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Section:	Compliance

Significant Financial Conflicts of Interest in the Conduct of Research

Purpose:

Boston Medical Center (BMC) is committed to upholding the highest standards of objectivity in research. To that end, this policy aims to ensure that the design, conduct, and reporting of Research at BMC will be free from bias resulting from Investigators' Financial Conflicts of Interest.

Policy Statement:

This policy provides procedures for Investigators to disclose to BMC financial interests, and a process to identify, evaluate, manage, and report Financial Conflicts of Interests that may have, or may appear to have, an impact on the objectivity and integrity of Research conducted at BMC. Laws, regulations, policies, and guidance exist that set forth specific requirements on the disclosure and management of conflicts of interest. Specifically, this policy is intended to comply with the requirements set forth in the United States Department of Health and Human Services regulation at 42 CFR Part 50, Subpart F for grants or cooperative agreements and 45 CFR Part 94 for research contracts (both revised in August 2011 and collectively referred to herein as the "PHS Regulation") as well as the National Science Foundation (NSF) regulations found in Section 510 of its Grant Policy Manual (July 2005) (the "NSF Regulation"), to the extent that such requirements are applicable to a specific research project. In addition to complying with the requirements of this policy, Investigators remain subject to any and all requirements (i) imposed by the reviewing Institutional Review Board (IRB); (ii) contained within other applicable BMC policies and procedures, including parallel obligations to disclose financial and other information required by those policies and procedures; and (iii) required by scientific journals, conferences, and other avenues of presentation and publication.

Application:

This policy applies to all persons, regardless of title or position or employer, who are responsible for the design, conduct or reporting of Research at or under the auspices of BMC ("Covered Persons"). The Boston University Investigator Financial Conflicts of Interest Policy for Research shall apply when those responsible for the design, conduct or reporting of Research at or under the auspices of Boston University (BU).

Exceptions:

None

Definitions:

- “Financial Conflict of Interest” (or “FCOI”) means a Significant Financial Interest that could directly and significantly affect the design, conduct or reporting of Research or that could create the perception thereof.
- “Designated Official” means an institutional official designated to solicit and review disclosures of significant financial interests from Investigators. At BMC, the Compliance Department is designated to solicit, review, and manage disclosures of Significant Financial Interests.
- “Financial Interest” (or “FI”) shall include any income or equity interest from any single entity during a disclosure period for a Covered Person or a Covered Person’s immediate family members.
- “Institutional Responsibilities” means an Investigator’s professional responsibilities on behalf of BMC or BU, including but not limited to research, teaching, professional practice, and administration such as service on committees and panels.
- “Investigator” means the project director (PD) or principal investigator (PI) and any other person, *regardless of title or position*, who is responsible for the design, conduct, or reporting of Research (the individual’s role and the degree of independence with which the individual works will be considered when determining whether a person is an investigator). Investigators may include, without limitation, residents, fellows, graduate students, post-doctoral fellows, technicians, collaborators, or consultants.
- “Manage” means taking action to address a FCOI, which can include reducing or eliminating the FCOI, to ensure, to the extent possible, that the design, conduct, and reporting of research will be free from bias.
- “PHS” means the Public Health Service of the United States Department of Health and Human Services, and any components of the PHS to which the authority involved may be delegated, including but not limited to the National Institutes of Health (NIH), Centers for Disease Control (CDC), Substance Abuse and Mental Health Services Administration (SAMHSA), and Health Resources and Services Administration (HRSA).
- “PHS Awarding Component” means the organizational unit of the PHS that funds PHS-Funded Research.
- “PHS-Funded Research” means any Research for which funding is available from a PHS Awarding Component through a grant or cooperative agreement, whether authorized under the PHS Act or other statutory authority, such as a research grant, career development award, center grant, individual fellowship award, infrastructure award, institutional training grant, program project, or research resources award, and any Research for which funding is available from any organization, foundation or other sponsor who has adopted the PHS regulation. Research funded by the National Science Foundation is not PHS-Funded Research.
- “Research” means a systematic investigation, study, or experiment designed to develop or contribute to generalizable knowledge relating broadly to public health, including behavioral and social-sciences research, regardless of funding source. The term encompasses basic, sponsored, and clinical research, including applied research and product development.
- “Senior/Key Personnel” means the PD or PI and any other person identified as senior/key personnel in the grant application, contract proposal, contract, progress report, or any other report submitted to the sponsor of the Research.

