



**Mayo School of Continuous
Professional Development**
13400 East Shea Boulevard
Scottsdale, Arizona 85259
Telephone: 480-301-4580

Dear Representative,

On behalf of Mayo Clinic and Mayo School of Continuous Professional Development, we are excited to announce “**Mayo Clinic Hospital Medicine: Managing Complex Patients**” will be held October 15-18, 2014 at The Omni Scottsdale Resort & Spa at Montelucia in Scottsdale, Arizona. You are invited to join us and exhibit at this continuing medical education program. The exhibit fee is \$2,500. Space is limited; early registration is encouraged.

As you know, the field of hospital medicine continues to grow and so does the complexity and management of hospitalized patients. This program will address many of the challenges experienced by hospital-based health care professionals and provide a forum for the exchange of clinical and practice ideas to enhance the delivery of health care and ultimately provide better patient outcomes. Using an interactive, case-based format, key highlights from most major areas of internal medicine and its subspecialties will be featured.

We expect over 200 inpatient care providers including hospitalists and other physicians, nurse practitioners and physician assistants from across the United States to attend our program which features didactic presentations supplemented with case discussions and panel discussions. Last year we had a tremendous response to our course with over 300 health care professionals attending, including numerous internal medicine and family practitioners who indicated the topics discussed benefited their outpatient practice as well.

Two optional educational activities have been added to our program this year. The American Board of Internal Medicine Maintenance of Certification session covering Hospital Medicine – Update 2013 will be offered Thursday, October 16.

On Friday afternoon, October 17, we will host a Bedside Procedures Workshop at our simulation center at Mayo Clinic Hospital. The workshop will introduce clinicians to the concept of ultrasound use at the bedside for central line placement, thoracentesis and paracentesis.

If you will join us and participate as an exhibitor, please complete the attached agreement and return it along with your payment (made payable to Mayo Clinic in Arizona) to Mayo School of Continuous Professional Development, Attn: Julie Ewald, 13400 East Shea Boulevard, Scottsdale, AZ 85259. Please denote activity #2014S561 on all correspondence. Mayo Clinic’s tax ID number is 86-0800150. Our W-9 form is attached for your convenience.

If you have any questions about our program or need additional information, please don't hesitate to contact us or Jenny Kundert, CME Specialist, MSCPD, directly at telephone 480-301-6954 or send e-mail to kundert.jenny@mayo.edu.

We hope you will join us in Scottsdale in October!

Sincerely,



Roger Yu, M.D.
Senior Associate Consultant,
Hospitalist
Hospital Internal Medicine
Assistant Professor of Medicine
Mayo Clinic College of Medicine



Jamie Newman, M.D.
Consultant, Hospitalist
Hospital Internal Medicine
Assistant Professor of Medicine
Mayo Clinic College of Medicine



Ilko V. Ivanov, M.D.
Consultant, Hospitalist
Hospital Internal Medicine
Instructor in Medicine
Mayo Clinic College of Medicine

RY/JN/II/jlk

Attachments:

Exhibitor Agreement
Course Brochure
W-9 Form



Mayo School of Continuous Professional Development (MSCPD)

Exhibitor Agreement

Regarding the Terms and Conditions for a Commercial Exhibit

Activity Title: **Mayo Clinic Hospital Medicine: Managing Complex Patients** Activity Number: **2014S561**

Location: **The Omni Scottsdale Resort, Scottsdale, Arizona**

Date(s): **October 15-18, 2014**

Agreement between: ACCREDITED PROVIDER (PROVIDER):

College of Medicine, Mayo Clinic – Mayo School of CPD
AND

Name of Commercial Company (EXHIBITOR): _____
(as it should appear on printed materials)

Name of Person Exhibiting: _____

Address: _____

Telephone: _____ Fax: _____ Email: _____

The named EXHIBITOR wishes to exhibit at the above named activity for the amount of **\$2,500**

Payment Information

Please complete credit card information or indicate if mailing a check:

☐ Visa ☐ Master Card ☐ Discover

Card # _____ Exp. _____

Name on Credit Card: _____ Date: _____

Address of Cardholder: _____

(if different from above address)

City: _____ State: _____ Zip _____

Phone #: _____ Email: _____

Federal Tax ID number is 86-0800150

☐ **Check**

Make check payable to **Mayo Clinic in Arizona**
and remit to:

Mayo School of Continuous Professional Development
Attn: Julie A. Ewald
13400 East Shea Blvd.
Scottsdale, AZ 85259

(Identify activity number on check 2014S561)

☐ **Electronic Transfer**

\$25 fee

Please contact CME office for account information.

