

Please carefully read and complete the required disclosure information below. Thank you for your collaboration.

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CME/CPD and Compliance CME/CPD Conflict of Interest (COI) Disclosure Form (manual)

א**רך ברקת שיף-קרן Please carefully read and complete the required disclosure information below.** L.N. 015511 מ.ר. מ.ר. 15511 מ.ר.

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ד"ר ברקת שיף-קרו L.N. 015511 מ.ר. Dr. Bareket Schiff-Keren

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October 26-28, 2020 | Virtual Conference

Faculty Disclosure

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Yes, please specify:	No, nothing to disclose	
Y:	close	

Example: company XYZ	Company Name
×	Honoraria/ Expenses
	Consulting/ Funded Advisory Board Research
×	Funded Research
	Royalties/ Patent
×	Stock Options
	Ownership/ Equity Position
	Employee
	Other (please specify)



5th International Medical Cannabis Conference 26-27 October 2020								
First Name: Bonni Professional Title / Degree: (MD, DO, Prof, PhD, etc.) MD								
	Last Name: Goldstein City: Los Angeles Organisation / Affiliation: Canna-Centers Country: USA E-mail: bgoldsteinmd@canna-centers.com						nmd@canna-centers.com	
What is Your Role(s) in this CME/CPD: (check all that apply) Scientific/Education Planning Committee X Invited Speaker/Faculty Poster/Oral Presenter Board of Directors Kenes Project Management & CME Other:								
		Indep	endence	and Disclo	osure Re	quirements	5	
Independence and Disclosure Requirements Those in control of CME/CPD scientific/educational content must disclose the following: Financial or other relationships with a commercial interest producing, marketing, re-selling, or distributing health care goods or services consumed by, or used on, patients Pertains to both the individual participating and their spouse/partner Over the last 3 years Conflict of interest resolution and disclosure to learners: If an individual refuse to disclose, they are disqualified from participating Disclosure information is reviewed, and conflicts of interest resolved Disclosure information is made available to participants prior to the event Participants are asked to evaluate the objectivity and independence The following must be free from the influence of a commercial interest: Identification of educational objectives Selection and presentation of content Selection of all persons and organizations controlling content Selection of educational methods Evaluation of the activity								
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Zelira Therapeutics		ХП						
Weedmaps.com		ХП						
			Off-	l abel Pro	duct Use			
Off-Label Product Use Will you be presenting or referencing off-label or investigational use of a therapeutic product? No X Yes, please specify: I will be speaking about the use of cannabinoids in the treatment of childhood diseases								

09/16/2020



5th International Medical Cannabis Conference							
	26-27 October 2020						
	itle / Degree: (MD, DO, Prof, PhD, e	etc.) <u>Prof.</u>					
Last Name: Nutt City:	London						
Organisation / Affiliation: Professor, Imperial College	London, UK Country: United Kingdo	m E-mail:					
d.nutt@imperial.ac.uk							
What is Your Role(s) in this CME/CPD: (check all tha	at apply)	Session Moderator/Chair/Coordinator					
Poster/Oral Presenter	Board of Directors	Committee (CME, Research, other)					
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Commercial Relationship(s) Disclosure

Do you and/or your spouse/partner have relationships with a commercial interest, as described above?

<u>No</u> ☐ Yes, please specify:

Company Name	Honoraria/ Expenses	Consulting/ Advisory Board	Funded Research	Royalties/ Patent	Stock Options	Ownership/ Equity Position	Employee	Other (please specify)
British National Formulary								Advisor
British Neuroscience Association - European Brain Council								Past President
European College of Neuropsychopharm acology								Past President
DrugScience [UK]								Chair
International Centre for Science in Drug Policy								Member
Journal of Psychopharmacolog y								Editor
Ranvier, Opiant, COMPASSPathway s, AWAKN, Psyched Wellness								Member
Lundbeck, BMS/Otsuka, Janssen, Takeda								Speaking honoraria
Lundbeck International Neuroscience Foundation, Chair Campus editorial board								Member

