



Weill Cornell
Medicine

Conflict of Interest Procedures

Table of Contents

- I. INTRODUCTION..... 4**
 - PREAMBLE 4
 - PURPOSE 4
 - SCOPE 4
 - AUTHORITY & ENFORCEMENT..... 4
 - DEFINITIONS 4
- II. WCM CONFLICTS OVERVIEW & FRAMEWORK 6**
 - WCM POLICY STATEMENT ON CONFLICTS 6
 - COI & COC OVERVIEW AT WCM 7
 - CONFLICT DISCLOSURE REQUIREMENTS, APPROVALS, AND DOCUMENTATION..... 8
 - A. Duty to Disclose 8
 - B. Who Needs to Disclose 8
 - C. COI Disclosure Survey – Requirements, Documentation, and Attestation 8
 - D. Required Disclosures on the Annual COI Disclosure Survey..... 9
 - E. Review Outcome and Management 9
 - F. Compliance with Annual COI Disclosure Requirements 10
 - G. What You Do NOT Need to Report..... 10
- III. GENERAL CONFLICTS OF INTEREST 10**
 - PROHIBITED ACTIVITIES 11
 - Acceptance of Gifts and Benefits..... 11
 - Industry-Sponsored Speakers’ Bureaus and Promotional Speaking..... 11
 - Ghostwriting and Undisclosed Authorship 12
 - Product Endorsement 12
 - ACTIVITIES, RELATIONSHIPS, & INTERACTIONS SUBJECT TO DISCLOSURE, REVIEW, AND MANAGEMENT 12
 - External Consulting and Professional Services 12
 - Financial Relationships, Equity Interests, and Activities with External Entities 13
 - Publication Support and Medical Writing Assistance (Non-Ghostwriting) 14
 - Speaking, Teaching, and Educational Presentations (Non-Speakers’ Bureau) 14
 - Acceptance of Non-Personal Items/Benefits 15
 - Start-Up Companies, Commercialization, and Entrepreneurial Activities..... 15
 - Industry-Sponsorship (Non-CME or CME Provided by an Outside Entity)..... 16
- IV. CONFLICTS OF COMMITMENT 18**

V.	EMPLOYMENT RELATED CONFLICTS	19
VI.	RESEARCH-SPECIFIC CONFLICTS	20
	Research-Related COI Evaluation	20
	PHS FCOI Reporting	20
	Rebuttable Presumption	21
	External Research Personnel	22
VII.	EDUCATION-SPECIFIC COI	22
	Supervisory Conflicts	23
VIII.	CONFLICT REVIEW, ASSESSMENT, MANAGEMENT AND APPEAL PROCESSES	23
	A. General/Business Conflicts	23
	B. Research Conflicts	24
	C. Education Conflicts	24
	D. Conflicts Oversight Board Review	24
	E. Appeal Process	24
IX.	TRAINING	25
X.	RECORDKEEPING AND CONFIDENTIALITY	25
XI.	COMPLIANCE WITH THESE PROCEDURES AND UNIVERSITY CONFLICT POLICIES 1.7 & 4.14	25
	References	25
	WCM Procedures Approval	26
	Version History	26

I. INTRODUCTION

PREAMBLE

The Weill Cornell Medicine (WCM) Procedures on Conflicts of Interest (COI) and Conflicts of Commitment (COC) (“WCM Conflicts Procedures” or “Procedures”) are intended to support compliance with Cornell University Policies 4.14 - *Non-Research Conflicts of Interest and Commitment* and 1.7 – *Research Related Conflicts of Interest and Commitment* (“Policies 1.7 & 4.14”) by delineating Industry-specific rules and standards for general business, research, and education conflicts. Additionally, these Procedures establish WCM standardized processes for the identification, disclosure, review, assessment, and management of conflicts as well as ensuring compliance with Conflicts requirements, these Procedures, and WCM-issued Conflicts Management Plans (CMPs).

PURPOSE

The goal of the WCM Conflicts Procedures is to ensure compliance with the New York State Not-for-Profit Corporations Law (NPCL) §715(a) and other applicable laws, by establishing Industry-specific rules and processes on conflicts at WCM. These Procedures shall also serve as guidance to WCM Workforce Members on navigating Industry-relationships and interactions to maintain the highest possible standards of clinical care, education, scientific integrity, and ethical business transactions while safeguarding the institution’s reputation and credibility. Relationships and collaborations with Industry are of vital importance to the WCM community because these exchanges of scientific information foster innovation.

SCOPE

The scope of the WCM Conflicts Procedures applies to all WCM Workforce Members, as defined in these Procedures. For the purposes of these Procedures, this includes all WCM Workforce Members with an active Center-Wide ID (CWID) under WCM’s direction or control.

AUTHORITY & ENFORCEMENT

WCM shall afford these Procedures the same authority and enforcement as Policies 1.7 & 4.14. Accordingly, Workforce Members are responsible for adhering to WCM and Industry-specific rules and guidance set forth in this document. Failure to comply with these Procedures will be considered a violation of Policies 1.7 & 4.14 and may result in corrective or disciplinary action, up to and including termination, consistent with applicable policies and procedures.

Relationship to Cornell University Policies

These Procedures implement and supplement Policies 1.7 and 4.14 as they apply to WCM. The university policies establish institution-wide requirements, while these Procedures provide WCM-specific standards, processes, and implementation guidance. Where these Procedures are more specific or restrictive, WCM Workforce Members are required to follow these Procedures.

DEFINITIONS

WCM-SPECIFIC DEFINITIONS

Business Conflict of Interest (BCOI): A conflict of interest relating to financial or non-financial interests, gift, or in-kind support with an actual or potential vendor of WCM or Industry that could directly or indirectly compromise or appear to compromise a Workforce Member’s business judgment, delivery of clinical care, employment responsibility or other obligation to WCM.

Conflict of Interest Disclosure Survey: A required form completed by WCM Workforce Members to disclose actual or perceived COIs and COCs, including external commitments, financial interests, and covered Family relationships.

Conflict Oversight Board (COB): The COB makes recommendations to and advises the Dean of WCM regarding conflicts of interest and commitment, reviews disclosures referred by the COI Office, approves comprehensive conflict management plans, and may declare conflicts unmanageable.

Educational Conflict of Interest (ECOI): A conflict relating to an interest that could directly or indirectly compromise or appear to compromise an individual's judgment in providing or receiving Industry sponsored education, including, but not limited to, continuing medical education. Refer to ACCME rules governing CMEs (i.e., commercial bias, financial relationships with ineligible companies, disclosures to learners, and managing commercial support).

Equity Interest: Any ownership stake or financial interest in an external organization, including an Industry entity, stock, stock options, warrants, and royalty interests. Equity interests in publicly traded entities above \$5,000 and any equity interest in a non-publicly traded entity are subject to disclosure and review under these Procedures.

Ghostwriting: The practice of writing material—such as articles, books, speeches, reports, or other content—on behalf of someone else who is credited as the author.

Gifts: Any item of value, including money, services, discounts, meals, or entertainment that is given or received by a workforce member without payment or reimbursement. Gifts include, but are not limited to: cash of any amount, gift certificates, loans, flowers, food and beverage (e.g., box of chocolate, wine), entertainment or sports tickets or items, stocks or other securities, or participation in stock offerings, invitations to be their guests at charitable or industry-related events, raffle prizes, and use of external entity vehicles or vacation facilities, or those of their employees. Gifts also include any meals, food or beverage provided to WCM Workforce Members at non-Continuing Medical Education (CME) events on or off WCM premises.

Honoraria: Any payment of money or item of material value given as consideration for a speech, address, lecture, oration, meeting or oral presentation.

Industry: Entities in the pharmaceutical, biotechnology, medical device, diagnostics, digital health, consumer health, wellness, cosmetic or other healthcare sectors.

