellence in patient care, research and training, Tufts Medicine places a high value on research integrity and academic freedom. Objectivity in the conduct of research, the freedom to disseminate ideas through publication of research results, the protection of the rights and interests of research subjects, maintenance of public trust, and the ability to ensure that the conduct of research at Tufts Medicine is not compromised are critical to these institutional values. Relationships with industry and other outside entities, while important to the support and advancement of research, can present special challenges in protecting these organizational values.

In the context of conducting research, the primary interest of a researcher should be the objective conduct of the research. The researcher, Tufts Medicine, and the public also share an interest in the complete, objective and timely communication of research results. While Tufts Medicine expects that all of its investigators and other research staff should carry out their professional responsibilities with the highest standards of personal integrity, it is necessary to acknowledge and to avoid or manage situations where a secondary interest could reasonably be expected by others to influence decision-making.

To say that one has a conflict of interest (COI) does not necessarily mean that the individual involved acted or is expected to act inappropriately. It is the existence of the competing interests that creates the initial COI concern.

COI can be defined as a situation in which an investigator's external interests undermine, appear to undermine, or have the potential to undermine the investigator's ability to perform his or her ethical, legal, or professional duties. The potential for personal gain or the existence of competing interests must not jeopardize or appear to jeopardize the integrity of the research, its design, or the interpretation or reporting of research results.

II. Scope of Policy

This policy applies to all investigators employed by Tufts Medicine (including all employed physicians) and other individuals — such as researchers, postdoctoral fellows and visiting researchers — who are responsible for the design, conduct or reporting of research at Tufts Medicine. This includes those individuals defined as an “investigator” below.

III. Statement of Policy

Investigators with active Public Health Service (PHS) funding are subject to the PHS COI policy and must disclose all Significant Financial Interests (SFI) (as defined below) held by themselves, their spouse/domestic partner or their dependent child(ren) on an annual basis.

This information must be updated within 30 days of any change. Investigators not subject to PHS funding regulations must update their disclosure(s) within 90 days of any change.

All investigators must disclose SFI on an annual basis and for each application and/or new award either certify that there is not a change to their disclosure or update their disclosure in eRES. A protocol-specific disclosure is required for all study team members with each submission to the eIRB.

It is the responsibility of the Principal Investigator (PI) to ensure that each Investigator working under their direction on a research project or receiving support from their grant or contract is aware of this policy and discloses SFI as required by this policy.

In addition to the need to disclose COI in research to Tufts Medicine and, as necessary, to funding agencies, it is also important that such conflicts be disclosed to others who might be affected by the research. This includes, for example, human subjects, other researchers, and other learners who might rely on the research results, and the public. For studies involving human subjects, the informed consent form must disclose the nature of the conflict to potential research subjects, if required by the Conflict of Interest in Research Committee (COIRC). It is also expected that all researchers will disclose COI related to specific research projects at any time that the results of that research are presented or published.

Conflict of Interest Terms

In [42 CFR § 50.603](#), PHS's codification of its policies, the terms are defined as follows:

Institutional Responsibility: An Investigator's professional responsibilities on behalf of the Institution, which may include for example: activities such as research, research consultation, teaching, professional practice, institutional committee memberships, and serving on panels such as the IRB or Data and Safety Monitoring Boards (DSMB).

Investigator: The PI, and any other person, who is responsible for the design, conduct, or reporting of research funded by the agency or proposed for such funding. This includes all those identified as Key Personnel by the institution in the grant application, progress report, or any other report submitted to the funding entity by the institution.

PHS: The Public Health Service of the U.S. Department of Health and Human Services, and any components of the PHS to which the authority involved may be delegated, including the National Institutes of Health (NIH).

PHS Awarding Component: The organizational unit of the PHS that funds the research that is subject to this subpart.

Research: A systematic investigation designed to develop or contribute to generalizable knowledge. The term encompasses basic and applied research and product development.