- “Significant Financial Interest” (or “SFI”) means a financial interest consisting of one or more of the following interests of an Investigator (and those of the Investigator’s spouse or dependent children), that reasonably appears to be related to the Investigator’s Institutional Responsibilities:

With regard to a publicly traded entity, a *significant financial interest* exists if the value of any remuneration received from the entity in the twelve months preceding the disclosure and the value of any equity interest in the entity as of the date of disclosure, when aggregated, exceeds \$5,000. Remuneration includes salary and any payment for services not otherwise identified as salary (e.g., consulting fees, honoraria, paid authorship fees). Equity interest includes any stock, stock option or other ownership interest, as determined through reference to public prices or other reasonable measures of fair market value;

With regard to a non-publicly traded entity, a *significant financial interest* exists if the value of any remuneration received from the entity in the twelve months preceding the disclosure, when aggregated, exceeds \$5,000 or when the Investigator (or the Investigator’s spouse or dependent children) holds any equity interest (e.g., stock, stock options, or other ownership interests); and

Intellectual property rights and interests (e.g. patents, copyrights) upon receipt of income related to such rights and interests.

- For PHS-Funded Investigators only: a *significant financial interest* also includes travel, which means reimbursed or sponsored travel (i.e., that which is paid on behalf of the Investigator and not reimbursed to the Investigator so that the exact monetary value may not be readily available), related to an Investigator's Institutional Responsibilities that exceeds \$5000 in value (in aggregate from a single entity). The disclosure of travel will include at a minimum, the purpose of the trip, the identity of the sponsor/organizer, the destination and the duration. The disclosure requirement for travel does not apply to any travel that is reimbursed or sponsored by one of the following within the United States: a Federal, state, or local government agency, an Institution of higher education as defined at 20 U.S.C. 1001(a), an academic teaching hospital, a medical center, or a research institute that is affiliated with an Institution of higher education.
- Exceptions: “Significant Financial Interest” does not include the following financial interests:
 - Salary, royalties, or other remuneration paid by BMC or BU to the Investigator, if the Investigator is currently employed or is otherwise appointed by the Institution making the payment;
 - Intellectual property rights assigned to either BMC or BU and agreements to share in royalties related to such rights.
 - Income from investment vehicles, such as mutual funds and retirement accounts, as long as the Investigator does not directly control the investment decisions made in these vehicles;
 - Income from seminars, lectures, teaching engagements, sponsored by one of the following within the United States: a Federal, state, or local government agency, an institution of higher education as defined at 20 U.S.C. 1001(a), an academic teaching hospital, a medical center, a research institute that is affiliated with an Institution of higher education; and

- Income from service on advisory committees or review panels for one of the following within the United States: a Federal, state, or local government agency, an institution of higher education as defined at 20 U.S.C. 1001(a), an academic teaching hospital, a medical center, or a research institute that is affiliated with an Institution of higher education.

Procedure:

1. Investigator Responsibilities

- 1.1. Investigators shall (i) disclose Financial Interests (including financial interests of their spouse and dependent children), (ii) comply with the review process set forth in Section 2, which follows; and (iii) for PHS-Funded Investigators, complete training as described in Section 6, which follows.
- 1.2. **Disclosure.** Every Investigator must disclose all Financial Interests, and those of their spouse and dependent children, that reasonably appear to be related to the Investigator's Institutional Responsibilities. The Investigator is not responsible for determining whether a Significant Financial Interest constitutes a FCOI. That determination is made by a Designated Official in accordance with the process described below. Investigator disclosures are required to be made as follows:
 - 1.2.1. **Upon Application.** Each Investigator who is planning to participate in Research must disclose their FIs to the BMC Compliance Department no later than the time of application to the sponsor for funding, or if no application for funding, prior to the submission of a proposal for the Research to the Institutional Review Board, or, if no proposal, prior to starting the Research project.
 - 1.2.2. **Annually.** Each Investigator who is participating in Research must submit an updated disclosure of FIs at least annually during the period of the Research project. Such disclosure shall include any information that was not disclosed initially to the BMC Compliance Department pursuant to subparagraph 1.2.1 above, or in any subsequent disclosure of FIs (e.g. any FCOI identified on Research that was transferred from another institution), and shall include updated information regarding any previously disclosed FI (e.g., the updated value of a previously disclosed equity interest).
 - 1.2.3. **New FI.** Each Investigator who is participating in Research must submit an updated disclosure within thirty (30) days of discovering or acquiring (e.g. through purchase, business arrangement, marriage, inheritance or other) a new SFI.
 - 1.2.4. **Other Researchers.** For each Research proposal the PI is responsible for designating any other Investigators that are required to comply with this policy.
 - 1.2.5. **Ad Hoc Disclosures.** Disclosure may also be required by BMC committees or departments at the time of certain reviews or transactions, if one has related Financial Interests associated with the review or transaction.

