

[Insert Association Logo Here]

# Code of Ethics Certification [YEAR] CHECKLIST

Medical technology companies may participate in this certification program. The certification affirms that the company has agreed to abide by the [Insert Association Name] Code of Ethics on Interactions with Health Care Professionals [Name of Code] and further that they have implemented policies and procedures to implement the [Name of Code] as part of an effective compliance program. The Certifications and the Logo License Program operate on a Calendar Year basis and both are now being accepted for [year].

## A New Certification requires (Attachment A):

### Two Signatures

- the signature of the **Chief Executive Officer** or other senior individual with equivalent responsibilities (CEO);
- and
- the signature of the **Chief Compliance Officer** or other senior individual with equivalent responsibilities (CCO).

### Compliance Contact Information for posting on the [Insert Association Name] website with either:

<input type="checkbox"/> <b>Compliance Contact</b> (Individual or Dept. Name) <b>+</b> <b>Telephone#</b> and/or <b>Email Address</b> (Compliance Hotline Optional)	- OR -	<input type="checkbox"/> <b>Compliance Hotline</b>
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### Electronic Submission:

- Please transmit a PDF electronic copy via email to:  
[Insert Email Address]
- Please email a graphic file of your Company's logo to:  
[Insert Email Address]

### [Name of Code] Logo License Agreement (Optional)

[Insert Association Name] has developed a distinctive Code of Ethics Supporter Logo ("Logo") for medical technology manufacturers that have executed the Certification of Adoption of the [Name of Code] of Ethics ("Certification") and wish to use the Logo.

#### A New Participant in the Logo Program requires:

- A Completed Certification or Renewal Certification form (meeting the requirements noted above)
- A completed Logo License Agreement Form (Attachment C) with the signature of the CCO emailed to [Insert Email Address].
- Contact information to receive the invoice for the Royalty Payment ([Insert Payment Amount]/ year prorated)

## A Renewal Certification requires (Attachment B):

### One Signature

- the signature of the **Chief Compliance Officer** or other senior individual with equivalent responsibilities (CCO), to attest that their company has previously certified and that the company continues to abide by the [Name of Code]

### Updated Compliance Contact Information:

- Update Compliance Contact Information if it has changed from the previous certification

### Electronic Submission:

- Please transmit a PDF electronic copy via email to:  
[Insert Email Address]

[Insert Code Logo]

For Question re: the Certification, Renewal Certification, or the Logo Supporter Program, contact:  
[Insert Contact Information]

#### A Renewal Participant in the Logo Program requires:

- A Completed Certification or Renewal Certification form (meeting the requirements noted above)
- A completed Logo License Agreement Form (Attachment C) with the signature of the CCO emailed to [Insert Email Address].
- Updated Contact information, if it has changed, to receive the invoice for the Royalty Payment [Insert Payment Amount]/ year prorated)

# Attachment A

New Certification Form

**[YEAR]**  
**CERTIFICATION OF ADOPTION OF THE [NAME OF CODE] OF ETHICS**

Pursuant to the [Name of Code] of Ethics on Interactions with Health Care Professionals (“[Association Name] Code”), medical technology companies may certify that they have agreed to abide by the [Name of Code], and further that they have implemented policies and procedures to implement the [Name of Code] as part of an effective compliance program. This certification requires a company’s Chief Executive Officer (CEO) and Chief Compliance Officer (CCO), or other senior individuals with equivalent responsibilities, to sign and affirm that their company has taken the steps identified below. [Association Name] will list the certifying company on the [Association Name] website in [Year] as a company that submitted this certification. (see [Insert Website]).

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On behalf of \_\_\_\_\_  
(identify Company name or relevant portions/subsidiaries) (“Company”), I certify that, to the best of my knowledge and as of the date of this certification:

I have read and am familiar with the provisions of the [Association Name] Code of Ethics on Interactions with Health Care Professionals (“Name of Code”).

I am knowledgeable about our Company’s compliance and ethics program (“Compliance Program”) as it relates to the [Name of Code].

Our Company requires all officers, employees, and agents to abide by the [Name of Code] for all interactions involving Health Care Professionals as that term is defined in the [Name of Code].

Our Company has communicated the provisions of the [Name of Code] to our dealers and distributors with the expectation that they will adhere to them.

Our Company has made a copy of the [Name of Code] and/or a link to the [Name of Code] available on our Company’s public Web site.