Significant Financial Interest (SFI):

1. A financial interest consisting of one or more of the following interests of the Investigator (and those of the Investigator's spouse/domestic partner and dependent child(ren)) that reasonably appears to be related to the Investigator's

Institutional Responsibilities:

- a) With regard to any publicly traded entity, an SFI exists if the value of any remuneration received from the entity in the twelve months preceding the disclosure and the value of any equity interest in the entity as of the date of disclosure, when aggregated, exceeds \$5,000. For purposes of this definition, remuneration includes salary and any payment for services not otherwise identified as salary (e.g., consulting fees, honoraria, paid authorship); equity interest includes any stock, stock option, or other ownership interest, as determined through reference to public prices or other reasonable measures of fair market value;
 - b) With regard to any non-publicly traded entity, a significant financial interest exists if the value of any remuneration received from the entity in the twelve months preceding the disclosure, when aggregated, exceeds \$5,000, or when the Investigator (or the Investigator's spouse/domestic partners and/or dependent child(ren)) holds any equity interest (e.g., stock, stock option, or other ownership interest) even if values at zero dollars; or
 - c) Intellectual property rights and interests (e.g., patents, copyrights), upon receipt of income related to such rights and interests.
2. Investigators subject to the PHS policy (those listed as Key personnel on a PHS funded project) also must disclose the occurrence of any reimbursed or sponsored travel received from the entity in the twelve months preceding the disclosure (i.e., that which is paid on behalf of the Investigator and not reimbursed to the Investigator so that the exact monetary value may not be readily available), that exceeds \$5,000 from a single entity and is related to their Institutional Responsibilities. This disclosure requirement does not apply to travel that is reimbursed or sponsored by a Federal, state, or local government agency, an Institution of higher education as defined at 20 U.S.C. 1001(a), an academic teaching hospital, a medical center, or a research institute that is affiliated with an Institution of higher education.
 3. The term significant financial interest does not include the following types of financial interests: salary, royalties, or other remuneration paid by the Institution (i.e., the relevant Tufts Medicine entity conducting research) to the Investigator if the Investigator is currently employed or otherwise appointed by the Institution, including intellectual property rights assigned to the Institution and agreements to share in royalties related to such rights; income from investment vehicles, such as mutual funds and retirement accounts, as long as the Investigator does not directly control the investment decisions made in these vehicles*; income from seminars, lectures, or teaching engagements sponsored by a United States Federal, state, or local government agency, a United States Institution of higher education as defined at 20 U.S.C. 1001(a), a United States academic teaching hospital, medical center, or research institute that is affiliated with a United States Institution of higher education; or income from service on advisory committees or review panels for a United States Federal, state, or local government agency, a United States Institution of higher education as defined at 20 U.S.C. 1001(a), a United States academic teaching hospital, medical center, or research institute that is

affiliated with a United States Institution of higher education.

*With regard to investment vehicles, “does not directly control” means that the investigator has no decision-making power with respect to the investment vehicle, including what the investment vehicle includes or how it is managed.

IV. Specific Activities

1. Categories of COI in Research

Because the appropriate approach to each situation depends on its specific facts, this policy does not contain an exhaustive list of fixed rules regarding COIs in research. For example, several external interests taken together, any one of which might be permitted, could amount to a COI in research. Further, individuals who seek funding from, or who work on, a research project funded by an external sponsor must comply not only with this policy but also with that sponsor’s requirements, if any, related to disclosure, management, and avoidance of COIs.

2. Typical Relationships

Appendix 2 is intended to provide guidance to the Tufts Medicine research community in structuring relationships with industry, although it is not an exhaustive list of all relationships with industry. Even if a proposed relationship is addressed in Appendix 2 investigators are required to abide by the disclosure and review process for potential conflicts laid out in this policy. If you are unsure about the need to disclose a financial interest, you are advised to disclose it so that it can be reviewed.

3. Activities Not Ordinarily Reportable

Except as otherwise indicated in this policy, activities of the following types generally need not be disclosed:

- a) An individual receives royalties for published scholarly works and other writings.
- b) An individual receives payments under the applicable Tufts Medicine entity intellectual property policy (although such payments should be disclosed to human subjects, if applicable). Note: if the applicable Tufts Medicine entity does not have an intellectual property policy, the Tufts Medical Center intellectual property policy should be followed.
- c) In situations, such as investment funds, where the holder’s equity is managed by someone else without the holder knowing or being able to influence the identity of companies in the portfolio at any given time (e.g., mutual funds), no disclosure is required.

4. Publication

Tufts Medicine requires in all its contracts for support of research or education that the researchers be free to objectively analyze and publish all results of their work. Tufts Medicine may accept reasonable delays on publication (normally not to exceed 120 days) that allow for the protection of intellectual property, the deletion of confidential information provided by a research sponsor or for the completion of a

multi-site clinical trial.