Wellcome Trust, MRC				Grants or clinical trial payments
P1vital, Alcarelle, AKAKN, Psyched Wellness Director Equasy Enterprises				Share options

Off-Label Product Use

Will you be presenting or referencing off-label o	r investigational use of a therapeutic product?						
No No							
Yes, please specify:							
	Declaration and Signature						
All contributions to the CME/CPD content must adhere to the following:							
 Balance, independence, objectivity, and scientific r 	igor						

• Recommendations involving clinical medicine based on the best available evidence, with references

Scientific research cited conforms to standards and protocols accepted by the scientific community

• No recommendations made that are known to be ineffective or associated with dangers that outweigh benefits

- No promotional content of a commercial entity (includes product names, photos, logos, company names, etc.)
- Use of scientific/generic names; if necessary, trade names of several companies should be used
- No patient protected health information (patient information/videos appear with permission or have been de-identified)
- No acceptance of compensation for participation (financial or in-kind) from a commercial interest (North America only)

Presenters:

Include disclosure slide (Conflict of Interest (COI) Disclosure Slide) and verbally disclose (including if nothing to disclose) at beginning of presentation

Date below confirms all requirements and that disclosure information provided is accurate, complete, and will be disclosed to participants.

02.10.2020



	5th International Medical Cannabis Conference 26-27 October 2020							
First Name: Donald						D, DO, Prof, F	PhD, etc.) <u>M</u> I	<u>2</u>
Last Name: Abram Organisation / Affi		ersity of Californi		San Francis	<u>intry:</u> USA	F-mai	I. Donald Ab	rams@ucsf.edu
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What is Your Role Scientific/Education x Poster/Oral Presen Kenes Project Mar	on Planning Co ter	ommittee	□ Ir □ B	oly) nvited Speake loard of Direct other:				lerator/Chair/Coordinator CME, Research, other)
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Company Name	Honoraria/ Expenses	Consulting/ Advisory Board	Funded Research	Royalties/ Patent	Stock Options	Ownership/ Equity Position	Employee	Other (please specify)
AXIM		x						Consulting fees (Inactive)
Cannformatics		x			x			
Lumen		x			x			
Maui Wellness	x	x						Inactive
Scriptyx		x						Consulting fees (Inactive)
Spectrum	x							Speaker honorarium
Tikun Olam		Х						Consulting fees (Inactive)
VIVO Cannabis		Х						Consulting fees (Inactive)
CannX	x							Speaker honorarium (planned)

Off-Label Product Use

Will you be presenting or referencing off-label or investigational use of a therapeutic product?

 \overline{X} Yes, please specify: Cannabis is a mostly illegal substance

Declaration and Signature

All contributions to the CME/CPD content must adhere to the following:

- Balance, independence, objectivity, and scientific rigor
- Recommendations involving clinical medicine based on the best available evidence, with references
- · Scientific research cited conforms to standards and protocols accepted by the scientific community
- No recommendations made that are known to be ineffective or associated with dangers that outweigh benefits
- No promotional content of a commercial entity (includes product names, photos, logos, company names, etc.)
- Use of scientific/generic names; if necessary, trade names of several companies should be used
- No patient protected health information (patient information/videos appear with permission or have been de-identified)
- No acceptance of compensation for participation (financial or in-kind) from a commercial interest (North America only)

Presenters:

Include disclosure slide (Conflict of Interest (COI) Disclosure Slide) and verbally disclose (including if nothing to disclose) at beginning of presentation

Date below confirms all requirements and that disclosure information provided is accurate, complete, and will be disclosed to participants.

