Dear Prospective Planner/Faculty Member,

We are looking forward to having the opportunity to include you as a <proposed role for person—e.g. planner, faculty, reviewer, etc.> in the accredited continuing education, <Insert activity title or working title and date/location information, if appropriate>.

All persons in a position to control the content of an accredited activity must provide full disclosure of financial relationships, prior to their role(s) in the activity being confirmed. For detailed information about expectations for disclosure of financial relationships, please refer to the [ACCME Standards for Integrity and Independence](https://accme.org/sites/default/files/2022-06/884_20220623_Standards%20for%20Integrity%20and%20Independence%20in%20Accredited%20Continuing%20Education.pdf).

You should have received an email from the UC San Diego Continuing Medical Education Learning Portal (ocme@ucsd.cloud-cme.com) asking you to provide financial disclosure information. Please submit your disclosure within 7 days so that we can promptly confirm your participation.

If you did not receive an email from the UC San Diego Continuing Medical Education Learning Portal, please reply to this email so that I can assist you with this process.

We recommend that you add ocme@ucsd.cloud-cme.com to the safe contacts list to ensure that future emails reach you.

If you have questions about these expectations, please contact the UC San Diego CME office at cmeaccred@health.ucsd.edu.

{Insert Sign Off}