5. Residents/Fellows

An important part of the training of house staff (e.g., residents and fellows) is mentored research. Tufts Medicine and Investigators who oversee research conducted by or involving house staff must ensure that the educational interests of these trainees are not compromised by institutional or individual COIs. Care must be taken to ensure that the source of research funding does not cause a change in the training experience. House staff should not be placed in a situation where publication will be unduly restricted or excessively delayed (any delay greater than 120 days will be considered excessive) or where the financial interests of the company or the mentor could influence the direction of the research project. House staff must be able to publicly present dissertations and theses and to publish their research.

6. Human Subjects

With each protocol involving Institutional Review Board (IRB) review, each Investigator must submit to the IRB a protocol-specific COI disclosure via the eIRB system. Forms that indicate a possible COI will be forwarded by the IRB to the Office of Research Administration and will be subject to the review and management procedure described under “Review and Management of Research COIs” below. IRB approval will not be granted until the disclosure is reviewed and a response is provided to the IRB. Tufts Medicine may prohibit research that involves a COI even if the IRB approves the research protocol.

In accordance with federal regulations governing human subject research, a study participant is to be fully informed of research-related risks before they consent to participate in research. Informed consent forms and procedures should include the disclosure of any COI that could reasonably appear to influence an investigator’s judgment in conducting the research.

Additionally, no IRB may have a member participate in the IRB’s initial or continuing review of any project in which the member has a conflicting interest, except to provide information requested by the IRB ([45 CFR 46.107\(e\)](#)).

7. Funding Where Intellectual Property Is Licensed/Co-owned, Privately-Held Companies

As a general matter, studies that are funded by external parties who have licensed intellectual property from Tufts Medicine, or who co-own intellectual property with Tufts Medicine, are not allowed. Exceptions may be granted in exceptional circumstances.

In situations where an Investigator obtains or owns equity in a privately-held company that relates to their research, it is especially important to be mindful of COIs and Conflicts of Commitment. Care should be taken to keep sight of what is the property of Tufts Medicine versus what belongs to the company. The Investigator should assure that time invested in the company does not exceed the amount of time allowed for outside activities under their employment agreement and does not compromise their ability to perform their regular duties and obligations to Tufts Medicine or to funding agencies. Tufts Medicine facilities and resources may not be used for the benefit of the company without a written agreement authorizing the use approved by the Tufts

Medicine Legal Department and the Office of Research Administration.

Investigators and staff who own equity in a privately-held company may not personally negotiate or attempt to influence the licensing terms that Tufts Medicine offers to that company. All investigators with equity in privately held companies will receive guidance from the Office of Research Administration similar to the letter in Appendix 3.

8. Small Business Innovation Research (SBIR)/Small Business Technology Transfer (STTR)

SBIR/STTR funding mechanisms may present additional concerns related to potential COI. Importantly, the PI for the small business SBIR/STTR and the PI for the subcontract at the relevant Tufts Medicine entity must be different individuals. Consult with the Officer of Research Administration if you have any questions.

All Tufts Medicine research projects involving an SBIR/STTR collaboration or involving a startup company, in which Tufts Medicine investigators working on the project hold equity interest in the company must be reviewed by the COIRC before the research project begins.

9. Regulations apply to subgrantees, collaborators of grantees (e.g. consortia) or subcontractors

If PHS-funded research is undertaken by a sub-recipient or subcontract, reasonable steps will be taken to assure that the sub-recipient is in compliance with the PHS policy. This can either be through certification by the sub-recipient as part of the written agreement that they have in place a COI policy that is in compliance with the PHS regulations or through requiring the sub-recipient key-personnel to comply with the Federal Demonstration Partnership COI Model policy. The written agreement with the sub-recipient must specify the time period for which the sub-recipient key personnel must report SFI.

V. Disclosure, Management and Enforcement of Conflicts of Interest in Research

1. Review and Management of Conflicts of Interest in Research

Review of disclosed SFI will be the responsibility of the Office of Research Administration.

In instances where the disclosed financial interest is minimal (less than \$5,000 per year and less than 5% equity ownership in a publicly traded company), the source of the financial interest is a not-for-profit organization, and/or the SFI is clearly not related to the research activity being performed, the VP of Research Administration may conduct an expedited review/approval.