2. Process for Reviewing Investigator Significant Financial Interests

- 2.1. **Initial Review and Action.** Before BMC disburses any funds for a Research project, BMC, acting through the BMC Compliance Department with the assistance of the Review Committee as described in Section 2.2, will perform the following in accordance with this Section 2:
 - 2.1.1. Solicit and review Investigator FI disclosures and any other information deemed relevant (e.g. research proposal summary, IRB application, etc.). In connection with this review, the BMC Compliance Department may require the Investigator to provide additional information;
 - 2.1.2. Using Institutional guidelines, determine (1) whether an Investigator's FI is a SFI, (2) if the SFI is related to the Research, and if so, (3) whether the related SFI is a Financial Conflict of Interest ("FCOI"). An Investigator's SFI is considered to be related to a Research project when the SFI could be reasonably affected by the Research (for example, the interest relates to an intellectual property right in technology used in or implicated by the Research; the value of the interest may be impacted by the outcome of the Research) or is in an entity whose financial interests could be reasonably affected by the Research (for example, the entity with which the researcher has a SFI makes or owns a drug, device, technology, or intellectual property used in the Research; the entity is the sponsor of the research);
 - 2.1.3. Take such actions as necessary to manage the FCOI, including notifying the BMC Research Operations Office and/or the BMC/BU Medical Campus IRB that an FCOI exists for a research project and developing and implementing a management plan.
- 2.2. **Boston Medical Center/ Boston University Faculty Review Committee on Research Financial Conflicts of Interest ("Review Committee").** The BMC Compliance Department will use the Review Committee to assist with any determinations as to whether an Investigator's SFI is related to the Research; and whether the SFI constitutes a FCOI. The Review Committee may consider any initial review that was conducted by the BMC Compliance Department. The Review Committee may consider cases at a convened meeting or by review by an experienced Committee member ("Designated Member Review"). The Review Committee may require Investigators to provide additional information and may recommend a management plan to the BMC Compliance Department.
- 2.3. **Decision by the BMC Compliance Department.** If the Review Committee determines that a FCOI exists, it will submit a report of its determination and recommended management plan to the BMC Compliance Department. The BMC Compliance Department may return the report to the Review Committee for clarification or supplementation, and will accept, reject or modify the Review Committee determination and recommendation. The BMC Compliance Department, in consultation with the Designated Official and other appropriate BMC leaders, will make a final determination in writing and specify the conditions or restrictions, if any, that should be imposed to manage the FCOI.
 - 2.3.1. With respect to existing management plans, the BMC Compliance Department will oversee, administer, and ensure compliance.
 - 2.3.2. Upon receipt of the management plan, the Investigator must either sign and return it to the BMC Compliance Department or submit an appeal. Funding

will be released after the Investigator signs the management plan or the appeal is resolved. The BMC Compliance Department will provide copies of the signed management plan to the Investigator, Investigator's Department Chair, the responsible Institutional Review Board (if human subjects research is involved), BMC Research Operations, and others identified in the management plan as receiving a copy.

2.4. **Investigator Appeals.** The Investigator has 10 business days from receipt of the BMC Compliance Department's final management plan to submit an appeal in writing to the BMC Compliance Department, which will present the appeal to the BMC President. The appeal should include the specific provisions being challenged, the reason for the appeal, and the justification for a different outcome. The Investigator may also provide an alternative management plan and any supplemental information that might be helpful to the BMC President in making a final determination. This decision of the BMC President shall be final and not further appealable.

2.5. **Institutional Remedies.**

2.5.1. Investigators are required to comply with the final decision of the BMC Compliance Department or the BMC President. If an Investigator fails to comply, the BMC Compliance Department, with the aid of the Review Committee, will develop a corrective action plan for final review and approval by the BMC President. BMC may impose sanctions for non-compliance including suspension, denial of eligibility to engage in Research, or other appropriate penalties. Such sanctions may require giving notice to professional bodies or journals, or the public.

