

Dear Representative,

The **Acute Liver Failure: Science and Practice Symposium** will be held on **March 30-31, 2020**. This two-day CME live activity will take place at the **UT Southwestern Medical Center** and is sponsored by UT Southwestern Department of Internal Medicine, Division of Digestive & Liver Diseases and the Office of Continuing Medical Education at UT Southwestern Medical Center.

This two-day program will provide a comprehensive understanding of all aspects of the pathogenesis and treatment of ALF including possible future therapies. The initial day of the meeting will be devoted to allowing investigators to present work pertaining to pathogenesis and disease mechanisms. The second day of the meeting will be devoted to reviewing aspects of disease management including evaluation, treatment and consideration of prognosis, liver transplantation and liver support devices.

This program is specifically designed for providers in the specialties of Anesthesiology, Critical Care Medicine, Gastroenterology and Hepatology, and Surgery.

Topics include:

- Acute Liver Failure: Overview and Mechanisms of Liver Injury
- Liver Regeneration and Response to Injury
- Genomics of Liver Injury
- Diagnosis and Evaluation of ALF
- Complications of ALF: Riding Out the Storm
- Prognosis in ALF/Role of Transplantation
- The Future of ALF: Newer Modalities of Liver Support

\*\*To see the detailed agenda go to <https://cme.utsouthwestern.edu/rp2003b> .

We are asking for your support of this program with an exhibit fee in the amount of **\$1,500.00**.

#### **Benefits of Exhibiting ....**

Meet one-on-one to discuss your products and services with medical professionals who will attend this meeting. Further benefits of exhibiting at the **Acute Liver Failure: Science and Practice Symposium** includes:

- Exposure to over 100 of attendees.
- Ample intermissions between morning and afternoon sessions allow time for attendees to visit your exhibit
- Breakfast and coffee breaks are held in the exhibit area during session intermissions to help increase traffic flow
- Build visibility for your company in a competitive marketplace
- Expand your prospective place and strengthen existing customer relationships

We look forward to your support and participation.

**Exhibitor Levels and Benefits:**

Your company can support this program with an exhibit fee in the following amounts:

Exhibitor level: \$1,500.00

All support as an exhibitor will be fully acknowledged at the course and you will receive recognition in announcements from the course directors at the meeting, signage and course handouts.

**Attendee Lists:**

Attendee lists will be provided upon request at the program only. As a health care provider, we must respect the privacy of our attendees. Therefore only limited attendee contact information will be provided to exhibiting companies (name, affiliation, city and state). Telephone, fax, email and street addresses will not be distributed.

**Conference and Exhibit Details:**

Exhibit Location:	<i>T. Boone Pickens Biodomedical Building Auditorium Foyer</i>
Exhibit Space:	One 6' foot table & 2 chairs
Exhibit Dates/Times:	Set up on <b>March 30, 2020 at 6:00 a.m.</b> Exhibits during registration, breakfast, breaks and lunch, starting <b>7:00 a.m. until 4:00 p.m.</b>

**Exhibit Space:**

Assigned exhibit space consists of one 6-8 foot table and two (2) chairs. Power outlets are limited and are first come first serve.

**Required Form:**

Included in this package is the Exhibitor Agreement form required. Please complete the 2 page form and return to Kelsey Smith at [Kelsey.Smith@utsouthwestern.edu](mailto:Kelsey.Smith@utsouthwestern.edu) or fax to 214-648-2317 by **March 16, 2020**.

**Confirmation & Payment**

Exhibit space is not confirmed until an Exhibitor Agreement form is completed and signed by both parties. A counter-signed copy of the agreement will be sent back as confirmation of your exhibit space along with a receipt if paid by credit card. **Payment must be received prior to the start of the course.**

Please make checks payable to UT Southwestern/Continuing Education, and reference to program **RP2003B**.

Mail checks to:                   UT Southwestern Medical Center  
Office of Continuing Education  
5323 Harry Hines Blvd., Mail Code 9059  
Dallas, TX 75390-9059

An invoice may be provided upon request. Please send requests/payments to:

Attn: Kelsey Smith  
UT Southwestern Medical Center  
Continuing Medical Education  
5323 Harry Hines Blvd. Mail code 9059  
Dallas, TX 75390-9059.  
Tax ID # 75-6002868

**Exhibit Space Cancellations:**

Cancellations must be received in writing at least ten business days prior to the start of the course. If a cancellation is received after this time, no refund will be provided.