Where there are questions or the SFI is a potential Financial Conflict of Interest (FCOI), the VP of Research Administration will review and propose a management plan with any relevant information regarding SFI and active research to the COIRC for review and approval by majority vote. The COIRC may accept the proposed management plan, amend the management plan, or decline to allow the proposed research to occur at Tufts Medicine if the FCOI remains as disclosed. If required by the COIRC an approved plan for management or elimination of the COI must be in place before the research begins and funds are drawn down. Sponsored research

agreements with non-federal research sponsors will not be signed until completion of the review by the COIRC unless the agreement can be made contingent on Tufts Medicine's ability to resolve the COI concerns.

2. Managing Conflicts

When an SFI is determined to be a potential COI, a management plan must be put in place and reviewed at least annually by the COIRC.

3. Appeal of Determination Made by Tufts Medicine COIRC

Decisions of the Tufts Medicine COIRC may be appealed to the Tufts Medicine President and CEO, or that's person's delegate, whose decision on these matters is final.

4. Tufts Medicine's Requirement to Report to PHS

Prior to the expenditure of any funds on a PHS-funded project with a reportable FCOI, the relevant Tufts Medicine entity will report all FCOI and management plans to the PHS according to requirements set forth by PHS regulations.

5. Public Disclosure

Upon written request, the following information will be provided for those investigators subject to the PHS policy:

- a) Name and role on the project of the person with the FCOI;
- b) The name of the entity in which the financial interest is held;
- c) The nature of the financial interest;
- d) The approximate value of the financial interest (in ranges); and
- e) Tufts Medicine approved management plan.

6. Failure to Disclose an SFI

Failure to disclose the existence of an SFI can result in disciplinary action or sanctions at the institutional level and involve restitution, criminal prosecution, or corrective action by the funding agency or Tufts Medicine.

If an SFI is found that has not been reported in a timely manner the Institution will, within 60 days, determine if the SFI is a FCOI and institute a management plan, if needed. For research subject to the PHS policy, within 120 days the Institution will perform a retrospective review of the Investigator's research activities to determine if any additional non-compliance needs to be documented.

Allowing a COI to influence one's judgment in the context of research may also constitute, or lead to, scientific misconduct.

7. Training

All investigators at Tufts Medicine will be required to undergo COI training through eRES at least once every four (4) years. In addition, training must be undertaken if any of the following occurs:

- a) the Institution revises this policy;
- b) when an investigator is new to the institution; or
- c) an Investigator is found to be not in compliance with this policy

8. Record Retention

The Office of Research Administration will retain records of all research financial disclosures electronically through the eRES system or eIRB systems and all actions taken by Tufts Medicine with respect to COI in research. Tufts Medicine is required to keep all records as follows:

- a) **For grants or cooperative agreements** – for at least three years from the date of submission of the final expenditures report or, where applicable, from other dates specified in [2 C.F.R. 200.234](#) for different situations.
- b) **For research contracts** – for three years after final payment or, where applicable, for the other time periods specified in [48 CFR Part 4.7.](#)

Part C Appendices and References

I. Appendices

Appendix 1 [Part A - Corporate]: Corporate Conflict of Interest Disclosure Form

Appendix 2 [Part B - Research]: Financial Interest and Conduct of Research Activities

Appendix 3 [Part B - Research]: Sample Guidance for Investigators with Salary/Role in Private/Startup Companies

Appendix 4 [Part B – Corporate and Research]: Industry-Sponsored Speaking Engagement Procedure

Appendix 5 [Corporate and Research] Proposed Outside Venture and Activity Evaluation Form

II. References: Part B - Research

42 CFR 50.603 Responsibility of Applicants for Promoting Objectivity in Research for which Public Health Service Funding is Sought and Responsible Prospective Contractors

46 CFR 46 Basic HHS Policy for Protection of Human Research Subjects

2 C.F.R. 200.234 Retention requirements for records

48 CFR part 4, subpart 4.7 Contractor Records Retention



Appendix 1: Corporate Conflict of Interest Disclosure Form

[For Paper Copy] Please sign, keep a copy for your records, and return to Tufts Medicine

I hereby affirm that I have received a copy of the Tufts Medicine Conflict of Interest Policy (“Policy”) requiring disclosure of certain interests, that I have read and understand the Policy, and that I agree to comply with its terms. In addition, I hereby affirm my understanding that Tufts Medicine (the “Corporation”) is a charitable organization and that, in order for it to maintain its federal tax exemption, it must engage primarily in activities that accomplish one or more of its tax-exempt purposes.