By signing below, I agree to the “Terms and Conditions” outlined on Page 2 of this Exhibitor Agreement (including ACCME Standards for Commercial Support):

EXHIBITOR Representative: _____
(I understand and agree that typing my name above is the electronic equivalent of a written signature) (Date)

PROVIDER Representative: _____
Julie A. Ewald, ACME Planner - MSCPD (Date)

TERMS AND CONDITIONS

- EXHIBITOR agrees to abide by ACCME Standards for Commercial Support as stated at www.accme.org:
SCS 4.2: “Product-promotion material or product-specific advertisement of any type is prohibited in or during CME activities. The juxtaposition of editorial and advertising material on the same products or subjects must be avoided. Live (staffed exhibits, presentations) or enduring (printed or electronic advertisements) promotional activities must be kept separate from CME.” “Live, face-to-face CME, advertisements and promotional materials cannot be displayed or distributed in the educational space immediately before, during or after a CME activity. **Providers cannot allow representatives of Commercial Interests to engage in sales or promotional activities while in the space or in the place of the CME activity.**”
- EXHIBITORS are prohibited from distributing pharmaceuticals or other samples and promotional materials (i.e. pens, pads, etc.). Educational materials may be distributed within the designated exhibitor hall only, not within the educational space.
- All commercial support associated with this activity will be given with the full knowledge of the PROVIDER. No additional payments, goods, services or events will be provided to the course director(s), planning committee members, faculty, joint sponsor, or any other party involved with the activity.
- Completion of this agreement represents a commitment and payment is due and collectible by the ACTIVITY DATE unless otherwise agreed upon by the PROVIDER. PROVIDER reserves the right to refuse exhibit space to EXHIBITOR in the event of nonpayment or Code of Conduct violation. No Refunds.
- PROVIDER agrees to provide exhibit space and may acknowledge EXHIBITOR in activity announcements. PROVIDER reserves the right to assign exhibit space or relocate exhibits at its discretion.
- PROVIDER **Federal Tax ID number is 86-0800150.**
Please remit check payable to: **Mayo Clinic Arizona.** Please identify name of activity on the check stub.

Please fax completed Exhibitor Agreement to: (480) 301-9161
Return via *fax only*



Mayo School of Continuous Professional Development

Mayo Clinic Hospital Medicine: Managing Complex Patients



**Wednesday – Saturday
October 15-18, 2014**

**The Omni Scottsdale Resort & Spa
at Montelucia
Scottsdale, Arizona**

Course Highlights:

- Interactive, case-based presentations
- Clinical updates on important inpatient topics
- Review of current literature
- Bedside Procedures, a hands-on workshop in Mayo Clinic's Simulation Center (*optional*)
- ABIM Maintenance of Certification session on Update in Hospital Medicine (*optional*)

\$75 DISCOUNT FOR ONLINE REGISTRATION

Go to www.mayo.edu/cme (offer expires September 1, 2014)



General Information

COURSE DESCRIPTION AND LEARNING OBJECTIVES

As the field of hospital medicine continues to grow, so does the complexity and management of hospitalized patients. This program will address many of the challenges experienced by hospital-based health care professionals and provide a forum for the exchange of clinical and practice ideas to enhance the delivery of health care and provide better patient outcomes. Using an interactive, case-based format, key highlights from most major areas of internal medicine and its subspecialties will be presented.

To maximize your time away from your practice and enhance your learning experience, two optional educational activities will be offered. The American Board of Internal Medicine Maintenance of Certification session on Update in Hospital Medicine will be offered Thursday, October 16, 2014. Additionally, the Bedside Procedures Workshop will be offered Friday, October 17, 2014 at Mayo Clinic Hospital's state-of-the-art simulation center. This workshop is designed for clinicians interested in exploring the use of point-of-care diagnostic ultrasound and performing ultrasound examinations and procedures on anatomic and live models with bedside instruction. See "Optional Educational Activities" panel for complete details.