Nepotism: A situation where Family ties and personal relationships influence or appear to influence judgments on the quality of work or decisions on hiring, promotion, termination, or other terms or conditions of employment. Additional guidance on Nepotism can be found in the following policies:

- Academic Staff Handbook Section I - Faculty Appointment, Promotion, Tenure, and Guidelines for Committee Review; and
- WCM HR Policy 225 *Nepotism*.

Office of Conflict of Interest (COI Office): The COI Office serves as the central intake and coordination function and routes conflicts of interest disclosures to the appropriate managing office(s) as needed.

Plan Recipient (PR): A WCM Workforce Member who has received a CMP overseen by the COB. Non-WCM individuals participating in WCM research who do not meet the Workforce Member definition are not eligible for a CMP but are required to complete the External Investigator Study Specific Report (SSR).

Disclosed conflicts are reviewed by the COI Office and managed through study-specific conditions, including ICF disclosures and, where appropriate, restrictions on the individual's role in the research.

Recusal: A required restriction or removal from participation in a decision, activity, or institutional process when a conflict of interest or commitment exists or is perceived to exist. Recusal may include abstaining from purchasing, contracting, hiring or evaluation decisions, research oversight, educational planning, or other affected institutional decisions, as specified in a CMP or other directive.

Research Conflict of Interest (RCOI): Any financial or non-financial interest that could directly or indirectly affect the design, conduct, or reporting of research.

Speakers' Bureaus: Arrangements where a company has a contractual right to dictate or control the content of a presentation or talk, including slides and presentation materials, and holds final approval of the content and edits.

Start-Up: Any entity formed by a member of the WCM Workforce whose goal is commercialization in the realm of healthcare, biomedical science, or related fields.

Study Specific Report (SSR): A study-level financial disclosure form required for all non-WCM investigators participating in WCM research protocols, regardless of whether they have relationships to disclose. The SSR is reviewed by the COI Office. Investigators from NYP and HSS file through the Weill Research Gateway; all other external investigators and WCM-Qatar use the External Investigator SSR form.

Workforce Members: Faculty; Non-Faculty Academics; Staff; Students; Volunteers; and others whose conduct in the performance of work for WCM, is under its direction and control, whether or not they are paid by WCM.

REFER TO UNIVERSITY POLICIES 1.7 & 4.14 FOR THE DEFINITIONS OF THE FOLLOWING TERM(S):

- Conflict Management Plan (CMP)
- Conflict of Commitment (COC)
- Conflict of Interest (COI)
- Family (specific to the WCM Conflicts Procedures and governing university policies on COIs and COCs)
 - Exceptions: Regarding situations involving Nepotism, WCM Academic Staff shall refer to the definition of "Family" as stated in the *Academic Staff Handbook*. All other WCM Workforce Members shall refer to the definition of "Family" in the WCM Policy HR 225 – *Nepotism*.
- Significant Financial Interest (SFI)

II. WCM CONFLICTS OVERVIEW & FRAMEWORK

WCM POLICY STATEMENT ON CONFLICTS

In furtherance of university Policies 1.7 & 4.14, all WCM Workforce Members, are expected to conduct the affairs of WCM in a manner consistent with their primary commitments to WCM, and the performance of their professional responsibilities must be free from real or apparent bias motivated by self-interest.

As outlined in the WCM Conflicts Procedures, Workforce Members:

1. Shall not engage in the prohibited activities as discussed in Section III below due to the nature of the unmanageable conflict; and
2. Must disclose activities, relationships, or interactions that may give rise to conflicts, according to the Procedures herein, for reviewed and appropriate management through transparency and mitigation.

COI & COC OVERVIEW AT WCM

The following chart describes the various types of conflicts at WCM, to whom each type of Conflicts Procedure applies, and the respective WCM Office responsible for managing the disclosed conflict.

Conflict Type	Description	Scope	When the Conflict is ALSO a General/ Business Conflict	Managed By
General & Business	<ul style="list-style-type: none"> • External consulting • Equity or other financial ownership/relationship • Board or advisory roles • Gifts or remuneration • Related party transactions 	All Workforce Members (including those involved in research and education)	<i>This is the baseline category.</i> All conflicts that affect institutional judgment or financial interests fall here.	WCM Office of Compliance (OOC) through the Office of Conflict of Interest (COI Office)
Research	<ul style="list-style-type: none"> • Significant Financial Interests (SFI) • Industry-sponsored research • Investigator equity in sponsor • SBIR/STTR involvement 	Workforce Members involved in any aspect of research (i.e., faculty, non-faculty academics, students, volunteers in research, and other individuals at WCM).	When the financial interest: <ul style="list-style-type: none"> • Involves institutional contracting or payments • Affects procurement or vendor selection • Creates a related party transaction • Triggers fiduciary or governance concerns 	WCM Office of Research Integrity through the Office of Conflict of Interest
Education	<ul style="list-style-type: none"> • CME faculty relationships with industry • Honoraria or travel support • Commercial support of educational activities 	Workforce Members involved in medical education (i.e., students, faculty, and other staff involved in medical education and continuing medical education).	When the relationship: <ul style="list-style-type: none"> • Involves personal remuneration outside approved limits • Implicates institutional sponsorship or branding • Creates a financial or reputational risk to the institution 	Office of Continuing Medical Education (OCME); Office of Medical Education (OME)
Employment	<ul style="list-style-type: none"> • Nepotism • Conflicts of Commitment • Supervisory or reporting relationships involving personal relationships • Faculty time diverted to outside clinical, consulting, or entrepreneurial activities 	All Workforce Members (including those involved in research and education)	When the employment conflict: <ul style="list-style-type: none"> • Affects compensation, promotion, or resource allocation • Involves contracting or payments to a related party • Implicate institutional fiduciary or governance responsibilities • Creates compliance, reputational, or financial risk 	Human Resources; Office of Faculty Affairs (OFA)

The Office of Conflict of Interest (COI Office) serves as the central intake and coordination office for disclosures and will route disclosures to the appropriate managing office(s) (e.g., OME/OCME, HR) and/or Conflict Advisory Board (COB) as needed (See University Policy 1.7 and University Policy 4.14).

Depending on the type and nature of the conflict, certain Research, Education, and Employment-related conflicts may not rise to the level of an institutional conflict and thus, will be managed by the respective Office. However, when a Research, Education, or Employment conflict can potentially impact WCM's

financial interest, governance responsibilities, or fiduciary obligations, the conflict may also constitute a general or business COI, requiring disclosure to WCM for review and management. When a conflict overlaps in different areas, the respective WCM Offices will collaborate to appropriately manage the conflict.

CONFLICT DISCLOSURE REQUIREMENTS, APPROVALS, AND DOCUMENTATION

A. Duty to Disclose

In accordance with these Procedures, Workforce Members have a duty to disclose any actual, potential, or perceived COIs or COCs in a timely manner and in sufficient detail to allow for an accurate and objective review. When issued in response to a disclosed conflict, Workforce Members shall comply with all management and mitigation activities (e.g., CMP, Recusal, role modification) as determined by the COB and/or the respective WCM Office responsible for managing the type of conflict.

Any Significant Financial Interest (SFI), as defined below, related to research funding, Industry collaborations, or intellectual property must be disclosed. Additionally, any actual, perceived, or potential external business relationship for a Workforce Member or a Family member that relates to a Workforce Member's primary responsibilities or area of expertise at WCM must be disclosed regardless of the SFI.

The duty to disclose imposes an obligation on Workforce Members to further inquire when there is uncertainty as to whether a situation or circumstance may constitute an actual, potential, or perceived conflict. Failure to disclose an actual or potential COI may result in disciplinary action.