Consistent with the purposes and intentions of the Policy, I hereby state that I and my Immediate Family Members (spouse, domestic partner, parents, grandparents, children, siblings, in-laws or step relations, or any other persons residing with me) have the following affiliations or interests and have taken part in or are now taking part in the following transactions that, considered in conjunction with my position with or relation to the Corporation, may constitute a conflict of interest (state “none” where applicable and use the last page to add additional content as needed):

1. **Business Affiliations.** Please list below any affiliations you or any member of your immediate family has as a trustee, director, officer, partner, employee, consultant, agent, or advisor of any person, firm or organization that, to the best of your information and belief, is a supplier of goods or services to the Corporation, and briefly describe the type of goods or services so supplied. If none, please state “none”:

2. **Other Healthcare Affiliations.** Please list below the name and address of any healthcare company or facility that you or any member of your immediate family serves as a volunteer or paid director, trustee, officer, partner, employee, consultant, agent, or advisor and the capacity in which you or such member of your immediate family so serves. If none, please state “none”:

3. **Other Governance Activities.** In addition to the entities identified in (1) and (2) above (if any), please list below the name and address of any entities (except private trusts) that you or any member of your Immediate Family Member serves as an officer or member of the governing board. If none, please state “none”:

4. **Outside Interests:**
 - a. Please identify any interest or investment that you or any

member of your immediate family has that might be deemed a position of financial interest in any outside entity as follows: do you or a member of your immediate family hold, directly or indirectly, a financial interest in any outside company, organization or concern that you have reason to believe makes payments to or receives payments from the Corporation (whether on account of goods, loans or other transactions), or that provides services in competition with the Corporation. If none, please state "none":

- b. Please identify any purchase or sale of property or property right, interest or service, made or proposed to be made by you or any member of your immediate family, that might be deemed to have been made in competition with the Corporation. If none, please state "none":
- c. Please identify any business opportunity that you or your immediate family know or have reason to know may be of interest to or competitive with the Corporation. If none, please state "none":

5. Outside Activities:

- a. Please identify any instance in which you or any member of your immediate family has rendered, is rendering, or may render directive, managerial, or consultative services to any outside entity that does business with, or competes with, the services of the Corporation. If none, please state "none":
- b. Please identify any instance in which you or any member of your immediate family has rendered, is rendering, or may render any other services that might be deemed to be in competition with, or to the disadvantage of, the Corporation. If none, please state "none":

*Subsection 5.c (regarding outside consulting engagements) applies to **Tufts Medicine employees only**. For Tufts Medicine Board Members and Board Committee Members who are not also Tufts Medicine employees, please respond: "NA"*

- c. Please identify any personal, outside consulting engagements with compensation \$5,000 or greater from any single source in the most recent calendar year (if not already identified in this submission). If none, please state "none".

6. Gifts, Gratuities and Entertainment: I hereby certify that neither I nor any member of my immediate family has accepted, is accepting, or will accept any gift, gratuity, or entertainment that does not align with the requirements of the Tufts Medicine Conflict of Interest Policy, as more fully described in Sections IV-V of the Policy, from any outside entity that does, or is seeking to do business with or is a competitor of, the Corporation. If that may have occurred, please describe below for Compliance Department review and guidance. If none, please state “none”:

7. Inside Information: I hereby certify that neither I nor any member of my immediate family has disclosed or used, is disclosing or using, or will disclose or use information relating to the Corporation’s business that does not align with the requirements of the Tufts Medicine Conflict of Interest Policy or other Tufts Medicine policies. If there may have been such a disclosure or use, please describe below for Compliance Department review and guidance. If none, please state “none”:

8. Other: Please list any other activities in which you or any member of your immediate family is engaged that might be regarded as constituting a potential Conflict of Interest with the Corporation (if not already identified in this submission). If none, please state “none”:

9. Additional Content:

If you are involved in activities or have business relationships that do not appear to be addressed by the queries above, but for which you would like guidance, please include with this disclosure statement a description of the activities and relationships and your concerns.

I hereby agree to report promptly to the Tufts Medicine Chief Compliance Officer any situation or transaction that may arise during the forthcoming year that constitutes a Conflict of Interest or a potential Conflict of Interest. Submit reports to the Compliance Department email at compliance@tuftsmedicine.org.