Upon completion of this course, participants should be able to:

- Cite recent literature as it pertains to inpatient care.
- Differentiate type 2 from type 1 non-ST-elevation myocardial infarction.
- Review the best practice of managing sepsis.
- Determine appropriate bridging anticoagulation therapy for the perioperative patient.
- Improve quality of acute care for the elderly.
- Assess the medical decision-making capacity of patients.
- Optimize care for the patient with a hip fracture.
- Evaluate the swollen joint.
- Utilize a patient-centered approach when discussing goals of care.
- Summarize current, evidence-based approaches to common inpatient conditions.

INTENDED AUDIENCE

This program is designed for inpatient care providers including physicians, nurse practitioners and physician assistants. Hospitalists are defined as those who spend most of their professional practice caring for hospitalized patients. Internal Medicine and Family Practice are specialties that also have practitioners who care for hospitalized patients.

CREDIT

Mayo Clinic College of Medicine is accredited by the Accreditation Council for Continuing Medical Education to provide continuing medical education for physicians.

Mayo Clinic College of Medicine designates this live activity for a maximum of 24.25 *AMA PRA Category 1 Credits*[™] (18.75 general course; 2.5 ABIM MOC; 3.0 Bedside Procedures Workshop). Physicians should claim only the credit commensurate with the extent of their participation in the activity.

Application for CME credit has been filed with the American Academy of Family Physicians. **Determination of credit is pending.**

This program has been accredited by the American Osteopathic Association for 24.25 credits of AOA Category 2-A (18.75 *general course*; 2.5 ABIM MOC; 3.0 *Bedside Procedures Workshop*).

Other Health Care Professionals

A record of attendance will be provided to all registrants for requesting credits in accordance with state nursing boards, specialty societies, or other professional associations.

General Information

MEETING LOCATION & ACCOMMODATIONS

The Omni Scottsdale Resort & Spa at Montelucia
4949 East Lincoln Drive • Scottsdale, Arizona 85253

Web: www.montelucia.com

Reservations:

www.montelucia.com/MayoClinicHospitalMedicine10

Telephone: (480) 627-3200 or (888) 627-3010 (toll-free)

Nestled at the foot of Camelback Mountain and surrounded by the Sonoran Desert, the Omni Scottsdale Resort and Spa at Montelucia brings the essence of Europe to the heart of Scottsdale. Reminiscent of a small Andalusian village with arching entryways, splashing fountains and floral walkways, the resort beckons guests to slow down and take in all the pleasures of its surroundings.



A special group rate of \$279 (USD), per room per night, plus applicable city / state sales tax, single or double occupancy, is extended to course participants and guests. Group rates apply three days prior to and three days post-course dates, based upon availability. Guest room internet is complimentary; daily fitness center access is \$15 per person per day. To ensure accommodations, make your reservation via website, www.montelucia.com/MayoClinicHospitalMedicine10 or call (888) 627-3010 and reference *Mayo Clinic Hospital Medicine*. Please note unused guest rooms within the group room block will revert back to the hotel September 23, 2014. Reservations will be taken following this date based upon room and rate availability.

Attendees are responsible for their own reservations. The standard hotel reservation cancellation policy will apply to individual reservations unless otherwise specified.

GROUND TRANSPORTATION

Hertz is offering a reduced daily rate for participants attending the course. Call (800) 654-2240 and refer to CV# 03NR0009 when making reservations.

Supershuttle vans offer airport transportation to and from area hotels and businesses. To make reservations, call (800) 258-3826 or (602) 244-9000, or visit www.supershuttle.com.

DISCLAIMER

Attendance at this Mayo course does not indicate nor guarantee competence or proficiency in the performance of any procedures which may be discussed or taught in this course.

GRANTS AND EXHIBITS

As of this printing, a complete listing of commercial supporters was not available. Appropriate acknowledgment will be given to all supporters at the meeting.

Exhibits will be available for viewing at all scheduled breaks.

AMERICANS WITH DISABILITIES ACT

Mayo Clinic College of Medicine fully intends to comply with the legal requirements of the Americans with Disabilities Act. If you need assistance, please notify us at least two weeks prior to the activity.

Email address: mca.cme@mayo.edu

RECREATION/LEISURE ACTIVITIES

Visit www.visitphoenix.com or www.scottsdalecvb.com for recreation and leisure activities.