B. Who Needs to Disclose

For purposes of the WCM COI Disclosure Survey, the following types of Workforce Members are required to complete the Survey:

- Faculty;
- Non-Faculty Academics (e.g., assistants, fellows, associates, senior associates, affiliate physicians and senior affiliate physicians);
- Staff; and
- Students.

Volunteers and other Workforce Members may be required to complete a disclosure or a role-specific disclosure based on access, responsibilities, or institutional risk, as determined by the COI Office and/or the applicable managing Office.

C. COI Disclosure Survey – Requirements, Documentation, and Attestation

All applicable WCM Workforce Members must complete the COI/COC Disclosure Survey at onboarding and annually thereafter. Workforce Members must update the Disclosure Survey within thirty (30) days of any material change, new external relationship, new financial interest, or new external activity that may create an actual, potential, or perceived COI or COC.

1. **Annual Certification:** Each Workforce Member must complete an annual COI Disclosure Survey during the designated annual disclosure period, even if the Workforce Member has nothing new to report (i.e., “no changes” attestation).
2. **Scope of Annual Disclosure:** Annual disclosure must include (as applicable) business, research, and medical education conflicts; outside professional activities; leadership

roles; and covered Family relationships and interests as defined in Policies 1.7 and 4.14 and applicable WCM procedures.

3. **Material Change (Interim) Updates:** Workforce Members must update their COI Disclosure Survey within thirty (30) days of any material change, including but not limited to initiating a new outside activity; entering into a new consulting arrangement; acquiring equity or assuming a leadership role in an external entity; receiving new sponsored/reimbursed travel; receiving Honoraria or other payments; changes to IP/royalty interests; or any other development that could create or materially change a COI or COC. Note: This 30-day window applies to updating the COI Disclosure Survey. Institutional review, including COI Office assessment and, where applicable, COB review, proceeds after survey submission and operates on a separate timeline.
4. **Accuracy and Completeness:** Workforce Members are responsible for ensuring disclosures are complete, accurate, and submitted on time. Submission of the annual disclosure constitutes an attestation that the information provided is true and correct to the best of the Workforce Member's knowledge. For providers, it is recommended to review the CMS Open Payments database to review any payments reported by Industry.
5. **Department/Division Review (as applicable)**

Workforce Members must obtain any required supervisory/department approvals (e.g., Chair, Division Chief, CAO, DA, Supervisor) prior to engaging in an external activity as required by these Procedures.

Department initial approvals do not replace the obligation to disclose through the COI Disclosure Survey and do not constitute institutional approval absent confirmation by the COI Office, OOC, or COB, where applicable. No external activity may proceed where a required institutional review is pending and interim safeguards or restrictions have been imposed.

D. Required Disclosures on the Annual COI Disclosure Survey

As outlined above, Workforce Members shall report on the Annual COI Disclosure Survey, all activities, relationships (personal, professional, and financial), and other interactions with Industry requiring disclosure.

Regardless of amount, you must disclose all payments or equity from external entities (non-WCM/Cornell) for yourself and immediate family members (refer to policy 4.14 for definition of 'Family') that involve Industry or relate to your WCM area of expertise. Examples may include but are not limited to:

- Advisory Board or Board of Directors Membership
- Commissioned Writings
- Equity Holdings
- Expert Witness Testimony
- Lectures/Speaking Engagements
- Medical Legal Consulting
- Licensed Intellectual Property Rights
- Sponsored or Reimbursed Travel (see 'Travel and Honoraria Disclosures' section below for more information.)

E. Review Outcome and Management

Disclosures may result in one or more outcomes, including: no conflict identified; conflict identified but manageable with mitigation as outlined in a CMP; or a determination that the conflict is unmanageable. WCM may impose interim safeguards while a disclosure is under review.

F. Compliance with Annual COI Disclosure Requirements

Failure to complete the annual disclosure by the established deadline may result in administrative actions, including escalation to department leadership, temporary restriction on initiating new external activities, and other actions as determined by WCM (including, where applicable, restrictions on research participation or other institutional privileges) until the disclosure requirement is satisfied.

WCM may issue automated reminders and escalate non-compliance to Department leadership and/or COB, as appropriate.

G. What You Do NOT Need to Report

- Mutual funds, pensions, or other investments where you do not control investment decisions.
- Salary, royalties, travel, or other compensation paid to you by Cornell/WCM, or, for WCM-Q personnel, by Qatar Foundation (QF) or QRDI in their capacity as institutional sponsors, or WCM-Q institutional affiliates (including HMC and Sidra).

III. GENERAL CONFLICTS OF INTEREST

GENERAL & BUSINESS COI RULES AND REQUIREMENTS APPLY TO ALL WCM WORKFORCE MEMBERS, UNLESS OTHERWISE SPECIFIED.

In furtherance of university Policy 4.14 and under the NYS NPCL §715(a), WCM is required to identify and manage various industry-specific Business Conflicts. Business Conflicts, or situations that may give rise to potential Business Conflicts, requiring disclosure can occur for any Workforce Member, irrespective of his or her role at WCM. Accordingly, all WCM Workforce Members must disclose the actual or potential conflict to the COI Office within thirty (30) days of onboarding, engaging in a new business relationship or signing a contract, whichever is earlier, and as annually required.

Disclosures involving leadership roles, governance responsibilities, or transactions with entities in which a Workforce Member has a personal interest may require additional governance review consistent with institutional governance requirements and applicable regulatory expectations. Such matters may also require additional documentation and/or Recusal from decision-making related to the external entity.

Depending on the nature of the conflict, specific research, education, and employment conflicts may also be considered a general and/or business COI, in which case the conflict will be managed collaboratively with the respective WCM Office(s). WCM Workforce Members must obtain approval for all activities that are considered Business Conflicts from a Division Chief, Department Chair, or Supervisor as applicable prior to providing any services to the external entity. Departmental approval does not replace the requirement to disclose through the COI Disclosure Survey or constitute institutional approval absent confirmation by the COI Office and/or COB, where applicable, nor does it limit any requirements set forth in a CMP.

To ensure impartiality in the provision of quality patient care, medical education and related activities, as well as maintaining scientific integrity in research, WCM identifies below general and business COIs created from:

- a. Activities that are prohibited, and
- b. Activities that may be permissible only in limited circumstances and subject to required disclosures, conditions, and approvals.

PROHIBITED ACTIVITIES

The following activities are prohibited because they create an unacceptable risk to patient care, research integrity, educational independence, institutional objectivity, regulatory risk or public trust, and cannot be adequately mitigated through disclosure, approval, or a CMP.

Acceptance of Gifts and Benefits

In accordance with university Policy 4.14, Workforce Members shall not accept any Gift that may potentially place them in a prejudicial position, interfere in any way with the impartial discharge of duties to the WCM, or reflect adversely on their integrity or that of WCM.

Acceptance of Gifts from patients, Industry, and other external parties are highly restricted due to the great potential for improper influence of clinical decision-making, institutional judgment, research integrity and education objectivity.

As a general rule WCM prohibits Workforce Members from accepting or soliciting Gifts, or any item of value, that could create the appearance of improper inducements or undue influence of clinical judgment (e.g., prescribing, referrals), research decisions, educational content, or fair business transactions, from:

- Patients, former patients, and their relatives;
- Industry Vendors; and
- Other non-industry external parties.

Due to the high risk of impartial patient care and improper influence of clinical decision-making, **WCM strictly prohibits Workforce Members from accepting, giving, and soliciting objectively non-nominal Gifts (including cash, and cash equivalents) from patients, former patients, and their relatives.**

In very limited circumstances, acceptance of certain Gifts from Industry and external parties may be permitted and require disclosure on the Annual Disclosure COI Survey as outlined in Section II.D of these Procedures.

Industry-Sponsored Speakers' Bureaus and Promotional Speaking

Industry-Sponsored Speakers' Bureaus -- speaking arrangements sponsored by an external organization where individuals are paid or incentivized to deliver presentations that promote the sponsor's products, services, or viewpoints – can pose a risk of COI due to the potential for influencing institutional judgment.