Signature

Printed Name

Date

Appendix 2: Financial Interests and Conduct of Research Activities

The following table details what interests and activities should be disclosed, when management plans and chair approval are required, and what interests and activities are not permitted.

Activity	Allowable	Reportable	Management Plan Required?	Chief/Chair approval?	Not permissible
Consulting, Scientific Advisory Board, Honorarium or other non-salary compensation	Yes.	Must disclose compensation equal or greater than \$5,000 from a single funding source in the previous 12 months.	If deemed to be related to the research activity.	If deemed to be related to the research activity and disclosed compensation is equal or greater than \$25,000 from a single funding source in the previous 12 months.	If deemed to be related to the research activity and disclosed compensation is equal or greater than \$50,000 from a single funding source in the previous 12 months.
Equity and/or Stock Options in privately held company	Yes.	Must disclose equity interests of any value in the previous 12 months.	If deemed to be related to the research activity.	If deemed to be related to the research activity.	Reviewed by COIRC on a case by case basis.
Equity and/or Stock Options in publicly traded company	Yes.	Must disclose equity interests equal or greater than \$5,000 or equal or greater than 5% ownership in the previous 12 months.	If deemed to be related to the research activity.	If deemed to be related to the research activity and disclosed compensation is equal or greater than \$25,000 from a single funding source in the previous 12 months.	If deemed to be related to the research activity and disclosed compensation is equal or greater than \$50,000 from a single funding source in the previous 12 months.

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Salary, Employment, Officer Role, Board of Director, Trustee or other in privately held company	Yes,	Must disclose all compensation of any value in the previous 12 months.	If deemed to be related to the research activity. If deemed not directly related to research but related to institutional responsibilities, discloser will receive guidance letter. See Appendix 3.	If deemed to be related to the research activity.	Reviewed by COIRC on a case-by-case basis.
Salary, Employment, Officer Role, Board of Director, Trustee or other in public traded company	Yes.	Must disclose compensation equal or greater than \$5,000 from a single funding source in the previous 12 months	If deemed to be related to the research activity.	If deemed to be related to the research activity and disclosed compensation is equal or greater than \$25,000 from a single funding source in the previous 12 months.	If deemed to be related to the research activity and disclosed compensation is equal or greater than \$50,000 from a single funding source in the previous 12 months.
Speaking Engagements	Subject to approval per Speaking Engagement Procedure as described in Appendix 4	Must disclose all compensation of any value in the previous 12 months.	If deemed to be related to the research activity and disclosed compensation is equal or greater than \$5,000 from a single funding source in the previous 12 months.	If deemed to be related to the research activity and disclosed compensation is equal or greater than \$25,000 from a single funding source in the previous 12 months.	If deemed to be related to the research activity and disclosed compensation is equal or greater than \$50,000 from a single funding source in the previous 12 months.

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Reimbursement of travel expenses	Yes.	Must disclose compensation equal or greater than \$5,000 from a single funding source in the previous 12 months	If deemed to be related to the research activity and disclosed compensation is equal or greater than \$5,000 from a single funding source in the previous 12 months.	If deemed to be related to the research activity and disclosed compensation is equal or greater than \$25,000 from a single funding source in the previous 12 months.	If deemed to be related to the research activity and disclosed compensation is equal or greater than \$50,000 from a single funding source in the previous 12 months.
Intellectual Property (IP) Rights (License/Royalties paid directly to individual)	Yes.	Must disclose all compensation.	If deemed to be related to the research activity and disclosed compensation is equal or greater than \$5,000 from a single funding source in the previous 12 months.	If deemed to be related to the research activity and disclosed compensation is equal or greater than \$25,000 from a single funding source in the previous 12 months.	If deemed to be related to the research activity and disclosed compensation is equal or greater than \$50,000 from a single funding source in the previous 12 months.
Free trips enticements or other benefits unrelated to any academic (research or training) activity	No.	N/A	N/A	N/A	N/A
Bonus for enrollment / recruitment of research subject	No.	N/A	N/A	N/A	N/A
Finder fees and referral fees	No.	N/A	N/A	N/A	N/A

Appendix 3: Sample guidance for Investigators with Salary/Role in Private/Startup Companies [Template]

RE: Guidance for Investigators with salary/role in private/start-up companies

Dear Investigator,

Thank you for updating your significant financial interest disclosure for (“Company”).