Program

Wednesday, October 15, 2014

7:00 a.m.	Registration and Continental Breakfast
7:40	Welcome and Introductions
7:45	Two Midnights at the Oasis: The Two Midnight Rule Jamie Newman, M.D.
8:00	Management of Heart Failure for the Hospitalist Farris K. Timimi, M.D.
8:30	You Really Can Die of a Broken Heart – Tako Tsubo Cardiomyopathy R. Todd Hurst, M.D.
9:00	Type 2 Myocardial Infarction Farris K. Timimi, M.D.
9:30	The Talk – Effective Goals of Care Discussions Jacob J. Strand, M.D.
10:00	Question and Answer Session Jamie Newman, M.D., Farris K. Timimi, M.D., R. Todd Hurst, M.D., and Jacob J. Strand, M.D.
10:15	Refreshment Break
10:30	Geriatric Hospital Medicine. Donna M. Miller, M.D.
11:15	The Hospitalist and Orthopedist Partnership: Optimizing Care of the Hip Fracture Patient Mary I. O'Connor, M.D.
11:45	Hospital-Acquired Infections M. Teresa Seville, M.D.
12:15 p.m.	Cases in Inpatient Diabetes Management Lori R. Roust, M.D.
12:45	Question and Answer Session Donna M. Miller, M.D., Mary I. O'Connor, M.D., M. Teresa Seville, M.D., and Lori R. Roust, M.D.
1:00	Adjourn
5:00-6:00	Welcome Reception

Thursday, October 16, 2014

7:00 a.m.	Continental Breakfast
7:40	Announcements
7:45	Infections in Travelers. Steven S. Krotzer, M.D., D.T.M.H., M.P.H.
8:15	Acute Kidney Injury James R. Gregoire, M.D.
8:45	Nutrition in the Hospitalized Patient M. Molly McMahon, M.D.
9:15	Acid-Base and Electrolytes James R. Gregoire, M.D.
9:45	Question and Answer Session Steven S. Krotzer, M.D., D.T.M.H., M.P.H., James R. Gregoire, M.D., and M. Molly McMahon, M.D.
10:00	Refreshment Break
10:15	Perioperative Anticoagulation Issues: To Bridge or Not to Bridge Scott C. Litin, M.D.
11:00	Hematologic Emergencies Craig B. Reeder, M.D.
11:30	Preanesthesia Medical Evaluation: Special Cases Archana Roy, M.D.
Noon	Inpatient Dermatology Catherine C. Newman, M.D.
12:30 p.m.	Question and Answer Session Scott C. Litin, M.D., Craig B. Reeder, M.D., Archana Roy, M.D., and Catherine C. Newman, M.D.
12:45	Adjourn

OPTIONAL EDUCATIONAL ACTIVITY

1:30-4:00	American Board of Internal Medicine Maintenance of Certification Update in Hospital Medicine John T. Ratelle, M.D. and Jason H. Szostek, M.D. <i>(see Optional Educational Activities panel for additional information)</i>
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Program

Friday, October 17, 2014

7:00 a.m.	Continental Breakfast
7:40	Announcements
7:45	Checklist for When Things Go Wrong Neil Winawer, M.D., S.F.H.M. and Kimberly D. Manning, M.D., F.A.C.P., F.A.A.P.
8:30	Practice Guidelines: How They Work For and Against the Hospitalist . . . Nancy J. Cummings, J.D.
9:00	Reducing 30-Day Readmissions in Community Patients at an Academic Medical Center Paul M. Robelia, M.D.
9:30	Allergies, Angioedema, Anaphylaxis Neil Winawer, M.D., S.F.H.M.
10:00	Question and Answer Session Neil Winawer, M.D., S.F.H.M., Kimberly D. Manning, M.D., F.A.C.P., F.A.A.P., Nancy J. Cummings, J.D., and Paul M. Robelia, M.D.
10:15	Refreshment Break
10:30	Update in Hospital Medicine A. Scott Keller, M.D.
11:15	Capacity and Competence Kemual L. Philbrick, M.D.
11:45	Neurology Pearls Lyell K. Jones, M.D.
12:15 p.m.	Question and Answer Session A. Scott Keller, M.D., Kemual L. Philbrick, M.D., and Lyell K. Jones, Jr, M.D.
12:30	Adjourn

OPTIONAL EDUCATIONAL ACTIVITY

2:00-5:00	Bedside Procedures Workshop Mayo Clinic Hospital Simulation Center Ilko V. Ivanov, M.D., Christopher A. Lipinski, M.D., Michael J. Maniaci, M.D., Julia A. Mueller, M.D., Christopher F. Stewart, M.D., and Joseph P. Wood, M.D. <i>(see Optional Educational Activities panel for additional information)</i>
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Saturday, October 18, 2014