Because the content of Industry-sponsored Speakers' Bureaus is controlled by the sponsor, WCM Workforce Member participation can create real or perceived bias and compromise professional integrity.

To avoid the institutional COI, WCM prohibits Workforce Members from:

1. Participating in Industry-Sponsored Speakers' Bureaus, promotional speaking, or similar arrangements where:
 - a. the content (i.e., presentation materials, talking points, messaging) is controlled by the sponsor; or
 - b. the primary goal of the speaking arrangement is promotional rather than an independent scientific exchange; and
2. Accepting Honoraria, travel reimbursement, or other compensation for speaking engagements that are deemed "Promotional Speaking" / a Speakers' Bureau (i.e., not permissible).

If one or more Speakers' Bureau indicators apply (e.g., sponsor-created/branded slides; sponsor approval required for edits; required to present every slide; restricted Q&A; dinner programs not tied to scientific meetings), the activity likely qualifies as Promotional Speaking and is not permissible.

Permissible independent speaking (not promotional) may be allowed, but Honoraria/travel may still require disclosure in WRG per WCM Travel & Honoraria guidance (including the \$5,000 aggregate/year threshold for certain US nonprofit/academic/government/professional society payments, and disclosure timing within 30 days).

Ghostwriting and Undisclosed Authorship

When an individual or entity—often an Industry sponsor—writes or substantially contributes to a manuscript, article, or other scholarly work without proper disclosure, while authorship credit is given to another person.

WCM prohibits Ghostwriting by Industry or third parties because it compromises scientific integrity and violates publication ethics. Workforce Members must maintain editorial independence and final approval of any written work. Collaborations must not include undisclosed contributions from Industry investigators, medical writers, or technical experts.

Product Endorsement

WCM Workforce Members are prohibited from providing commercial statements of support, paid or unpaid, for specific drugs, devices and/or medical products, beyond their participation in Guideline, Federal or other Review Panels.

The following restrictions apply to individual Workforce Members endorsements:

1. No use of WCM branding (audio or visual).
2. No filming on WCM campus for promotional purposes without prior written approval of the COI Office and the Office of External Affairs.
3. Workforce Members must not make statements or offer opinions on behalf of WCM. Instead, they must only speak in their individual capacities (i.e., use language such as “I” instead of “we”).
4. Workforce Members may reference their affiliation and/or appointment at WCM.
5. Workforce Members must have final control of the content of all scripted language, which must receive prior written approval from the Office of External Affairs.

ACTIVITIES, RELATIONSHIPS, & INTERACTIONS SUBJECT TO DISCLOSURE, REVIEW, AND MANAGEMENT

All WCM Workforce Members are required to adhere to the following rules, restrictions, and disclosure requirements for activities, relationships, and interactions that create, or could potentially create, a general or business COI. Such activities, relationships, and interactions may be permissible only when they:

1. Are disclosed timely through the Annual COI Disclosure Survey (and any other required process),
2. Meet all conditions set forth in these Procedures and related guidance; and
3. Receive required approvals and/or a CMP, as applicable, and as determined by the COI Office and/or the COB.

EXTERNAL CONSULTING AND PROFESSIONAL SERVICES

External consulting agreements are direct contractual arrangements between a WCM Workforce Member and an external entity. The Workforce Member must make clear to the external entity that the Workforce Member does not represent WCM or the University. External consulting must not interfere with the

Workforce Member's duties and cannot provide services that are otherwise provided by WCM or the faculty member in the course of her/his usual duties. Such services include, but are not limited to, performing clinical practice and designing, executing or analyzing research experiments.

External payments made to a Workforce Member for service on a U.S. government-sponsored or U.S. nonprofit research advisory or review panel are exempt from the External Consulting procedures. This includes review panels for U.S. based universities and research institutions.

A. Contract Addendum

All external consulting agreements must incorporate the Cornell non-negotiable Contract Addendum. The Contract Addendum ensures that any clauses in a contract that violate the Workforce Member's obligations to the university or under export control law are rendered null and void. If a written agreement for services rendered does not exist, the Workforce Member may use the Employee External Engagement Agreement template in its place, which has been approved by the Office of General Counsel (OGC).

Exceptions to the Contract Addendum Requirement:

- i. Expert witness work for court cases and educational work and materials (e.g., CME, books deals) and pro bono legal work; and
- ii. Contracts unrelated to your work for WCM or the university do not require the addendum.

B. Time Commitment

WCM Faculty members must limit their external consulting to no more than the equivalent of one (1) 8-hour day per week or 52 days per year.

Non-Faculty Workforce Members must perform their external consulting outside of their agreed upon WCM working schedule (e.g., evenings, weekends, etc.).

WCM Workforce Members may not use WCM resources to conduct their external consulting activities.

C. Rules & Restrictions

External Consulting Agreements may be permissible for Workforce Members when:

- i. The activity does not interfere with WCM duties, time commitments, or performance;
- ii. Required Department/Manager approval is obtained in advance;
- iii. The Cornell Contract Addendum is used (unless an approved exception applies);
- iv. The engagement does not require or imply representation of WCM;
- v. Any IP, confidentiality, publication, export control, or data obligations are reviewed and addressed as required;
- vi. The arrangement does not create an unmanageable COI/COC, fraud/abuse concern, or patient-care bias risk; and
- vii. Workforce Members must adhere to all journal disclosure requirements for publications that result from external consulting.

COI Disclosure Requirements: WCM Workforce Members must disclose applicable external consulting agreements on their COI Disclosure Survey within thirty (30) days of entering into the consulting agreement or starting to provide services (whichever is earlier), and annually thereafter.

FINANCIAL RELATIONSHIPS, EQUITY INTERESTS, AND ACTIVITIES WITH EXTERNAL ENTITIES

This section applies to all WCM Workforce Members and addresses COI that may arise from financial relationships, funding, or other engagements with external entities. These circumstances are not limited to Start-Up companies and may involve established commercial organizations, non-profit entities, academic

institutions, foundations, or other third parties. Certain relationship types or activities may be subject to role-specific (e.g., senior leaders and board members) or carry additional requirements or limitations under applicable WCM policies (including Policy 4.14).

A conflict might arise out of an Equity Interest in an Industry entity or other external organization, a Start-Up that licenses technology from WCM, stock, stock options, or in the nature of royalties to be earned therein. Equity can create or appear to create incentives that may compromise objectivity or could bias or appear to bias the design, conduct, reporting, or research, particularly where human subjects are involved. You must accurately report any Equity Interests on your COI Disclosure Survey.

Executive/managerial roles with an external entity (e.g., CEO/CMO/President/VP/Medical or Scientific Director), including Start-Ups where the individual holds or may receive equity/royalties, are high-scrutiny relationships. Prior Department Chair/Head and COB approval is required before accepting/continuing the role; if approved, a Conflict Management Plan (CMP) is required. Disclosure: report the role and any related equity/compensation in the COI/Conflicts Disclosure Survey within 30 days of signing/starting (whichever is earlier) and update for material changes.

These roles may also create Conflict of Commitment (COC) risk due to time/effort demands—see COC section.

The permissibility of the activity and required management measures depend on the Workforce Member's role, responsibilities, involvement in research or education, supervisory authority, and institutional risk considerations.

COI Disclosure Requirements: WCM Workforce Members are required to disclose such relationships on their COI Disclosure Survey within 30 days of signing/starting (whichever is earlier).

PUBLICATION SUPPORT AND MEDICAL WRITING ASSISTANCE (NON-GHOSTWRITING)

Industry or third-party publication support (e.g., medical writing, editorial assistance, figure/graphic support, or publication coordination) may be permissible only when WCM authors maintain editorial independence and final approval of the content to be published, and when contributors are appropriately attributed (i.e., no Ghostwriting).

