

***American College of Neuropsychopharmacology
Conflict of Interest Disclosure Policy***

The ACNP Conflict of Interest Policy, revised and ratified by Council in 1990, specifies that a violation has occurred if any action is taken which might result in or creates the appearance of:

- a. giving preferential treatment to any organization or person;
- b. using one's office for personal gain;
- c. losing complete impartiality or independence; or
- d. affecting adversely the confidence of the public in the American College of Neuropsychopharmacology.

- I.** All members of ACNP Council and Committees, and all Editors (to include associate editors, deputy editors, series editors, volume editors, website editors or any other paid editor) of ACNP Publications will be required to disclose any financial relationship that might create a conflict of interest (COI) on the ACNP COI Disclosure Statement. Disclosures should be made for immediate family members as well as the Council member, committee member, or editor. False reporting of COI is considered grounds for ACNP ethics charges. The COI Disclosure Statement is made up of five parts.
 - a.** In part one of the COI Disclosure Statement ALL financial relationships or financial holdings should be listed, but the amounts of those relationships or holdings should not be listed. This list should include any of the following:
 - i.** Member of Board of Directors
 - ii.** Equity Ownership/Partial Ownership or Owner of Company should ONLY be disclosed if ALL THREE of the following are true:
 - 1.** The equity is in a pharmaceutical or biotechnology company, a company providing clinical assessment, scientific, or medical products, or a company that provides services or products to ACNP or that proposes to provide services or products to ACNP.
 - 2.** The equity is held in an account in which the individual can exercise control over when / if stock is bought and sold. Equity that is held in diversified mutual funds, trusts over which the individual has no control, etc. should not require disclosure.
 - 3.** The equity has a value of \$10,000 or greater on the date the disclosures are made each year.
 - iii.** Speaker/Speakers' Bureaus for a Company
 - iv.** Consultancies
 - v.** Patents and patent filings
 - vi.** Any other honoraria or payments
 - vii.** Grants from a pharmaceutical or biotechnology company, a company providing clinical assessment, scientific, or medical products directly or indirectly through a foundation, university, or any other organization should be disclosed.
 - viii.** Grants from federal agencies (e.g., NIH, NSF, VA) need not be disclosed.
 - ix.** Any financial relationships of a spouse or dependent child, if known
 - b.** Part two of the COI Disclosure Statement should list those financial relationships which are listed in part one and have a value greater than \$10,000 per year, OR financial holdings that are listed in part one and have a value of \$10,000 or greater as of the date of disclosure.
 - c.** Part three of the COI Disclosure Statement should list those financial relationships which are listed in part one and which constitute more than 5% of one's personal income.
 - d.** Part four should list all grants from pharmaceutical, biotechnology companies, companies providing clinical assessment, scientific or medical products whether they come directly from the company or indirectly through a foundation, university, or any other organization.

- e. Part five should list the name of the company if your primary employer is a pharmaceutical/biotech/medical device company.
- II.** All members of ACNP Council and committees will be required to complete a COI Disclosure Statement that will be submitted to the Executive Office. All editors will be required to complete a COI Disclosure Statement that will be provided to the chair of the Publications Committee.
- a. The Executive Office will then provide copies of disclosure statements for Council and committee members as follows:
 - i. For all committee members a copy of the disclosure statements will be provided to the relevant committee Chair, the ACNP Secretary (or Council liaison), and the Executive Director (or staff liaison).
 - ii. For Council members copies of the disclosure statements will be provided to the President, ACNP Secretary, and the Executive Director.
 - iii. Before each meeting of these respective bodies the people identified above who have copies of the Disclosure Statements should review them and assume responsibility for ensuring that during the meeting any discussions and/or votes have been preceded with recusals of members with potential conflicts. In any specific instance, the member identified as having a potential conflict of interest may rebut the presumption of conflict, but the decision regarding that member's participation in the discussion or the vote will be decided by the remaining members of the committee or Council.
 - b. The Publications Committee Chair will use the information provided in the COI Disclosure to make judgments about potential conflicts of interest and to assess whether the number and extent of potential conflicts significantly compromises the individual's ability to perform the tasks required of an editor of an ACNP publication.
 - i. While the COI Disclosure Statements for editors will normally be reviewed only by the Chair of the Publications Committee, selected lists may be shared with other members of the Publications Committee and members of ACNP Council if deemed necessary by the Publications Committee chair.
 - ii. In its annual report to ACNP Council the Publications Committee will include a statement regarding the management of potential conflicts of interest and a summary of any actions taken during the year to address apparent or reported violations of this policy.
 - iii. An accusation that an Editor or Associate Editor has violated the conflict of interest policy shall be referred to the ACNP Ethics Committee for consideration and investigation. The Ethics Committee shall report its findings and recommendations to the Publications Committee and Council for action.
 - iv. An Editor or Associate Editor found guilty of violating the conflict of interest policy is subject to sanction, including forfeiture of the editorship.
- III.** All COI Disclosure Statements will be retained for reference in the ACNP Executive Office.

ACNP Conflict of Interest Disclosure Statement

Name:

Email:

I certify that all my (and my immediate family's) affiliations with or financial involvement (e.g., employment, consultancies, honoraria, equity ownership or stock options, grants, contracts, patents, received or pending, or royalties) with any organization or entity having a financial interest in or a current or potential financial conflict with any matters related to the ACNP are disclosed completely here. For purposes of disclosure, financial involvement is defined as any income source having occurred within the last 2 years. Please note if any income source is greater than or equal to \$10,000 per year or has the potential to generate that amount per year in the future (e.g. patents or royalties). Also, please note if the financial involvement constitutes more than 5% of one's personal income.

Part One: All Financial Involvement with a pharmaceutical or biotechnology company, a company providing clinical assessment, scientific, or medical products or companies doing business with or proposing to do business with ACNP over past 2 years (Calendar Years 2011 –Present): Amounts do not need to be disclosed, but all professional financial involvement should be listed here:

Part Two: Income Sources & Equity of \$10,000 per year or greater (Calendar Years 2011 -Present):

Part Three: Financial Involvement with a pharmaceutical or biotechnology company, a company providing clinical assessment, scientific, or medical products or companies doing business with or proposing to do business with ACNP which constitutes more than 5% of personal income (Calendar Years 2011 - Present):

Part Four: Grants from pharmaceutical or biotechnology company, a company providing clinical assessment, scientific, or medical products directly, or indirectly through a foundation, university, or any other organization (Calendar Years 2011- Present):

Part Five: My primary employer is a pharmaceutical/biotech/medical device company. List company name:

_____ (Initial Here) I have no relevant financial interests to disclose.

Click the signature box below and choose an existing digital ID if you have one. If not, follow the prompts to create a new digital ID.

Signature _____ Date _____