Diabetes Prevention Program Outcomes Study (DPPOS) Duality of Interest (DOI) Disclosure Form

Please disclose the <u>combined</u> level of financial interest that you, your spouse and your dependent children have with companies/entities under study by the DPPOS Research Group as well as those that could create potential or perceived bias with a company/entity involved with DPPOS, within the preceding 12 months prior to completing the Disclosure Form. Please include companies developing or manufacturing medications and/or biologics under study by DPPOS (Merck Healthcare KGaA) as well as those <u>competing</u> with any company/entity under study in the DPPOS, which would include any company/entity developing, manufacturing, or selling medications to prevent or control type 2 diabetes.

1) If you have no interest or equity to disclose, please check here 🗌 and continue to question 2.

If you have interest or equity to disclose, please use the following designations:

(A) No financial interest or equity

(B) Financial interest in any publicly traded entity with a value > \$5,000 *including* the value of equity interest.

(C) Financial interest > \$5,000 in a commercial entity that is NOT publicly traded OR ANY equity interest in such an entity.

Company	Product	Stock ownership or equity (publicly traded or not)	Employment, office, directorship, membership on a Board of Directors or advisory committee (or personal compensation)	Speaker Fees	Consulting/ Honoraria (or advisory arrangements)	Clinical research or basic science funding	Travel grants	Intellectual property rights	Other interests

Notes:

• "Equity" is defined as any financial interest in a commercial entity that belongs to a DPPOS Research Group member or may be conveyed to a DPPOS Research Group member. This applies to the Group member's spouse and/or dependent children.

•Personal compensation includes fees for presentation, honoraria, and consulting fees but does not include reimbursement for expenses.

•Travel grants include industry-sponsored travel grants to educational symposia but do not include reimbursement of expenses for consulting or speaking engagements.

•Intellectual property rights include patents, royalties and licensing fees.

2) Do you, your spouse, your dependents and/or others who are financially reliant on you have (or have they had in the past) any personal interests or involvement with a commercial or non-commercial research organizations and/or research interests not indicated above that could pose or be perceived as a DOI?

No Yes If yes, please specify:

I agree to abide by the rules which govern Duality of Interest as established by the consortium, my institution, and the IRB during my participation in DPPOS.

Sign and date this page in the space below:

Name (Print)

Signature

Clinic #/Central Unit Name Date

(rev. 1/13/2012 / updated 7/12/2021)

This form is maintained at the DPPOS CoC

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Additional Rows if needed:

Company	Product	Stock ownership or equity (publicly traded or not)	Employment, office, directorship, membership on a Board of Directors or advisory committee (or personal compensation)	Speaker Fees	Consulting/ Honoraria (or advisory arrangements)	Clinical research or basic science funding	Travel grants	Intellectual property rights	Other interests
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