COI Disclosure Requirements: WCM Workforce Members are required to disclose such relationships on their COI Disclosure Survey within 30 days of signing/starting (whichever is earlier), and include:

- Any personal remuneration to the WCM Workforce Member tied to the publication (e.g., consulting, Honoraria), and/or
- Any ongoing financial relationship with the supporting entity that could create a real or apparent conflict.

SPEAKING, TEACHING, AND EDUCATIONAL PRESENTATIONS (NON-SPEAKERS' BUREAU)

WCM Workforce Members may participate in speaking arrangements that are not Industry-sponsored so long as:

- i. The content is developed and controlled by the Workforce Member, not an Industry-sponsor;
- ii. Any sponsor support is transparent and compliant with applicable policies/standards;
- iii. Compensation is reasonable and not tied to product promotion or prescribing/referrals; and
- iv. Required disclosures are made (including to learners/audiences as applicable).

COI Disclosure Requirements: WCM Workforce Members are required to disclose such relationships on their COI Disclosure Survey within 30 days of completing the activity (for Honoraria) and within 30 days of completing travel (for paid/reimbursed travel):

- Honoraria/compensation for lectures/speaking engagements (and the payor/entity).
- Paid or reimbursed travel provided by an external entity (and the payor/entity).
Any other payments/transfers of value or equity from an external entity related to your institutional responsibilities (and covered family, if applicable).

ACCEPTANCE OF NON-PERSONAL ITEMS/BENEFITS

Permissible when:

- Modest Gifts or other social amenities so long as such amenities are not extravagant under the circumstances and comply with state and federal regulations.
- Not a personal gift and not provided to influence decision-making;
- Falls with a documented, allowable category (e.g., institutional support processed through appropriate channels; educational materials of nominal value if permitted by WCM or Cornell policies; or items provided under a signed agreement to WCM rather than to the individual, in which case the item is institutional property and may not be retained for personal use by the Workforce Member);
- Reviewed/approved through applicable processes (External Affairs, Procurement, OOC/COI Office).

START-UP COMPANIES, COMMERCIALIZATION, AND ENTREPRENEURIAL ACTIVITIES

Consistent with its mission and the Bayh-Dole Act of 1980, WCM encourages and supports Workforce Member participation in the development and commercialization of WCM intellectual property (IP) by entering into relationships with existing business entities and Start-Up companies. Specific to this section, applicable Workforce Members are limited to Faculty, Non-Faculty Academics, and Staff.

Applicable Workforce Members are required to disclose any involvement in Start-Up, Commercialization, or Entrepreneurial Activities. However, the nature of permitted activities, applicable restrictions, and required management strategies vary based on the Workforce Member's involvement in research, supervisory responsibilities, and interaction with patients or learners.

For purposes of this Procedure, Start-Up, Commercialization, and Entrepreneurial Activities include the formation of, financial interest in, governance or advisory roles with, or receipt of funding from an external entity that seeks to commercialize healthcare, biomedical science, or related innovations related to a Workforce Member's role or expertise at WCM. Such relationships can take various forms including, but not limited to:

- i. Creating or inventing University IP that is licensed to a WCM Workforce Member's Start-Up company;
- ii. Founding and/or taking a financial interest in a Start-Up company;
- iii. Consulting/serving on advisory boards of the licensee; or
- iv. Receiving funding from a licensee to advance knowledge in areas related to that of the original IP or in new areas of research.

While these relationships may advance WCM's mission, faculty recruitment and retention, promote research innovation, develop workforce opportunities for graduates, and societal impact, they may also create real or apparent COIs or COCs or may not be consistent with the terms of the sponsored funding.

Such conflicts arising Workforce Member involvement with a WCM-associated Start-Up may be successfully managed to protect research integrity, ensure appropriate independence for students and

trainees, support compliance and responsible entrepreneurial engagement, foster an open academic environment, and ensure Workforce Members meet their primary professional commitments to WCM.

Permissible when:

- Disclosed and reviewed;
- Appropriate safeguards address research integrity, student/trainee protections, and use of resources;
- Human participant research: where applicable, the researcher has successfully rebutted the presumption (and complies with any required management conditions).
 - If a Start-Up or commercialization relationship creates a conflict and the individual seeks to serve as an investigator (or oversee investigators) on human participant research involving the company or technology, the Rebuttable Presumption process applies. See the Rebuttable Presumption section.
- Institutional COI issues (e.g., licensing WCM IP) are assessed and managed;
- CMP and monitoring are implemented as required.

COI Disclosure Requirements: Start-up-related interests must be disclosed in the Conflicts Disclosure Survey as early as the planning/preliminary phase (and in any event no later than within 30 days of a material change, such as forming/founding a company, acquiring equity, taking on an officer/board role, receiving related IP rights/royalties, or initiating a licensing/Start-Up transaction). Early disclosure is expected to allow COI review and, where applicable, COB/CMP coordination before WCM licensing activities proceed and/or before initiating related WCM research activities.

INDUSTRY-SPONSORSHIP (NON-CME OR CME PROVIDED BY AN OUTSIDE ENTITY)

A. Meals/Refreshments (Narrowly Defined Circumstances)

Permissible when:

- Pre-approved under WCM policy in limited circumstances (e.g., bona fide training, approved consulting, or another defined allowable context);
- Modest/reasonable, not routine, not tied to marketing, and not conditional on business/prescribing/referrals; and
- Properly documented and disclosed when required.

Food restrictions do not prohibit departments from accepting unrestricted Gifts from Industry.

B. In-Kind Monetary Support

In very limited circumstances, acceptance of In-Kind support from Industry and external parties may be permitted and require disclosure on the Annual COI Disclosure Survey as outlined in Section ## of these Procedures.

C. Events/Meetings

This section governs external sponsorships of WCM programs, events, and meetings -- that is, situations where a company or for-profit organization provides monetary or in-kind support to WCM. It applies institution-wide; WCM Workforce Members are responsible for ensuring that any sponsorship proposals involving their department or program comply with this section before commitments are made.

Companies and for-profit organizations (i.e., "Sponsors") look to support WCM and its programs through sponsorships, providing either monetary or in-kind Gifts. All sponsorship proposals must be approved by the respective department chair and, thereafter, presented to the Office of External Affairs and the COI

Office for approval. Written approval must be obtained prior to execution of any sponsorship agreement or acceptance of funds or in-kind support.

Non-profit entities such as foundations, professional groups, and membership associations are not subject to the guidelines above.

Most sponsorships which are subject to this guidance will be considered philanthropic. In such cases, the Office of External Affairs will coordinate the signing of sponsorship agreements and the issuing of tax receipts to the funder.

1. No WCM endorsement of any kind for any sponsor product is permitted.
2. Sponsor is not permitted to provide meals/refreshments or branded swag/products or host an information table at the event.
3. Sponsors may use their company name and/or logo in the event materials, subject to WCM review and approval (e.g., signage, invitations, flyers, programs, etc.).
4. Sponsor employees and affiliates are permitted to participate in sponsored event activities, but only if the activities support the academic focus of the WCM-hosted event (e.g., panel discussions).
5. Sponsor speakers are not permitted to mention any of their company products or services in a promotional manner at the event.
6. Final control over content delivered by WCM faculty must be retained by the faculty member and not the sponsor.

D. Sponsored/Reimbursed Travel and Honoraria

Workforce Members should be aware that certain payments or transfers of value from applicable manufacturers may be publicly reported under the U.S. Centers for Medicare & Medicaid Services (CMS) Open Payments (Sunshine) program, and disclosures and management may be required to address real or perceived bias and reputational risk. Various regulatory and oversight groups require institutions to monitor external funding of activities for their students and employees involved in research and clinical care. In addition, payments made by Industry are reported by Industry to the CMS Open Payments database.