September 10, 2020





Board Disclosure Requirements Contry: USA Professional Title / Degree: (MD, DO, Prof, PhD, etc.) DO Last Name: Sulak City: Falmouth Organisation / Affiliation: Healer, Inc Country: USA E-mail: drSulak@healer.com What is Your Role(s) in this CME/CPD: (check all that apply) Scientific/Education Planning Committee Invited Speaker/Faculty Session Moderator/Chair/Coordinator Board of Directors Country: USA E-mail: drSulak@healer.com Moderator/Chair/Coordinator Constitute CME Other: Independence and Disclosure Requirements Those in control of CME/CPD scientific/educational content must disclose the following: Financial or other relationships with a commercial interest producing, marketing, re-selling, or distributing health care goods or services consumed by, or used on, patients Pertains to both the individual participating and their spouse/partner Over the last 3 years Conflict of Interest resolution is mediavalified from participating Disclosure information is mediavaliable to participating Disclosure information of exercitional to the event Participants are asked to evaluate the objectivity and independence The following must be free from the influence of a commercial interest: Identification of educational objectives Selection of all presons and organizations controlling content Selection of all presons and organizations controlling content Selection of the activity Evaluation of the activity Evaluation of the activity	54h lu	stornational Madiaal Connabia	Conforance						
First Name: Dustin Professional Title / Degree: (MD, DO, Prof, PhD, etc.) DO Last Name: Sulak City: Falmouth Organisation / Affiliation: Healer, Inc Country: USA E-mail: drsulak@healer.com What is Your Role(s) in this CME/CPD: (check all that apply) Scientific/Education Planning Committee Invited Speaker/Faculty Session Moderator/Chair/Coordinator Poster/Oral Presenter Board of Directors Committee (CME, Research, other) Independence and Disclosure Requirements Those in control of CME/CPD scientific/educational content must disclose the following: Financial or other relationships with a commercial interest producing, marketing, re-selling, or distributing health care goods or services consumed by, or used on, patients Pertains to both the individual participating and their spouse/partner Over the last 3 years Conflict of interest resolution and disclosure to learners: If an individual refuse to disclose, they are disgualified from participating Disclosure information is made available to participants prior to the event Participants are asked to evaluate the objectivity and independence The following must be free from the influence of a commercial interest: Identification of educational needs Determination of educational objectives Selection of all presons and organizations controlling content <th>5011</th> <th colspan="8">5th International Medical Cannabis Conference</th>	5011	5th International Medical Cannabis Conference							
Last Name: Sulak City: Falmouth Organisation / Affiliation: Healer, Inc Country: USA What is Your Role(s) in this CME/CPD: (check all that apply) E-mail: drsulak @ healer.com © scientific/Education Planning Committee Invited Speaker/Faculty Session Moderator/Chair/Coordinator Poster/Oral Presenter Board of Directors Committee (CME, Research, other) Independence and Disclosure Requirements Those in control of CME/CPD scientific/educational content must disclose the following: • Financial or other relationships with a commercial interest producing, marketing, re-selling, or distributing health care goods or services consumed by, or used on, patients • Over the last 3 years Conflict of interest resolution and disclosure to learners: • I f an individual refuse to disclose, they are disqualified from participating • Disclosure information is reviewed, and conflicts of interest resolved • Disclosure information is made available to participants prior to the event • Participants are asked to evaluate the objectivity and independence • The following must be free from the influence of a commercial interest: • Identification of educational objectives • Disclosure information is made available to participants prior to the event • Participants are asked to evaluate the objectivity and independence									
Organisation / Affiliation: Healer, Inc Country: USA E-mail: drsulak@healer.com What is Your Role(s) in this CME/CPD: (check all that apply) Scientific/Education Planning Committee Invited Speaker/Faculty Session Moderator/Chair/Coordinator Poster/Oral Presenter Board of Directors Committee (CME, Research, other) Independence and Disclosure Requirements Those in control of CME/CPD scientific/educational content must disclose the following: • Financial or other relationships with a commercial interest producing, marketing, re-selling, or distributing health care goods or services consumed by, or used on, patients • Over the last 3 years Conflict of interest resolution and disclosure to learners: • If an individual refuse to disclose, they are disqualified from participating • Disclosure information is reviewed, and conflicts of interest resolved • Disclosure information is reviewed, and conflicts of interest resolved • Disclosure information is reviewed, and conflicts of interest resolved • Disclosure information is reviewed, and conflicts of interest: • Identification of educational needs • Determination of educational objectives • Beatricipants are asked to evaluate the objectivity and independence The following must be free from the influence of a commercial interest: • Identification of educational objective			, DO, Prot, PhD, etc.) <u>DO</u>						
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Evaluation of the activity	 Selection of educational methods 								
	Evaluation of the activity								