Our Company adopted the [Name of Code] and implemented an appropriately tailored effective compliance program related to our interactions with Health Care Professionals by taking the following steps:

1. Written Policies and Procedures: Established and implemented policies and procedures consistent with the provisions of the [Name of Code] .
2. Compliance Officer/Committee: Established effective oversight over the Compliance Program, including: (a) identifying a senior manager in our Company who is responsible for compliance with our Company’s policies and procedures consistent with the [Name of Code]; and (b) creating a compliance committee or other equivalent process comprised of senior leadership who are actively engaged in the oversight of our Compliance program.

3. Training and Education: Provided comprehensive training to those employees and contractors whose job requirements make the information relevant on Company policies that are based on the [Name of Code], and implemented procedures to ensure ongoing training programs for such new employees and contractors.
4. Lines of Communication: Established a resource for employees to ask questions as well as a reporting mechanism to facilitate anonymous internal reporting of suspected violations of Company policies that are based on the [Name of Code], and publicized this mechanism, or contact information for our compliance department, on [Association Name] Web site.
5. Auditing and Monitoring: Instituted processes within our Company to conduct internal monitoring and auditing of the Company policies and procedures that are based on the [Name of Code] and to assess the overall effectiveness of our Company's Compliance Program.
6. Enforcement: Established a disciplinary process for violations of those policies and procedures that support the [Name of Code].
7. Corrective Action: Established a process to respond to suspected deficiencies or violations of Company policies that are based on the [Name of Code].
8. Ensuring Effective Code Implementation: Ensured effective implementation of Code principles, by taking following concrete steps:
  - A. Appointed a senior executive responsible for oversight of the Company's compliance with this Code;
  - B. Adopted practical, useful, and meaningful policies, guidance and tools intended to ensure compliance with the Code;
  - C. Provided effective and ongoing training and education on the Code and on company policies implemented to ensure Code compliance;
  - D. Ensured that senior management and the company's board of directors or other governing body have expressly committed to support the Code;
  - E. Instituted appropriate internal monitoring and auditing mechanisms;
  - F. Created safe mechanisms for, and encourage, employees who raise concerns;
  - G. Required that third party intermediaries (including consultants, distributors, sales agents, and brokers) that may interact with Healthcare Providers in connection with Company Medical Technologies agree to comply with this Code; and
  - H. Provided a certification to [Association name] that the Company has signed onto the [Association name] Code of Ethical Conduct, so those Member Companies can be publicized.

[Insert Association Logo Here]

CEO Signature  
(or equivalent) \_\_\_\_\_

Name: \_\_\_\_\_

Date: \_\_\_\_\_

Title: \_\_\_\_\_

Company/  
Division: \_\_\_\_\_

Mailing  
Address: \_\_\_\_\_

CCO Signature  
(or equivalent) \_\_\_\_\_

Name: \_\_\_\_\_

Date: \_\_\_\_\_

Title: \_\_\_\_\_

Company/  
Division: \_\_\_\_\_

Mailing  
Address: \_\_\_\_\_

**COMPLIANCE CONTACT INFORMATION FOR [ASSOCIATION NAME] WEBSITE (REQUIRED):**

**Name:** \_\_\_\_\_

**Phone:** \_\_\_\_\_

and/or

**Email:** \_\_\_\_\_

- OR -

**Hotline Number:**

\_\_\_\_\_

This contact information will be posted to: [Insert Website Address]

# Attachment B

Renewal Certification

**Renewal**

[Insert Association Logo Here]

Certification of Adoption of the [Name of Code] of Ethics

[Year]

**RE-CERTIFICATION OF ADOPTION OF THE [ASSOCIATION NAME] CODE OF ETHICS**

Pursuant to the [Name of Code] of Ethics on Interactions with Health Care Professionals (“[Association Name] Code”), medical technology companies, may certify that they have agreed to abide by the Code, and further that they have implemented policies and procedures to implement the [Name of Code] as part of an effective compliance program. This renewal certification requires a company’s Chief Compliance Officer (CCO) or other senior individual with equivalent responsibilities to sign and affirm that their company has previously certified and that the company continues to abide by the [Name of Code] . [Association Name] will list the certifying company on the [Association Name] website in [year]. (see [insert website])

On behalf of \_\_\_\_\_  
(identify Company name or relevant portions/subsidiaries) (“Company”), I certify that, to the best of my knowledge and as of the date of this certification:

Our Company has previously certified that we will abide by the [Name of Code], and that we have implemented policies and procedures to implement the [Name of Code] as part of an effective compliance program.

I further certify that, since the time of our Company’s most recent certification, there have been no material changes to the status of our Company in this regard.