Travel and Honoraria disclosures must be made through the **COI Disclosure Survey**, and such disclosures are required when payments or reimbursements are directly made, or originate from:

- i. A U.S. entity “for-profit” entity;
- ii. A U.S. academic entity, “non-profit” entity, governmental agency, or professional society, when the amount in aggregate exceeds \$5,000 per year; or
- iii. A non-U.S. entity.

Acceptance of Sponsored Travel and Honoraria may be permissible when:

- Appropriately disclosed within required timeframes;
- The payment or reimbursement is reasonable and directly related to a legitimate academic, educational, consulting, or research purpose;
- The payment or reimbursement is not conditioned on promotional activity or business generated activities;
- Subject to conflict management plan provisions where a related SFI has been identified, including Recusal from purchasing, procurement, or other institutional decisions involving the sponsoring entity where applicable; and
- Consistent with applicable sponsor terms of award, CMS Open Payments reporting obligations, and, for CME-related travel and Honoraria, the accredited provider's requirements.

Travel and Honoraria disclosures are not required when payments or reimbursements are made from Cornell University or WCM, as well as subsidiaries and affiliates of WCM (i.e., WCM-Qatar, NYP, Hamad

Medical Corporation, Sidra Medicine, Houston Methodist Hospital, Salzburg Weill Cornell, Weill Bugando School of Medicine, and the Qatar Foundation.

COI Disclosure Requirements: All sponsored and reimbursed travel must be disclosed within thirty (30) days of completing travel. Honoraria must be disclosed within thirty (30) days of completing the activity for which payment is received. Failure to disclose within required timeframes may result in escalation and corrective action consistent with these Procedures.

COMMUNITY, CIVIC, AND GOVERNMENTAL ACTIVITIES

Workforce Members considering elected or appointed service on government councils, boards, or commissions should discuss the opportunity with their Department Chair or supervisor prior to accepting to ensure no conflict of interest or commitment exists. Such activities are subject to standard disclosure requirements and the external activity effort limitations set forth in this SOP. (See University Policy 4.14).

IV. CONFLICTS OF COMMITMENT

Conflicts of Commitment arise when external professional activities or commitments interfere—or reasonably appear likely to interfere—with a Workforce Member’s ability to meet their WCM/Cornell responsibilities. Consistent with University Policy 4.14, Workforce Members are expected to disclose external commitments that may adversely affect performance of institutional duties.

A. Academic Workforce Member COC

- For academic employees, COC are managed primarily through chair/chief approval and effort limits for external activities. Academic employees must obtain prior approval from their Department Chair/Division Chief (or other designated approver) before engaging in external activities (e.g., consulting). In addition, academic employees must:
- Ensure total effort for all external activities does not exceed 20%;
- Disclose the activity on WCM’s Conflicts Disclosure Survey within 30 days of signing the agreement or starting the activity (whichever is earlier); and
- Incorporate Cornell’s Non-Negotiable Addendum into external agreements (as applicable). Any academic employee who intends to spend more than 20% effort on non-WCM activities or hold an employee position with an external entity must obtain prior COB approval.
- Faculty external consulting (additional limit): Faculty must limit external consulting to no more than the equivalent of one (1) 8-hour day per week and ensure it does not interfere with WCM duties.

B. Non-Academic Workforce Member Conflict of Commitment (COC)

- Non-academic Workforce Member **COC** matters will be identified through the **COI Disclosure Survey** and escalated to **Human Resources (HR) for review and management**.
 - a. **Process and Responsibilities:**
 - HR will review disclosures and work with department leadership to ensure any instance of COC is operationally manageable.
 - As part of escalation, HR will propose a **CMP** to address the disclosed conflict(s). The implemented CMP will be managed by HR and reviewed annually, at a minimum, and as needed, ensuring compliance and operational integrity.
 - The discloser or department may be asked to provide additional information at any point during this process.

C. Use of WCM Resources for External Activities (Administrative Control; Applicable to ALL Workforce Members)

Other than library materials and assigned office space, WCM Workforce Members are not permitted to use WCM resources (including WCM stationery or letterhead) for extramural activities without first obtaining written approval from COB and arranging for the payment for such use. WCM resources, including facilities, equipment (computers, telephones, research equipment, etc.), materials (such as office and laboratory supplies), data (including de-identified data), personnel, and services (including the Institutional Review Board, the Institutional Animal Care and Use Committee, etc.) exist for use by WCM and not to conduct the business of another entity or personal gain.

COI Disclosure Requirements: WCM Workforce Members are required to disclose such relationships on their COI Disclosure Survey within 30 days of signing/starting (whichever is earlier).

V. EMPLOYMENT RELATED CONFLICTS

EMPLOYMENT RELATED COI RULES AND REQUIREMENTS APPLY TO ALL WCM WORKFORCE MEMBERS, UNLESS OTHERWISE SPECIFIED.

Note on Scope: This section addresses Nepotism, which is the employment-related conflict managed directly under this section. The other three categories of employment-related conflict identified in the WCM Conflicts Overview table (page 7) are addressed as follows:

- *Conflicts of Commitment: See Section IV of these Procedures.*
- *Supervisory or reporting relationships involving personal relationships: Where such relationships involve Family members (as defined in these Procedures), refer to University Policy 6.14 (Avoiding Nepotism) and WCM HR Policy 225. For Academic Staff, also refer to the Academic Staff Handbook. Where a romantic or sexual relationship exists between a faculty or staff member in a position of authority and a student or postgraduate (including postdoctoral fellows, residents, and fellows), refer to University Policy 6.3 (Consensual Relationships), administered at WCM by HR and the Office of Civil Rights and Investigations. Where such a relationship involves a research trainee or student in the context of a Start-Up company, see the Supervisory Conflicts provisions in Section VII.*
 - *Note: supervisory or reporting relationships involving personal relationships between two non-student employees that fall outside the definition of Family under the applicable Nepotism policies may not be expressly addressed in current WCM policy; such situations should be disclosed to HR and the COI Office for case-by-case review.*
- *Faculty time diverted to outside clinical, consulting, or entrepreneurial activities: See Section III (External Consulting and Professional Services; Start-Up Companies, Commercialization, and Entrepreneurial Activities) and Section IV (Conflicts of Commitment) of these Procedures.*
- *WCM-Q personnel with questions about employment-related conflicts should contact the WCM-Q Human Resources office as the initial point of contact. WCM-Q HR serves as the primary triage resource for employment-related COI referrals on the Qatar campus and coordinates with the COI Office as needed to ensure consistent application of these Procedures.*

Nepotism

Nepotism **matters** will be identified through the **COI Disclosure Survey** and escalated to **Human Resources (HR)** for review and management.

a. Process and Responsibilities:

- HR will review disclosures and work with the Department Chair and a Senior Associate Dean to ensure any instance of Nepotism is operationally manageable.
- As part of escalation, the Senior Associate Dean and/or HR will propose a **CMP** to address the disclosed conflict(s). The implemented CMP will be managed and signed off by Department Chair and Senior Associate Dean, and reviewed annually, at a minimum, and as needed, ensuring compliance and operational integrity.

- The discloser or department may be asked to provide additional information at any point during this process.

VI. RESEARCH-SPECIFIC CONFLICTS

RESEARCH RELATED COI RULES AND REQUIREMENTS APPLY TO WCM WORKFORCE MEMBERS INVOLVED IN RESEARCH.

These Research Conflicts procedures are designed to align with applicable federal sponsor requirements (including Public Health Service (PHS) Financial Conflict of Interest regulations, where applicable), sponsor-specific COI requirements, and WCM/Cornell policies governing investigator disclosures, review, and management. Where required by sponsor or regulation, disclosures and management actions will be documented and retained consistent with institutional recordkeeping requirements.