2.5.2. If an Investigator fails to comply with this policy or a management plan in a way that could have biased the design, conduct, or reporting of Research, BMC shall as applicable promptly notify the PHS Awarding Component, or other sponsor as required, of the corrective action taken or to be taken (e.g., a mitigation report for PHS-Funded Research, as further described below), and implement corrective action.

3. Management of Financial Conflict of Interests

3.1. **Management Plans.** Each management plan shall specify the actions that have been, and shall be, taken to manage the FCOI.

3.2. **Conditions or Restrictions.** Examples of conditions or restrictions that might be imposed to manage a FCOI include, but are not limited to:

- 3.2.1. Public disclosure of the FCOI (e.g., when presenting or publishing the Research);
- 3.2.2. For research projects involving human subjects research, disclosure of the FCOI directly to the human subjects as approved by the Institutional Review Board;
- 3.2.3. Appointment of an independent monitor capable of taking measures to protect the design, conduct, and reporting of the Research against bias resulting from the FCOI;
- 3.2.4. Modification of the research plan;
- 3.2.5. Change of personnel or personnel responsibilities, or disqualification of personnel from participation in all or a portion of the Research;

- 3.2.6. Reduction or elimination of a financial interest (e.g., sale of an equity interest); and
 - 3.2.7. Severance of relationships that create FCOIs.
 - 3.3. **Clinical Research.** The existence of a FCOI related to a clinical research project creates a rebuttable presumption that stringent management of the FCOI is appropriate. In any case in which the United States Department of Health and Human Services (“HHS”) determines that a PHS-Funded project of clinical research, (whose purpose is to evaluate the safety or effectiveness of a drug, medical device, or treatment), has been designed, conducted, or reported by an Investigator with an FCOI and was not managed or reported by the Institution as required, HHS may require the Investigator involved to disclose the FCOI in each public presentation of the results of the research and in an addendum to previously published presentations.
 - 3.4. **Monitoring Compliance with the Management Plan.** The BMC Compliance Department will monitor and document Investigator compliance with the management plan on an ongoing basis until the completion of the Research.
 - 3.5. **External and Public Disclosures.** Regardless of the disclosure requirements outlined in this Policy or additional disclosure strategies instituted by BMC in management plans, each Covered Person is responsible for being transparent with respect to their Financial Interests, Interests, as well as Outside Activities (as defined in Policy #09.23.010 Conflict of Commitment) in all matters, internal and external to BMC, related to their Institutional Responsibilities. This includes but is not limited to ensuring to disclose completely and accurately in accordance with the disclosure requirements of journals, conference or meeting conveyers, professional associations, government agencies, and continuing medical education providers. If there is any doubt as to whether or not a Covered Person’s Financial Interests, Interests, as well as Outside Activities (as defined in the Conflict of Commitment Policy #[]) should be disclosed in a particular instance because of a relevance standard, Covered Persons should err on the side of disclosure.
4. **New SFIs Acquired During Ongoing Research.**
 - 4.1. Whenever, in the course of ongoing Research, an Investigator who is new to participating in the Research discloses a SFI or an existing Investigator discloses a new SFI, the BMC Compliance Department will do the following, acting directly or in conjunction with the Review Committee within sixty (60) days:
 - 4.1.1. Review the SFI;
 - 4.1.2. Determine whether it is related to Research;
 - 4.1.3. Determine whether a FCOI exists or could be perceived to exist; and, if so:
 - 4.1.4. Implement a management plan that shall specify the actions that have been, and will be, taken to manage such FCOI.
5. **Review of Existing SFIs and Retrospective Review during Ongoing PHS-Funded Research.**
 - 5.1. The BMC Compliance Department, acting directly or in conjunction with the Review Committee, will take the following actions with respect to a FCOI in ongoing PHS-Funded Research:

