**MU SINCLAIR SCHOOL OF NURSING**

**NURSING OUTREACH**



 **Conflict of Interest Disclosure Statement Summary**

 **Conference Title and Date**

**Conflict of interest statements received stating, “I have the following relationships”:**

NOTE: *The Nurse Planner is responsible for resolving any potential conflicts of interest.*

 List names of individuals

**Conflict of interest statements received stating, “I have no relationship with any commercial firm having products related to topics I will discuss at this conference.”**

 List names of individuals

**No conflict of interest statement returned and how it was dealt with:**

 List names of individuals

Spring 2016