In addition to the rules and standards for Business Conflicts stated above, Workforce Members involved in research are subject to additional WCM and federal rules and standards governing Research Conflicts, or situations that may give rise to potential Research Conflicts. This applies to faculty, non-faculty academics, students, volunteers in research, and other staff involved in research. Refer to the respective guidance documents listed in the 'Reference' section of these Procedures for a comprehensive overview.

Research-Related COI Evaluation

When an investigator discloses an SFI (as defined in university Policy 1.7]), the COI Office evaluates whether the interest is related to any sponsored research in which the investigator participates. An interest is considered related when it could directly and significantly affect, or could reasonably appear to affect, the design, conduct, or reporting of the research. When a related SFI is identified, the COI Office will ensure a management plan is in place consistent with the evaluation criteria described in this SOP.

PHS FCOI Reporting

When the related SFI involves research funded by NIH or another sponsor that follows PHS FCOI regulations (42 CFR Part 50, Subpart F), the institution must submit an FCOI report. The COI Office will submit the report through eRA Commons, or to the prime institution if WCM is a sub-awardee. FCOI reports must be submitted prior to expenditure of award funds for new awards, within 60 days of identifying a new FCOI for ongoing awards and updated annually. OSRA will be notified with the Commons FCOI ID and corresponding WRG sponsored programs number upon submission.

SMALL BUSINESS INNOVATION RESEARCH (SBIR) AND SMALL BUSINESS TECHNOLOGY TRANSFERS (STTR)

While SBIR/STTR participation is typically faculty-initiated/PI-driven, the requirements in this section apply to any WCM Workforce Member participating in an SBIR/STTR project, including faculty and non-faculty personnel (e.g., staff, trainees), where applicable.

WCM supports faculty participation in SBIR and STTR programs as this may allow faculty and their Start-Ups to make rapid progress towards commercialization of important inventions. Prior to applying for SBIR/STTR projects, Workforce Members shall contact the Office of Sponsored Research Administration (OSRA), the Center for Technology Licensing (CTL), and the COI Office. Notification to the appropriate

WCM's Offices, allows WCM to ensure SBIR/STTR projects are conducted consistent with its principles of academic and research integrity, in alignment with institutional policies, and in compliance with applicable laws and regulations.

The small business entity (SBE) and Principal Investigator are responsible for meeting all eligibility and award requirements at the time of application and grant award. A failure to do so may constitute fraud. A CMP must be approved for the WCM PI before the sub-award from the SBE is accepted. Any involvement of a close family member as PI of the SBE will need approval of the WCM COB.

An individual COI, and potentially institutional COI, exists when a WCM faculty member or research team member has a financial interest in the SBE and conducts research funded by the SBE. Financial interests in the SBE must be disclosed to the COI Office prior to application. If the SBE has licensed or intends to license WCM intellectual property, the arrangement may also create an institutional COI. In both cases, the need for a CMP addressing individual and, where applicable, institutional conflicts will be assessed prior to the sub-award being accepted.

For detailed SBIR/STTR requirements, including phase-specific conditions, PI eligibility restrictions, and OSRA/CTL notification procedures, refer to the WCM SBIR/STTR Guidelines.

Rebuttable Presumption

WCM applies a rebuttable presumption that research personnel involved in study design, participant selection, the informed consent process, or clinical management of a trial may not hold a significant ongoing financial interest or executive position in an entity whose interests could be affected by the research (for example, equity, an officer/director role, intellectual property rights, or Start-Up ownership). The default position is that such participation is not permitted unless compelling circumstances justify an exception.

Compelling circumstances may include, for example, uniquely specialized expertise or the lack of a feasible non-conflicted alternative, and require risk-calibrated mitigation and participant disclosure, where applicable.

A request to rebut the presumption is required only when the conflicted individual seeks to serve as an investigator (or manages/oversees someone acting as an investigator). Conflicted individuals are generally permitted to serve as consultants on such studies.

To request an exception, the conflicted individual must submit a letter addressing:

1. the individual's expertise and research;
2. the entity (including its purpose, capitalization, and relevant products/services);
3. the individual's role with the entity;
4. the proposed study details (including IRB protocol number(s));
5. the compelling circumstances that justify why the conflicted individual, rather than a non-conflicted investigator, should serve as PI/co-investigator, and why a consulting role would not be sufficient; and
6. proposed mitigation strategies.

The conflicted researcher should submit the rebuttal request letter to the COI Office at **conflicts@med.cornell.edu** for an initial administrative review. The request is then forwarded for COB

review, which evaluates whether the researcher has successfully rebutted the presumption and communicates any required COI management conditions. The IRB is then engaged, where applicable, to ensure that any required informed consent disclosure language and participant protection measures are addressed. The researcher should be prepared to meet with COB to discuss the request if asked.

External Research Personnel

All external investigators must complete an external investigator Study Specific Report (SSR) whether they have any relationships to disclose. The SSR should remain in the study file for the duration of the study. Any identified COIs will be reviewed by the COI Office, reflected in the ICF where applicable, and managed in coordination with the external individual's primary institution.

Investigators from NewYork-Presbyterian and Hospital for Special Surgery should file a COI Disclosure Survey with WCM rather than the external investigator SSR.

VII. EDUCATION-SPECIFIC COI

EDUCATION RELATED COI RULES AND REQUIREMENTS APPLY TO WCM STUDENTS AND OTHER WORKFORCE MEMBERS INVOLVED IN EDUCATIONAL ACTIVITIES

This section applies to Workforce Members and learners involved in medical education, training, evaluation, or accredited continuing medical education (CME) activities, including individuals in a learner status and individuals responsible for planning, teaching, evaluating, or administering educational activities. Conflicts in education settings can create real or perceived bias, undermine educational integrity, and compromise trust.

WCM-Qatar Note: The accreditation framework and program structure at WCM-Q differ from the New York campus. WCM-Q holds dual accreditation through ACCME and the Department of Healthcare Professions (DHP). WCM-Q does not offer an undergraduate program; graduate students associated with WCM-Q research are typically affiliated with external institutions. References in this section to OCME and OME standards apply to the New York campus. WCM-Q faculty, staff, and learners should contact the WCM-Q Division of Medical Education and Division of Continuing Professional Development (CPD) for guidance on local accreditation standards, applicable program requirements, and education-related COI processes specific to the Qatar campus.

Medical Education and CME-related conflicts must be identified, disclosed, and mitigated in accordance with applicable accreditation standards, including the ACCME Standards for Integrity and Independence in Accredited Continuing Medical Education, as implemented by OCME and OME. Education-related conflicts must be mitigated prior to delivery, separated from promotion, and disclosed to learners where required by OME/OCME processes.

- a. Conflicts involving Admissions or Faculty Evaluators refer to WCM Policy OME-900.24
 - i. Graduate Students
- b. CME, including but not limited to:
 - i. Social events part of CME (OCME policy)
 - ii. Faculty Honoraria and Expense Reimbursement

CME-related Honoraria, consulting fees, and travel reimbursement from external entities are subject to standard COI Disclosure Survey requirements and are evaluated against the same financial interest

thresholds used for all other external compensation. In addition to all WCM policies, all financial policies related to participation in a WCM CME activity may be subject to additional regulations as put forth by either the ACCME or the WCM CME Committee at its discretion. Even if ACCME standards and OME and OCME policies are met, the requirements outlined in this Procedure may require an additional or alternative mitigation plan to meet WCM requirements.

If an individual participating in CME planning/teaching has an external relationship/financial interest that is already disclosed in the conflicts disclosure survey, OCME/OME and the COI Office may coordinate as needed to ensure any institutional COI considerations are managed appropriately.