- 5.1.1. **Review of Existing SFIs.** Whenever BMC identifies a SFI that was not disclosed timely by an Investigator or, for whatever reason, was not previously reviewed during ongoing PHS-Funded Research, the BMC Compliance Department, will, within sixty (60) days, undertake the same review, determinations and management plan implementation set forth in Section 4, above.
- 5.1.2. **Retrospective Review.** Whenever a FCOI with respect to ongoing PHS-Funded Research is not identified or managed in a timely manner, or the Investigator has failed to comply with a management plan, the BMC Compliance Department, will, within 120 days, complete a retrospective review of the Investigator's activities and the PHS-Funded Research to determine whether any Research was biased in design, conduct, or reporting. The BMC Compliance Department will document the retrospective review in accordance with federal requirements set forth in 42 CFR §50.605(a)(3)(ii)(B)(1)-(9), for PHS-Funded research grants or cooperative agreements, or 45 CFR §94.5(a)(3)(ii)(B)(1)-(9), for PHS-Funded research contracts, and if appropriate, will update the previously submitted FCOI report, describing the new management plan.
- 5.1.3. **Notification and Mitigation Report.** If BMC finds bias, or actual harm, to the design, conduct, or reporting of PHS-Funded Research as a result of the newly discovered FCOI, the BMC Chief Compliance Officer, or designee, will notify the PHS Awarding Component promptly and submit a mitigation report, as required by and including all key elements specified in 42 CFR, Part §50.605(a)(3)(iii) and 45 CFR §94.5a(3)(iii), described further in section 8, below.

At any time, BMC Compliance Department may determine that interim measures are necessary with regard to the Investigator's participation in the Research.

6. Training.

- 6.1. Every PHS-Funded Investigator will complete training on Investigator responsibilities under this Policy at the following times:
 - 6.1.1. Prior to engaging in PHS-Funded Research and at least once every four years thereafter;
 - 6.1.2. Immediately after a revision of this policy in any manner that affects the requirements of PHS-Funded Investigators;
 - 6.1.3. When an Investigator is new to BMC, even if the PHS-Funded Research has already begun;
 - 6.1.4. When a PHS-Funded Investigator is not in compliance with this policy or a management plan, as determined by the BMC Compliance Department.

7. Subrecipients.

- 7.1. If BMC carries out PHS-Funded Research through a subrecipient (e.g. subcontractors or consortium members), BMC will take reasonable steps to ensure that subrecipient Investigators comply with the PHS Regulation by:

- 7.1.1. Incorporating as part of BMC's written agreement with the subrecipient terms that establish whether BMC's FCOI policy or that of the subrecipient will apply to the subrecipient's Investigators. The written agreement will state either that:
 - 7.1.1.1. If the subrecipient's policy applies, the subrecipient shall certify as part of the above agreement that its policy complies with the PHS Regulation, and that the subrecipient's Investigators will comply with the subrecipient's FCOI policy; or
 - 7.1.1.2. If the subrecipient cannot provide such certification, the agreement shall state that that subrecipient Investigators are subject to this policy for disclosing SFIs that are directly related to the subrecipient's work for BMC, as the awardee institution.
- 7.1.2. If the subrecipient's policy applies, the written agreement will specify the time period(s) for the subrecipient to report all identified FCOIs to the BMC Compliance Department. The time period(s) will be sufficient to enable BMC to meet its reporting obligations to the PHS Awarding Component as required by the PHS Regulation.
- 7.1.3. If BMC's policy, as awardee, applies, the agreement shall specify time period(s) for the subrecipient to submit all subrecipient Investigators disclosures of all SFIs to the BMC Compliance Department to enable BMC, as the awardee institution, to comply timely with its review, management, and reporting obligations to the PHS Awarding Component under the PHS Regulation.

8. Reporting of Financial Conflict of Interest for Public Health Service or National Science Foundation-Funded Research

- 8.1. Prior to BMC's expenditure of any Research funds, the BMC Compliance Department shall provide to the PHS Awarding Component, National Science Foundation ("NSF"), or other funding agency, as required, a FCOI report regarding any Investigator's FCOI (unless eliminated) and ensure that a management plan has been implemented. The report ("FCOI Report") to PHS will contain all the information required under federal regulations at 42 CFR §50.605(b)(3) and 45 CFR §94.5(b)(3), as applicable. Under the NSF's policy, conflicts which cannot be satisfactorily managed, reduced or eliminated must be disclosed to NSF. For newly acquired FCOIs during ongoing PHS-Funded Research, described in Section 4 above, the BMC Compliance Department shall provide to the PHS Awarding Component, within sixty (60) days, a FCOI Report ensuring that the Institution has implemented a management plan.
- 8.2. For FCOIs not previously disclosed, reviewed or managed during ongoing PHS-Funded Research, described in Section 5 above, the BMC Compliance Department shall, if the retrospective review results in a finding of bias in the design, conduct or reporting of the Research, promptly submit its mitigation report to the PHS Awarding Component. In accordance with 42 CFR §50.605(a)(3)(iii) and 45 CFR §94.5a(3)(iii), the mitigation report shall include the key elements documented in the retrospective review, a description of the impact of the bias on the Research and the Institution's plan of action or actions taken to eliminate or mitigate the effects of the bias.