CCO Signature  
(or equivalent) \_\_\_\_\_

Name: \_\_\_\_\_

Date: \_\_\_\_\_

Title: \_\_\_\_\_

Company/  
Division: \_\_\_\_\_

Mailing  
Address: \_\_\_\_\_

**UPDATE FOR COMPLIANCE CONTACT INFORMATION ON [ASSOCIATION NAME] WEBSITE:**

**Name:** \_\_\_\_\_

**Phone:** \_\_\_\_\_

and/or

**Email:** \_\_\_\_\_

- OR -

**Hotline Number:** \_\_\_\_\_

This contact information will be posted to: [insert website here].

# Attachment C

Code of Ethics Supporter Logo License Supplement  
&  
FAQs



[Insert Association Logo Here]

[Year]  
**[NAME OF CODE] LOGO LICENSE SUPPLEMENT**

[Association Name] has developed a distinctive Code of Ethics Supporter Logo (“Logo”) for medical technology manufacturers that have executed the Certification of Adoption of the [Name of Code] of Ethics (“[Name of Association] Certification”) and wish to use the Logo. The Logo is intended to provide a visible symbol of a certifying medical technology company’s commitment to the ethical standards embodied by the Code and to promote awareness about the [Name of Code] among industry, health care professionals, and the general public.

Companies seeking to use the Logo must sign the following nonexclusive license provision. [Association Name] retains the right to revoke this License for a Company’s failure to abide by the terms of this Logo License Supplement.

On behalf of \_\_\_\_\_  
(identify company name or name of relevant portions/subsidiaries), I agree to abide by the following terms to receive a revocable, non-transferable, nonassignable, non-exclusive license to use an unaltered version of the Logo on marketing materials, business cards, and displays at meetings and conferences, and stationery:

- 1) The Logo may not be used on any product;
- 2) The licensee acknowledges and agrees that the right to use the Logo, as well as the actual use of the Logo, is not an endorsement by [Association Name];
- 3) The right to use the Logo is subject to the licensee’s annual completion of the [Association Name] Certification and payment of a royalty (\$300 / year prorated), which royalty may be adjusted by [Association Name] from time to time; and
- 4) The royalty payment is made solely in exchange for the use of the Logo, and such payment does not entitle the licensee to any other benefit or service from [Association Name].

Signature \_\_\_\_\_ Date: \_\_\_\_\_  
Chief Compliance Officer (or Equivalent)

Name: \_\_\_\_\_

Title: \_\_\_\_\_

Please email the invoice for the royalty payment to:

Name: \_\_\_\_\_ Use PO or Reference#: \_\_\_\_\_  
Email: \_\_\_\_\_

Please email the confirmation of payment receipt and the logo file to:

Name: \_\_\_\_\_  
Email: \_\_\_\_\_

## **[Name of Code] of Ethics Supporter Logo**

### **LOGO FAQs**

[Insert Logo Here]

#### **Q: What is the purpose of [Association Name]’s Code of Ethics Logo?**

[Name of Association]’s Board of Directors has embraced an ongoing commitment to promote ethical interactions among medical technology manufacturers and health care providers. The Logo is a visible symbol of medical technology manufacturers’ commitment to the [Association Name] Code of Ethics and will let health care professionals know at a glance that they are dealing with a company that strives to meet the ethical standards reflected in the [Name of Code] and has an effective compliance program in place.

#### **Q: How may I use the [Name of Code] of Ethics Logo?**

Licensees may use the Code of Ethics Logo on print or electronic materials to represent their commitment to an effective compliance program and ethical interactions with health care providers. For example, licensees may print the logo on annual reports, promotional material, business cards, stationery and conference banners and signs. The logo may not be used in a manner or associated with text that implies that [Association Name] has endorsed or approved a licensee’s products, technology or individual compliance plan or practices.

#### **Q: How do I obtain the right to use the [Name of Code] of Ethics Logo?**

A member or non-member medical technology manufacturer may obtain a one (1) year right to use the [Association Name] Code of Ethics Logo upon submission of a Certification / Renewal Certification, a properly executed License Agreement and submission of the Royalty Fee ([Insert Royalty Fee]/ year prorated for the remainder of a calendar year). The Royalty Fee should be made by check, payable to [Association Name].

#### **Q: Who must execute the License Agreement?**

The Chief Compliance Officer (CCO) (or equivalent) of the legal entity seeking the license must sign and date the License Agreement. The License Agreement may be signed by the highest ranking corporate executive having authority over the company’s compliance operations. The CCO may wish to consult with legal counsel regarding the implications of certification prior to signing the License Agreement.

#### **Q: What if I have a complaint about a company using the [Name of Code] of Ethics Logo?**

For any questions concerning a Member’s compliance, you may contact the company’s Corporate Compliance Officer, whose contact information is available at:

[Insert Web Address]