Commercial Relationship(s) Disclosure

Do you and/or your spouse/partner have relationships with a commercial interest, as described above?

☐ No
 ⊠ Yes. please specify:

	cony.							
Company Name	Honoraria/ Expenses	Consulting/ Advisory Board	Funded Research	Royalties/ Patent	Stock Options	Ownership/ Equity Position	Employee	Other (please specify)
Healer, Inc.					\boxtimes		\boxtimes	
Zelira Therapeutics		\boxtimes						
COR Analytics		\boxtimes						
Spectrum Therapeutics								
Society of Cannabis Clinicians								
Patients Out of Time		\boxtimes						
CannX 2020 Virtual Conference								

Off-Label Product Use

Will you be presenting or referencing off-label or investigational use of a therapeutic product?

Yes, please specify:

Declaration and Signature

All contributions to the CME/CPD content must adhere to the following:

Balance, independence, objectivity, and scientific rigor

- Recommendations involving clinical medicine based on the best available evidence, with references
- Scientific research cited conforms to standards and protocols accepted by the scientific community
- No recommendations made that are known to be ineffective or associated with dangers that outweigh benefits
- No promotional content of a commercial entity (includes product names, photos, logos, company names, etc.)
- Use of scientific/generic names; if necessary, trade names of several companies should be used
- No patient protected health information (patient information/videos appear with permission or have been de-identified)
- No acceptance of compensation for participation (financial or in-kind) from a commercial interest (North America only) **Presenters:**
- Include disclosure slide (Conflict of Interest (COI) Disclosure Slide) and verbally disclose (including if nothing to disclose) at beginning of
 presentation

Date below confirms all requirements and that disclosure information provided is accurate, complete, and will be disclosed to participants.

September 18, 2020



September 15/2020

		5th Inte		Medical (-27 Octob		S Conferen	се	
First Name: Fabric Last Name: Pampl Organisation / Affi	ona	rium Health, Scie	City:	Florianop	olis		PhD, etc.) <u>Ph</u> fabriciopamp	
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Last Name: Groter Organisation / Affi		Δ	Cit Country: <u>G</u>		<u>heim</u>		E-mail:	info@cannabis-med.org
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22.09.2020



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First Name: Hinani	<u>it</u>					D, DO, Prof, I	PhD, etc.) <u>Pr</u>	of
Last Name: Koltai				ishon LeZior				-
Organisation / Affi	iliation: <u>ARO</u>), Volcani Center		Country	: Israel			E-mail: hkoltai@agri.gov.il
What is Your Role	(s) in this Cl	ME/CPD: (check						
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Please carefully read and complete the required disclosure information b	elow.
Thank you for your collaboration.	