- 8.3. After the submission of any initial FCOI Report with regard to ongoing PHS-Funded Research, the BMC Compliance Department shall provide the PHS Awarding Component with annual FCOI Reports that address the status of the FCOI and any changes to the management plan for the duration of the Research (including extensions with or without funds) at the same time as the Institution is required to submit the annual progress report or at the time of project extension.
- 8.4. The BMC Compliance Department shall, upon request of the PHS, make information available to the PHS relating to any Investigator disclosure of financial interests and the institution's review of, and response to, such disclosure, whether or not the disclosure resulted in the Institution's determination of a FCOI.

9. Maintenance of Records.

- 9.1. The BMC Compliance Department will maintain records relating to Investigator SFI disclosures other than those related to NSF Research, including the review of and response to such disclosures (whether or not resulting in a FCOI finding), and any other action under this policy, for at least three years from the date the final expenditures report is submitted to the PHS or other funding sponsor other than NSF. For Research funded by NSF, the BMC Compliance Department will maintain records of all financial disclosures and of all actions taken to resolve conflicts of interest for at least three years beyond the termination or completion of the grant to which they relate, or until the resolution of any NSF action involving those records, whichever is longer.

10. Public Accessibility.

- 10.1. BMC will make this policy available via a publicly available web site.
- 10.2. For PHS-Funded Research, BMC will ensure public accessibility of information concerning the FCOIs currently held by Senior/Key Personnel subject to this policy. The BMC Compliance Department will provide a written response within five (5) business days of receipt by the BMC Compliance Department of a complete written request for information regarding any SFI disclosed to BMC that meets the following three criteria:
 - 10.2.1. The SFI was disclosed and is still held by the Senior/Key Personnel as defined by the PHS Regulation;
 - 10.2.2. BMC determines through the procedure set forth in this policy that the SFI is related to the PHS-Funded research; and
 - 10.2.3. BMC determines through the procedure set forth in this policy that the SFI is a FCOI.
- 10.3. The information that the BMC Compliance Department provides in its written response will be the minimum required by the PHS Regulation. Anyone seeking to make such requests should mail them to the attention of the Chief Compliance Officer, Compliance Department, Boston Medical Center, 720 Harrison Avenue, 6th Floor, Boston, MA 02118.
- 10.4. In compliance with 42 CFR 50.605(a)(5)(iv), information concerning the SFIs of Senior/Key Personnel shall remain available for responses to written requests for at least three years from the date that the information was most recently updated.

References:

1. Promoting Objectivity in Research. 42 CFR Part 50, Subpart F. Responsibility of Applicants for Promoting Objectivity in Research for which PHS Funding is Sought
2. Responsible Prospective Contractors 42 CFR Part 94.

Responsibility:

All Investigators are responsible for compliance with this policy. The BMC Compliance Department (contact COI-Compliance@bmc.org) is responsible for overseeing the implementation of this policy. The Review Committee is responsible for supporting implementation and compliance. BMC Research Operations is responsible for assuring that the BMC Compliance Department is informed of all newly submitted Research proposals.

Forms:

Available through on-line disclosure system maintained by the BMC Compliance Department. For access, contact: COI-Compliance@bmc.org

Other Related Policies:

09.04.000 - Conflict of Interest

39.02.456 - Policies and Procedures Concerning Allegations of Misconduct in Scholarship and Research

BMC/BU Medical Campus HRPP Policies and Procedures “Investigator and Research Staff Conflict of Interest”, <http://www.bumc.bu.edu/ohra/hrpp-policies/hrpp-policies-procedures/#6.5>, “Conflict of Interest Information”, <http://www.bumc.bu.edu/ohra/hrpp-policies/hrpp-policies-procedures/#7.2.2.5>, “Evaluating Plans for Managing Conflicts”, <http://www.bumc.bu.edu/ohra/hrpp-policies/hrpp-policies-procedures/#10.1.1.2.9>

Initiated by: BMC Compliance Department

Contributing Departments:

Office of the General Counsel

BMC Research Operations

Boston University Office of Research Compliance