7:00 a.m.	Continental Breakfast
7:40	Announcements
7:45	Toxicities of Cancer Therapy: What a Hospitalist Needs to Know Helen J. Ross, M.D.
8:15	Spine Diseases Paul M. Huddleston, III, M.D.
8:45	The Swollen Joint Thomas G. Mason, II, M.D.
9:15	Evidence-Based Physical Exam John B. Bundrick, M.D.
9:45	Question and Answer Session Helen J. Ross, M.D., Paul M. Huddleston, III, M.D., Thomas G. Mason, II, M.D., and John B. Bundrick, M.D.
10:00	Refreshment Break
10:15	Sepsis John G. Park, M.D.
10:45	Esophageal Diseases Amindra S. Arora, M.B., B.Chir.
11:15	Hepatology for the Hospitalist William Sanchez, M.D.
11:45	Five Codes John G. Park, M.D.
12:15 p.m.	Question and Answer Session John G. Park, M.D., Amindra S. Arora, M.B., B.Chir., and William Sanchez, M.D.
12:30	Closing Comments, Evaluation and Adjourn

Optional Educational Activities

AMERICAN BOARD OF INTERNAL MEDICINE MAINTENANCE OF CERTIFICATION 2013 UPDATE IN HOSPITAL MEDICINE

Thursday, October 16, 2014 • 1:30 – 4:00 p.m. • Fee: \$150

Pre-registration required.

WORKSHOP DESCRIPTION AND LEARNING OBJECTIVES

The American Board of Internal Medicine (ABIM) Maintenance of Certification (MOC) Medical Knowledge Module for 2013 Update in Hospital Medicine contains 30 multiple-choice questions and is worth 10 MOC points. The primary purpose of the learning session is to facilitate completion of the ABIM MOC Medical Knowledge Module by board-certified internists in order to receive MOC credit. Expert faculty analyze each module question, review current evidence and key points, and summarize clinical pearls. Session attendees actively participate using an audience response system and verbalize their understanding of current evidence. For those not enrolled in ABIM's MOC program, the learning session provides an excellent opportunity to earn continuing medical education credit directly from Mayo Clinic.

Upon completion of this session, participants should be able to:

- Identify key issues in Hospital Medicine.
- Summarize recent advances in Hospital Medicine based on case discussions.
- Complete the ABIM 2013 Update in Hospital Medicine Medical Knowledge Module.

BEDSIDE PROCEDURES WORKSHOP MAYO CLINIC HOSPITAL SIMULATION CENTER

Friday, October 17, 2014 • 2:00 – 5:00 p.m. • Fee: \$250

Space is limited; early registration advised. Pre-registration required.

Lunch and transportation will be provided.

WORKSHOP DESCRIPTION AND LEARNING OBJECTIVES

The use of ultrasound to verify and access a target is considered a standard of care for most common bedside procedures. This has been shown to increase success and safety and decrease complications. This workshop has been designed to introduce clinicians to the concept of ultrasound use for central line placement, thoracocentesis and paracentesis.

The workshop will begin with an introduction to pertinent technical aspects of ultrasound image acquisition and individual procedures (common indications, contraindications, equipment, fluid studies, pitfalls and troubleshooting). Participants will then have an opportunity to scan live models and practice procedures on mannequins. They will be assisted by bedside instructors.

Upon completion of the workshop, participants should be able to:

- Visualize the internal jugular vein and differentiate from the carotid artery.
- Recognize and locate a fluid collection in the chest and abdominal cavities.
- Introduce a needle under direct ultrasound guidance into the desired target.

Attendance at this workshop will improve knowledge and clinical skills, but will not certify or guarantee competence or proficiency in the performance of these procedures.

Roundtrip transportation from the Omni Scottsdale Resort & Spa at Montelucia to Mayo Clinic Hospital will be provided. Space is limited. Pre-registration required.

REGISTRATION

2014S561
AAFP / AMA / AOA

Mayo Clinic Hospital Medicine: Managing Complex Patients

The Omni Scottsdale Resort & Spa at Montelucia • Scottsdale, Arizona • October 15-18, 2014

Registration at the standard fee may be completed using this form and faxing it to (480) 301-9176. Or you may mail it to: Mayo Clinic, Mayo School of CPD, 13400 East Shea Boulevard, Scottsdale, Arizona 85259.