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First Name: Jeffrey						D, DO, Prof, I	PhD, etc.) <u>M</u>	<u>D</u>
Last Name: <u>Herger</u> Organisation / Affi		ety of Cannabis (City <u>Clinicians</u>	r: <u>Sebas</u> Country: <u>I</u>				E-mail: jhergmd@gmail.com
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Jeffrey Hergenrather, MD 30Sept2020



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First Name: Manue	<u>əl</u>		Profession	nal Title / De	egree: (MD	D, DO, Prof, I	PhD, etc.) Ph	<u>ות</u>	
Last Name: Guzma				ladrid	. .		, <u>,</u>		
Organisation / Affi	liation: Com	plutense Univers	ity of Madri	<u>d</u>	Country	y: <u>Spain</u>	E-ma	il: <u>mguzman@quim.ucm.es</u>	
What is Your Role	(s) in this Cl	ME/CPD: (check	all that app	oly)					
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Madrid, Ser	otember 9. 2	2020	Prof	f. Manuel G	uzmán. P	'nD			
	Date				····, ·				



		5th Inte				S Conferen	се					
26-27 October 2020 First Name: Marta Professional Title / Degree: (MD, DO, Prof, PhD, etc.) PhD Last Name: Vázguez City: Montevideo												
Last Name: Vázqu	Last Name: Vázquez City: Montevideo Organisation / Affiliation: Faculty of Chemistry Country: Uruguay E-mail: mvazquez@fq.edu.uy											
Organisation / Affi	liation: Facu	Ity of Chemistr	У	Count	ry: <u>Urugua</u>	ay	E	-mail: <u>mvazquez@fq.edu.uy</u>				
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Off-Label Product Use												
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All contributions to the CME/CPD content must adhere to the following:

- Balance, independence, objectivity, and scientific rigor
- Recommendations involving clinical medicine based on the best available evidence, with references
- Scientific research cited conforms to standards and protocols accepted by the scientific community
- No recommendations made that are known to be ineffective or associated with dangers that outweigh benefits
- No promotional content of a commercial entity (includes product names, photos, logos, company names, etc.)
- Use of scientific/generic names; if necessary, trade names of several companies should be used
- No patient protected health information (patient information/videos appear with permission or have been de-identified)
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 Presenters:
- Include disclosure slide (Conflict of Interest (COI) Disclosure Slide) and verbally disclose (including if nothing to disclose) at beginning of presentation

Date below confirms all requirements and that disclosure information provided is accurate, complete, and will be disclosed to participants.

13/9/2020

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Marta Vázquez



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First Name: Miche	lle					D, DO, Prof, I	PhD, etc.) <u>NE</u>	2
Last Name: Sextor		-		San Diego, (CA			
Organisation / Aff	iliation: <u>UCS</u>	<u>D</u>	Country: L	<u>JSA</u>			E-mail: mse	exton@ucsd.edu
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to participants.

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September 29, 2020



		5th Inte		Medical (6-27 Octob		S Conferen	ce	
First Name: Sharou Last Name: Sznitm Organisation / Affi Sznitmans@gmail.c	iliation: Univ com (s) in this CI	ersity of Hafa	City:	Haifa Cou	ntry: <u>Israe</u>	<u>I</u>	PhD, etc.) <u>Ph</u>	E-mail:
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Faculty Disclosure

No, nothing to disclose	Yes, please specify:
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Off-Label Product Use Will you be presenting or referencing off-label or investigational use of a therapeutic product? No x Yes, please specify: Proprietrary Topical Cannabis-Based Medicines for Integumentary & Wound Management								
Declaration and Signature All contributions to the CME/CPD content must adhere to the following: Balance, independence, objectivity, and scientific rigor Recommendations involving clinical medicine based on the best available evidence, with references Scientific research cited conforms to standards and protocols accepted by the scientific community No recommendations made that are known to be ineffective or associated with dangers that outweigh benefits No promotional content of a commercial entity (includes product names, photos, logos, company names, etc.) Use of scientific/generic names; if necessary, trade names of several companies should be used No patient protected health information (patient information/videos appear with permission or have been de-identified) No acceptance of compensation for participation (financial or in-kind) from a commercial interest (North America only)								

Presenters:

Include disclosure slide (Conflict of Interest (COI) Disclosure Slide) and verbally disclose (including if nothing to disclose) at beginning of
presentation

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September 16, 2020