



Ethics & Compliance Disclosures
Filer Training Guide

University Hospital

Disclosures

There are multiple disclosures available:

1. Attendance at Events (AAE)
 2. Outside Activity Questionnaire (OAQ)
 3. Non-Monetary Compensation (NMC) Questionnaire
 4. Outside Employment Questionnaire (OEQ) for UHNJ Board Members
 5. Joint Venture Questionnaire
 6. Personal & Business Relationships Disclosure
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- **The required disclosure must be requested from your Administrator**
 - **The requested disclosure will be sent to you via email**

Accessing the Disclosure

FROM THE HOMEPAGE:

- Go to www.meditractable.com
- Click the Secure Login button
- On the Login page, enter your user name and password
 - User name: full UHNJ email address
 - Temporary Password: uhnjyourlastname (uhnjsmith)
- You will be directed to the disclosure

FROM THE EMAIL RECEIVED:

- Click the link located in the email you received
- On the Login page, enter your user name and password
- You will be directed to the disclosure

Completing the Disclosure

- The disclosure will appear once you've logged in to Meditract.
- If you wish to review the policy for your disclosure, please select the hyperlink under "Policies/Procedures"
- Next, the Statement Information will address the disclosure you're completing
- To start your disclosure, select "Click here to Complete the Disclosure Statement."
- The page will now appear in edit mode.

Conflicts of Interest Disclosure Statement

[Click Here to Complete the Disclosure Statement](#) Logout

Disclosure Statement Not Completed
This Statement has not been evaluated by a viewing party. [Reset Password](#)
RESOLUTION(S) ACKNOWLEDGED [View Statements List](#)

Policies/Procedures

[New Jersey Plain Language Guide - *Refer to Pages 5-9*](#) [Standard Operating Procedures](#)

Statement Information

Statement:	60	Effective Date:	1/1/2016
Contracting Entity:	University Hospital	Expiration Date:	12/31/2016
Department/Practice:	Ethics and Compliance	Contract:	
Category:	Attendance at Events (AAE)	Submission Status:	On
		Launched:	

Reporting Party Information

Full Name:	Reviewer, UHIO	Email Address:	achurch@meditract.com
Login Name:	uhrij reviewer	Email Address Override:	
Title:		EIN:	

Viewing Party Information

Name:	Email:
Training, UHIO	achurch@meditract.com

Form of Disclosure of Outside Interests and Activities

Questions	Response	Comments
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This form is intended to be completed by employees attending events in relation to their official duties at UH. If you are participating in any activities, events or employment outside of your official duties at UH and/or if you have agreement/contract with the sponsor of the event, then you probably should be completing an **Outside Activity**

Required Responses

about:sessionrestore x COIDS: Disclosure Stateme... x COIDS: Conflicts of Interest... x +

Tractmanager Inc [U] | https://contracts.tractmanager.com/coids/statementedit.aspx?id=88&orgid=21

Conflicts of Interest Disclosure Statement - Edit

In the spaces below, please provide responses to each question on your Attendance at Events (AAE) form. For each response, provide a description in the Comments Section.

Question	Response	Comments
This form is intended to be completed by employees attending events in relation to their official duties at UH. If you are participating in any activities, events or employment outside of your official duties at UH and/or if you have agreement/contract with the sponsor of the event, then you probably should be completing an Outside Activity Questionnaire instead.		
1. Name of Event:	<input type="text"/>	<input type="text"/>
2. Location of Event:	<input type="text"/>	<input type="text"/>
3. Reason for Attendance:	<input type="text"/>	<input type="text"/>
4. Date(s) of Attendance:	<input type="text"/>	<input type="text"/>
5. Sponsor:	<input type="text"/>	<input type="text"/>
6. Do you have an agreement/contract with the sponsor?	<input type="text"/>	<input type="text"/>
7. Is the Sponsor an Interested Party?	<input type="text"/>	<input type="text"/>
8. Are you a speaker, panel participant or resource person?	<input type="text"/>	<input type="text"/>
9. Do you present, plan, or review continuing medical education?	<input type="text"/>	<input type="text"/>

- Please review the questions carefully, then add your responses to the “Comments” section.
- For yes or no responses, select the response from the drop-down “Response” section.

Submitting the Disclosure

This form is intended to be completed by employees attending events in relation to their official duties at UH. If you are participating in any activities, events or employment outside of your official duties at UH and/or if you have agreement/contract with the sponsor of the event, then you probably should be completing an Outside Activity Questionnaire (OAQ) instead. If the Sponsor is an Interested Party and the UH employee will be accepting event benefits as a speaker, panelist or resource person, a copy of the AAE form will be forwarded to the State Ethics Commission pursuant of N.J.A.C. 19:61-6.4(f).

Save Draft

Certify and Submit

Cancel

- When you are satisfied with your answers and comments, click the Certify and Submit button
- To exit without saving changes or certifying and submitting, click the Cancel button

Once the disclosure has been submitted, a confirmation message will be listed on the screen

**Your Disclosure Statement has been successfully saved.
Please review your results below.
Thank you for your participation!**

Attaching Supporting Documents

Resolutions, Attachments and Notes			
Subject	Attachment	Date	Author
v Category: Attachment(s)			
uhnj questionnaire	99-5.pdf	2/12/2016	uhnj reviewer

- Attendance at Events (AAE) Form: **Must** attach the Invite or Agenda for Event
- Outside Activity Questionnaire (OAQ): **May** attach contract or agreement for your outside employment or voluntary activity, if available
- In order to attach a document, please locate “Resolutions, Attachments and Notes,” which is located at the bottom portion of the questionnaire
- Select the add button. Enter the title of the document in the subject line. Select browse to upload the document from your computer.
- To upload, select save. If you wish to exit without saving, select cancel.

Approval Process

Once the disclosure is submitted, a series of approvals will occur:

1. **Your Supervisor will be the Initial Approval on the disclosure.**
2. **The Final Approval is rendered by the Office of Ethics and Compliance.**
3. **When final approval is granted, you will receive an email confirmation.**

Who to Contact in Case of Questions ...

If you have questions regarding the functionality of the database, need assistance running a report or lost your login information please contact our Helpdesk at **1866.296.1270** or helpdesk@meditract.com

For questions related to the content of your database and other information please contact :

Office of Ethics & Compliance 973-972-3450