An email confirmation will be sent upon receipt of payment and completed registration. If you do not receive your confirmation, or if you have any questions, please email us at mca.cme@mayo.edu or call (480) 301-4580.

No refund will be granted unless a written notice of cancellation is received. If registration must be canceled, tuition less a \$75 administrative fee will be refunded when notification is received on or before October 1, 2014. No refunds will be made after this date.

Although it is not Mayo Clinic's policy to limit the number of registrants for a course, conference room facilities may necessitate closure of enrollment. Early registration is strongly recommended. Walk-in registrations cannot be guaranteed. Mayo Clinic will not be responsible for expenses incurred by individuals who are not confirmed for courses with a closed registration status. Costs incurred by the registrant such as airline/ hotel fees or penalties are the responsibility of the registrant.

ONLINE SYLLABUS: Your registration fee includes access to an electronic syllabus that will be emailed prior to the course. This allows you to view, save, or print the syllabus before attending the course. If you want to order a paper copy (additional fee), check the box at the bottom of this registration form.

Course Registrant List (Check only if you want your name removed)

☐ I do not want information (i.e., name, degree, city, and state) to appear on the course registrants list.

Name of Registrant – first, middle, and last name		Institution	
Degree/Certification		Medical Specialty	
Preferred mailing address is: (select one) Work/Business Home			
Address			
City		State/Province	ZIP/Postal Code
Country	Email		
Daytime Telephone		Fax	

\$75 DISCOUNT FOR ONLINE REGISTRATION!
Go to www.mayo.edu/cme (offer expires September 1, 2014)
Note: When registering online, please be sure to “check-out” after your profile is completed/updated.

COURSE REGISTRATION FEE

Note: Please refer to course agenda for included meals and refreshment breaks.

Physicians Active in Practice	\$775	\$ _____
Other (resident, retired and allied health)	\$675	\$ _____
Paper copy of the syllabus	\$75	\$ _____

Note: Due to printing deadlines, this option will not be available after September 30, 2014.

OPTIONAL EDUCATIONAL WORKSHOPS

ABIM MOC – Update in Hospital Medicine (Thursday, October 16)	\$150	\$ _____
Bedside Procedures Workshop (Friday, October 17)	\$250	\$ _____
Please check box if you will require shuttle transportation	Yes No	

WELCOME RECEPTION (Wednesday, October 15, 5-6 p.m.)

2 tickets included in registration fee

No, I will not attend Yes, I will attend solo Yes, I will attend and bring one guest

Additional Tickets:

Adult – \$50 each	# requested _____	\$ _____
Child (5-12 yrs) – \$20 each	# requested _____	\$ _____
Child (0-4 yrs) – No Charge	# requested _____	\$ _____

Payment Information (US Funds Only)

Check is enclosed in the amount shown at right – make checks payable to Mayo Clinic CPD		Payment Total
Credit Card (select one) <input type="checkbox"/> Discover <input type="checkbox"/> MC <input type="checkbox"/> Visa	Account Number Exp. Date (mm/yy)	
Signature		Date

Mayo Clinic
13400 East Shea Boulevard
Scottsdale, Arizona 85259

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Email: mca.cme@mayo.edu • Phone: (480) 301-4580 • Fax: (480) 301-9176

Mayo Clinic Hospital Medicine: Managing Complex Patients

The Omni Scottsdale Resort & Spa at Montelucia
Scottsdale, Arizona

October 15-18, 2014



Enhance your course experience by downloading the Mayo Clinic Hospital Medicine course app directly onto your mobile device!

The Mayo Clinic CME course app puts everything you need to know about the course directly onto your mobile device.

App highlights include accessing presentation slides and taking notes directly on the slides.

A step-by-step guide to using the Mayo Clinic CME App will be provided to all course participants prior to the course.

A complete faculty listing is available on the course website, www.mayo.edu/cme.

FACULTY DISCLOSURE: As a provider accredited by ACCME, Mayo Clinic College of Medicine (Mayo School of CPD) must ensure balance, independence, objectivity and scientific rigor in its educational activities. Course Director(s), Planning Committee Members, Faculty, and all others who are in a position to control the content of this educational activity are required to disclose all relevant financial relationships with any commercial interest related to the subject matter of the educational activity. Safeguards against commercial bias have been put in place. Faculty will also disclose any off-label and/or investigational use of pharmaceuticals or instruments discussed in their presentation. Disclosure of this information will be published in course materials so those participants in the activity may formulate their own judgments regarding the presentation.