Given your compensation from and/or equity in the Company, I am providing the following information to assist with addressing potential future conflict(s) as you conduct activities at both [Insert Tufts Medicine Entity] and the Company.

Data Management:

- Data and/or know-how generated at [Insert Tufts Medicine Entity] is owned by [Insert Tufts Medicine Entity].
- You may only share [Insert Tufts Medicine Entity] data and/or know-how with the Company as part of an appropriate agreement between [Insert Tufts Medicine Entity] and the Company. Requests to establish such an agreement must be initiated via the Office of Grants & Contracts.
- Terms of any agreement must be negotiated between [Insert Tufts Medicine Entity] and a designated negotiator on the Company’s behalf. A designated negotiator is a person other than yourself who can represent the Company to [Insert Tufts Medicine Entity].

Outside Work Activities:

- No services that you perform as part of your work for the Company may overlap and/or serve as work you perform at [Insert Tufts Medicine Entity]. Any services provided to the Company from [Insert Tufts Medicine Entity] must be consistent with the terms of the appropriate agreement(s) between [Insert Tufts Medicine Entity] and the Company.

Use of Facilities and Resources:

- You and all persons working with you in any [Insert Tufts Medicine Entity] facility must take reasonable measures to ensure that no [Insert Tufts Medicine Entity] facilities and/or resources are used for the benefit of the Company, except as may be specified under terms of appropriate agreement(s) between [Insert Tufts Medicine Entity] and the Company.

Intellectual Property:

- In the event the Company may be interested in either optioning or licensing [Insert Tufts Medicine Entity]-owned intellectual property, please note that the Company may not claim or assert rights to [Insert Tufts Medicine Entity] assets without a formal agreement between the Company and [Insert Tufts Medicine Entity].

Ongoing Compliance:

Tufts Medicine Conflict of Interest Policy

- You are required to continue to comply with Tufts Medicine's Conflict of Interest policies and disclose any changes to your status per the policies. Any change in status may require additional review.

Appendix 4: Industry-Sponsored Speaking Engagement Procedure

- Complete the Outside Business and Activities Evaluation Form (see Appendix 5) and submit to your Department Chair / Division Chief / Institute Director / Supervisor as appropriate.
- After review, if approved, Department Chair / Division Chief / Institute Director / Supervisor will forward to Compliance/Legal for additional review.
- Compliance/Legal must approve all industry-prepared presentation materials in advance of the date of the industry-sponsored speaking engagement.
- Submissions will be reviewed and a response provided to the requestor within approximately ten (10) business days.
- Failure to comply with this procedure may result in disciplinary action, up to and including termination.

Note that this Appendix and its requirements do not apply to speaking at CME events (for the CME-related requirements, see Section V.K of Part A).

Appendix 5: Proposed Outside Venture and Activity Evaluation Form

All Covered Persons seeking approval to participate in other employment or outside business ventures or activities must complete this form and receive approval before beginning those outside activities. Please review your current employment contract (if applicable) and Tufts Medicine's policies on Conflicts of Interest before submitting this form to your Department Chair or Supervisor.

Your Name:	
Your Department:	Your Title: Attending (if applicable)
Your Chair and Chief (if applicable) or Supervisor:	
Your Current Hours and Schedule with Tufts Medicine or Tufts Medicine Entity:	
Your Email Address:	Your Phone Number:

Please respond to the following questions and provide descriptions where applicable:

1. For industry-sponsored speaking engagements that are not CME, provide:

The name of the event, its location, a high-level description of the event, and likely attendees.

The name of the entity that would sponsor your speaking engagement at the event.

The proposed terms of any compensation or reimbursement that the sponsor would pay you in connection with the speaking engagement.

2. For other proposed outside ventures and activities, provide:

Name of your proposed business/venture:

Your role in this business/venture:

Hours of operation for this business/venture:

Target market and how you intend to market your business/recruit patients and customers:

Service area for your business/venture:

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Your expected method of compensation:

Your staffing model, particularly your direct involvement and expected effort and whether you intend or anticipate hiring other staff from Tufts Medicine or any Tufts Medicine entities:

Describe how you expect to maintain this venture and/or activity separately from and/or in addition to your responsibilities at Tufts Medicine:

If the outside venture or activity will include your providing clinical services: (1) whether you will have professional liability insurance coverage for these activities, and (2) which person or entity will pay for that insurance coverage.