## Parking:



## Location

UT Southwestern Medical Center  
T. Boone Pickens Biomedical Building  
6001 Forest Park Road  
Dallas, TX 75390

## PARKING

Visitor parking is available in the parking garage entered from 6001 Forest Park, located adjacent to the T. Boone Pickens Biomedical Building. The garage entrance is to the right of the front building entrance. The garage elevators will take you to the third floor. Follow the directional signs to the conference room.

Monday - Friday: There is a daily \$3 parking fee (no re-entry) unless specified covered by event.

Saturday-Sunday: Parking is complimentary

## Shipping Instructions:

Incoming Shipping Instructions:	UT Southwest Medical Center Receiving Dock NG01.301 Attn: Kelsey Smith Phone: 2147-648-9502 5901 Forest Park Dallas, TX 75235	<ul style="list-style-type: none"><li>• <b>Email me with number of packages you are shipping and tracking numbers prior to program.</b></li><li>• <b>Be sure to monitor your shipment and bring your tracking number(s) with you.</b></li></ul>
Shipping Department Hours	Monday-Friday: 8:00 a.m. – 4:00 p.m. Saturday-Sunday: Closed	
Outgoing Shipping Instructions:	Representatives will be responsible for preparing and taking all outgoing shipments to the nearest FedEx or UPS store.	

**OFFICE OF CONTINUING MEDICAL & PUBLIC EDUCATION**

**EXHIBITOR AGREEMENT**

*Regarding the Terms and Conditions for a Commercial Exhibit*

<b>Activity Name</b>	<u>Acute Liver Failure: Science and Practice Symposium</u>	<b>Activity #</b>	<u>RP2003B</u>
<b>Location</b>	<u>UT Southwestern Medical Center</u>	<b>City</b>	<u>Dallas</u>
<b>Dates</b>	<u>March 30-31, 2020</u>		
<b>Agreement between</b>	<b>ACCREDITED PROVIDER (PROVIDER)</b> The University of Texas Southwestern Medical Center (UTSW) AND <b>COMMERCIAL COMPANY (EXHIBITOR)</b>		
<b>Company Name</b>	_____		
<b>Address</b>	_____		
<b>City</b>	_____	<b>ST</b>	_____
<b>Contact Telephone</b>	_____	<b>Fax</b>	_____

Exhibitor Information	
<b>Contact Name</b>	_____
<b>Telephone</b>	_____
<b>Email</b>	_____
<b>Cell</b>	_____

**TERMS AND CONDITIONS**

- EXHIBITOR agrees to abide by ACCME Standards for Commercial Support as stated at [www.accme.org](http://www.accme.org) SCS 4.2 For live, face-to-face CME, advertisements and promotional materials cannot be displayed or distributed in the educational space immediately before, during, or after a CME activity. Providers cannot allow representatives of Commercial Interests to engage in sales or promotional activities while in the space or place of the CME activity.
- EXHIBITOR may distribute promotional materials at their exhibit space only. Distribution of pharmaceuticals or other samples is prohibited.
- All commercial support associated with this activity will be given with the full knowledge of the PROVIDER. No additional payments, goods, services or events will be provided to the course director(s), planning committee members, faculty, joint sponsor, or any other party involved with the activity.
- Completion of this agreement represents a commitment and payment is due and collectible by the ACTIVITY DATE unless otherwise agreed upon by the PROVIDER. PROVIDER reserves the right to refuse exhibit space to EXHIBITOR in the event of nonpayment.
- PROVIDER agrees to provide exhibit space and may acknowledge EXHIBITOR in activity announcements. PROVIDER reserves the right to assign exhibit space or relocate exhibits at its discretion.
- PROVIDER Federal Tax ID number is 75-6002868.  
Please remit check payable to UT Southwestern Medical Center. Please identify name of course on the check stub.

**AGREED**

**EXHIBITOR Representative**

**Signature** \_\_\_\_\_

**Name** \_\_\_\_\_

**Title** \_\_\_\_\_

**Date** \_\_\_\_\_

**PROVIDER Representative**

**Signature** \_\_\_\_\_

**Name** Ericka Harden-Dews, JD, CHCP

**Title** Director, Office of Continuing Education & Public Education

**Date** \_\_\_\_\_