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Printed in the USA
MC8200-82rev0614

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Request for Taxpayer Identification Number and Certification

Give Form to the
requester. Do not
send to the IRS.

Print or type
See Specific Instructions on page 2.

Name (as shown on your income tax return)

Mayo Clinic Arizona

Business name/disregarded entity name, if different from above

Check appropriate box for federal tax classification:

☐ Individual/sole proprietor ☒ C Corporation ☐ S Corporation ☐ Partnership ☐ Trust/estate

☐ Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=partnership) ▶

☒ Other (see instructions) ▶

501 (c) (3) tax-exempt nonprofit

Exemptions (see instructions):

Exempt payee code (if any) 1

Exemption from FATCA reporting
code (if any) A

Address (number, street, and apt. or suite no.)

13400 East Shea Boulevard

City, state, and ZIP code

Scottsdale, AZ 85259

Requester's name and address (optional)

List account number(s) here (optional)

Part I Taxpayer Identification Number (TIN)

Enter your TIN in the appropriate box. The TIN provided must match the name given on the "Name" line to avoid backup withholding. For individuals, this is your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the Part I instructions on page 3. For other entities, it is your employer identification number (EIN). If you do not have a number, see *How to get a TIN* on page 3.

Note. If the account is in more than one name, see the chart on page 4 for guidelines on whose number to enter.

Social security number

- -

Employer identification number

8 6 - 0 8 0 0 1 5 0

Part II Certification

Under penalties of perjury, I certify that:

1. The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me), and
2. I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding, and
3. I am a U.S. citizen or other U.S. person (defined below), and
4. The FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting is correct.

Certification instructions. You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and generally, payments other than interest and dividends, you are not required to sign the certification, but you must provide your correct TIN. See the instructions on page 3.

Sign
Here

Signature of
U.S. person ▶

Chh bly

Date ▶

12/9/13

General Instructions

Section references are to the Internal Revenue Code unless otherwise noted.

Future developments. The IRS has created a page on IRS.gov for information about Form W-9, at www.irs.gov/w9. Information about any future developments affecting Form W-9 (such as legislation enacted after we release it) will be posted on that page.

Purpose of Form

A person who is required to file an information return with the IRS must obtain your correct taxpayer identification number (TIN) to report, for example, income paid to you, payments made to you in settlement of payment card and third party network transactions, real estate transactions, mortgage interest you paid, acquisition or abandonment of secured property, cancellation of debt, or contributions you made to an IRA.

Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN to the person requesting it (the requester) and, when applicable, to:

1. Certify that the TIN you are giving is correct (or you are waiting for a number to be issued),
2. Certify that you are not subject to backup withholding, or
3. Claim exemption from backup withholding if you are a U.S. exempt payee. If applicable, you are also certifying that as a U.S. person, your allocable share of any partnership income from a U.S. trade or business is not subject to the

withholding tax on foreign partners' share of effectively connected income, and

4. Certify that FATCA code(s) entered on this form (if any) indicating that you are exempt from the FATCA reporting, is correct.

Note. If you are a U.S. person and a requester gives you a form other than Form W-9 to request your TIN, you must use the requester's form if it is substantially similar to this Form W-9.

Definition of a U.S. person. For federal tax purposes, you are considered a U.S. person if you are:

- An individual who is a U.S. citizen or U.S. resident alien,
- A partnership, corporation, company, or association created or organized in the United States or under the laws of the United States,
- An estate (other than a foreign estate), or
- A domestic trust (as defined in Regulations section 301.7701-7).

Special rules for partnerships. Partnerships that conduct a trade or business in the United States are generally required to pay a withholding tax under section 1446 on any foreign partners' share of effectively connected taxable income from such business. Further, in certain cases where a Form W-9 has not been received, the rules under section 1446 require a partnership to presume that a partner is a foreign person, and pay the section 1446 withholding tax. Therefore, if you are a U.S. person that is a partner in a partnership conducting a trade or business in the United States, provide Form W-9 to the partnership to establish your U.S. status and avoid section 1446 withholding on your share of partnership income.