If the external relationship/financial interest is not already disclosed/on file, the individual is responsible for updating the conflicts disclosure survey (e.g., within 30 days of a material change or within 30 days of signing/starting an external agreement, where applicable). COI Office review is therefore reactive to the disclosure, and not a prerequisite approval step for CME activities.

SUPERVISORY CONFLICTS

Students actively enrolled in an institution of higher education's degree program are not allowed to receive direct compensation or participate in research funded by the Start-Up company unless otherwise agreed upon by the COB. If any student or trainee participates in research-related projects, but not necessarily funded by the Start-Up company, he/she must receive full disclosure of the relationship between the supervising faculty/staff member and the Start-Up company. Institutional contractual arrangements (e.g. research support, grants, contracts, unrestricted Gifts, materials or other financial instruments) should be made between WCM and the Start-Up company that specifically provide for such supervised staff's duties.

VIII. CONFLICT REVIEW, ASSESSMENT, MANAGEMENT AND APPEAL PROCESSES

The COI Office conducts initial reviews of the disclosures or revisions to prior disclosures collected through the COI Disclosure Form/Survey and categorizes them as Business Conflicts of Interest or Conflicts of Commitment (BCOI), Research Conflicts of Interest (RCOI) and Education Conflicts of Interest (ECOI). The COI Office serves as the central intake and coordination function and routes disclosures to the appropriate managing office(s) as needed.

A. General/Business Conflicts

General COIs and COCs (i.e., Business COIs) applicable to all WCM Workforce Members are assessed and managed by the COI Office, except for Nepotism cases, which are managed and assessed by Human Resources. To the extent any COI or COC could be considered a violation of the Stark Law (Stark) relating to physician self-referral (42 U.S.C. § 1395nn) or the Federal or State Anti-kickback Statute (AKS) (2 U.S.C. § 1320a-7b and NY Social Services Law § 366-d and § 145-b), this procedure still requires disclosure. Management of activities that would trigger the application of the Stark or AKS laws should be referred to the OOC or the Office of General Counsel (OGC) for guidance. Nothing in this procedure should be construed to promote or allow for activity that would violate the Stark or AKS laws.

B. Research Conflicts

RCOI will be assessed and managed by the COI Office. Identified COIs relating to RCOI that do not warrant COB review will be managed by the COI Office under the purview of the Chief Research Compliance Officer. Those posing a significant RCOI conflict will be escalated by the COI Office to the COB for further review and assessment. As part of the escalation, the COI Office will propose a CMP to manage the disclosed conflict(s). The discloser may be asked to provide additional information at any time during this process.

C. Education Conflicts

Conflicts associated with ECOI will be assessed and managed by the OME and/or the OCME unless they involve a RCOI or BCOI, in which case they will be assessed and managed by the COI Office and raised with the COB. All other conflict types involving undergraduate students, medical students, graduate students, or postdoctoral researchers are managed and mitigated by the OME or OCME. As part of the escalation process, the COI Office will propose a CMP to manage the disclosed conflict(s). The discloser may be asked to provide additional information at any time during this process.

WCM-Q Workforce Members: Education conflict matters on the Qatar campus are triaged through the WCM-Q Division of Medical Education and Division of CPD, which coordinates with the COI Office and, where applicable, with OME and OCME in New York.

D. Conflicts Oversight Board Review

The COB will assess the potential impact of the conflict on institutional business integrity and objectivity to determine a management and mitigation strategy. The COB may deem a disclosed COI unmanageable due to risk level, significant financial interest, violation of university policy or guidelines, preservation of research integrity, or the like. The COB will review proposed CMPs and, where appropriate, approve a plan to mitigate the risks associated with the disclosed conflicts. The COB may also determine that a proposed CMP requires modification or that the conflict is unmanageable. The responsible department will develop the proposed CMP in coordination with the disclosing individual and other relevant stakeholders. Once finalized and approved by the COB, the CMP will be issued by the COI Office and is required to be followed by the applicable WCM Workforce Member. The responsible department will also review active CMPs on at least an annual basis, or more frequently as warranted by changes in role, disclosure updates, or institutional needs.

E. Appeal Process

Appealable determinations include, but are not limited to, findings that a conflict is unmanageable, imposed restrictions through a CMP, and required role modifications or Recusals.

When a COI or COC is deemed unmanageable by the COB in a majority vote, the impacted party will be notified of the determination. Per University Policy 1.7, all university research personnel have standing to appeal research-related COB decisions adversely affecting them to the Institutional Official (IO) following a discussion with the COB. The Provost for Medical Affairs is the IO for WCM and is considered Senior Leader responsible for this appellate process. Affected personnel may direct their appeals request to the

attention of the Provost for Medical Affairs within ten (10) business days of receiving the COB's determination.

Non-research personnel have the right to appeal conflict determinations. Non-research related appeal requests should be directed to the OOC within ten (10) business days of receiving the COB's determination.

F. Acknowledgement and Compliance with a Conflict Management Plan

All Workforce Members that are issued a CMP must acknowledge, sign, and abide by the measures outlined in the CMP to mitigate the risks resulting from actual or perceived COIs. CMPs not being appealed are in effect and must be adhered to on the tenth (10th) business day after issuance regardless of acknowledgement and signature.

IX. TRAINING

WCM requires training of all Workforce Members to educate them on COIs. Education information is available on the COI webpage and training may be required at onboarding and on a recurring basis, as determined by WCM.

X. RECORDKEEPING AND CONFIDENTIALITY

All COI disclosures, assessments, and CMPs will be securely maintained by the institution. COI disclosures, assessments, and CMPs may be shared outside the organization, as deemed necessary by the COB and the Office of General Counsel, to facilitate further assessment or the facilitation of the COI management process outlined in this policy or as required by law or institutional policy.

XI. COMPLIANCE WITH THESE PROCEDURES AND UNIVERSITY CONFLICT POLICIES 1.7 & 4.14

WCM Workforce Members are responsible for adhering to these procedures and the related university policies on COI and COC. Failure to disclose an actual or potential COI or non-compliance with a CMP will be evaluated on a case-by-case basis and could lead to corrective action, up to and including termination. Failure to acknowledge or sign a CMP that has not been appealed does not limit its enforceability by WCM against a Workforce Member. Instances of non-compliance that potentially involve a lapse of professionalism may lead to the engagement of the Office of Professionalism for evaluation and intervention.

The OOC will audit disclosures and compliance with management plans as appropriate. Audit findings may be escalated to senior leadership and relevant governance bodies as appropriate.

References

- [University Policy 1.7](#) – Research Related Conflicts of Interest and Commitment
- [University Policy 3.14.1](#) – Employee Gifts and Awards
- [University Policy 4.14](#) – Non-Research Conflicts of Interest and Commitment
- [University Policy 4.6](#) – Standards of Ethical Conduct

- [University Policy 6.14 – Avoiding Nepotism](#)
- [Human Resources Policy 225 – Nepotism](#)
- [Academic Staff Handbook](#)
- New York State Not-For-Profit Corporation Law §§ 715-715(a)
- HHS Regulation 42 CFR Part 50 Subpart F
- Conflicts Oversight Board Charter
- [Consulting Guidelines](#)
- [Executive Positions Guidelines](#)
- [Event Sponsorship Guidelines \(non-CME\)](#)
- [Leadership Board Membership Guidelines](#)
- [Product Endorsement Guidelines](#)
- [Rebuttable Presumption Guidelines](#)
- [SBIR/STTR Guidelines](#)
- [Scientific and Medical Advisory Board Membership Guidelines](#)
- [Start-up Guidelines](#)
- [Travel and Honoraria Disclosure Guidelines](#)
- [WCM Conflict Policies at a Quick Glance](#)

WCM Procedures Approval

This procedure was reviewed and approved by WCM-Executive Policy Review Group on April 21, 2026.

Version History

Date	Author	Revisions
04/21/2026	Office of Research Integrity – Conflicts Office	Original date of issue.