



American Society of Clinical Oncology
Making a world of difference in cancer care

Multidisciplinary Cancer Management Course Application

To be held outside of the United States

ASCO Multidisciplinary Cancer Management Course – provides fundamental education in the diagnosis and treatment of common cancer disease sites, as well as follow-up methods and surveillance procedures for relapse. The course emphasizes a multidisciplinary approach which includes general principles of surgical, medical, and radiation oncology in addition to pathologic diagnosis and staging. The MCMC is designed for physicians in countries where cancer patients are frequently treated by non-specialists. Applicant is encouraged to include nurses as part of the target audience for the course.

ASCO does not support promotional events or offer Continuing Medical Educational (CME) credit for meetings held outside of the United States

ASCO International Affairs

2318 Mill Road, Suite 800, Alexandria, Virginia 22314
Tel. +1 571 483 1503; Fax. +1 571 366 9554; E-mail. mcmc@asco.org

Multidisciplinary Cancer Management Course (MCMC) Guidelines

1. Develop and list clear educational objectives for the course. Changes to the agenda after approval is granted must be forwarded to the MCMC Working Group for review
2. Clearly define the target audience, sponsors, purpose and objective, program description, agenda, and faculty. The local course director and members of the planning committee must be identified.
3. Submit a letter of support by an active ASCO member from the host country of the conference. The letter must clearly state the goals of the course and state the reasons for which the applicant organization is seeking collaboration with ASCO.
4. Signatures of authorized official of applicant organization, Course Coordinator (if different) and Course Director are required on this application. Original copies must be mailed to ASCO, however, Applicant is encouraged to send additional copies via e-mail and/or fax for timely consideration.
5. Following approval of the application by the MCMC Working Group, an ASCO member will be appointed to serve as ASCO Course Director and will be actively involved in the content selection for the course. ASCO will provide limited financial support for the course (i.e. ASCO speaker airfare and honoraria), to be determined on a case-by-case basis.
6. If applying for financial support, a “Funding Request Form” must accompany this application. Please detail speaker airfare and honoraria requests for funding. Also specify on this application if funds are being requested from additional organizations other than ASCO.
7. Applicant must comply with all the Legal Terms and Conditions Governing ASCO Multidisciplinary Cancer Management Courses attached to this application. Conference organizers will convey all criteria to organizing committee members and faculty to insure full compliance.
8. Submit original evaluation forms, complete attendee lists with email addresses, and a summary of the course **within 45 days** after the conclusion of the program. These should include statistics on participants and feedback, and a list of participants.
9. Applicant may be granted permission to use the ASCO logo on promotional materials upon request. All materials must be in accordance with the ASCO guidelines for logo use and include the standard disclaimer found in the Legal Terms and Conditions Governing ASCO Multidisciplinary Cancer Management Courses. All materials *must* be pre-approved by ASCO in writing prior to their release.
10. Organizers agree to comply with ASCO policies governing reproduction of ASCO content.
11. All Multidisciplinary Cancer Management Courses are required to conform to a standard evaluative process and all course attendees must participate

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Applicant Information

Organization Name: _____

Primary Contact Name: _____

Primary Contact Title: _____

Preferred Mailing Address: _____

City: _____

State/Province: _____

Zip/Postal Code: _____

Country: _____

Telephone: _____

Fax: _____

E-Mail: _____

Website: _____

Year organization was incorporated or started: _____

Does a Board of Directors govern your organization? Yes No

What countries are represented within the membership of your organization? _____

Does the organization have not-for-profit status (or legal equivalent) under applicable law?
(If yes, attach documentation of non-profit status to this application). Yes No

Background Information on Cancer Care in Applicant Country/Region

How many oncologists are in the target country/region? (specify specialty areas, if available)

Describe patients with cancer in your country (demographics, major cancer types, etc.)

Describe how a patient is diagnosed and receives treatment (who diagnoses/treats, availability of pharmaceuticals or treatment technologies, etc)

Identify challenges to providing treatment (training, access to drugs/technology, etc)

Are patients with cancer usually treated by specialists or general physicians? What is the availability of health care professionals to treat patients with cancer?

Course Information

Course Date(s): _____

Course Location: _____

Will the MCMC be held in conjunction with another conference? Yes No

Brief description of the concurrent conference (if applicable)

Describe the expected audience for this course (specialization, experience level, geographic origin, etc.)

Anticipated number of attendees: *(if estimate is based on previous attendance figures, please note dates, location and attendance figures for a maximum of three years)*

The course will include (check all that apply):

Lectures Yes No

Case Presentations Yes No

Other: _____

Breakout Sessions Yes No

Skill Stations Yes No

Name some skills training topics that would positively impact cancer care in your country:

What would you like attendees to learn as a result of attending this course?

What legacy would you like to leave after this course is completed? (tumor boards, case conferences, patient support groups, cancer clinics, additional presentations, etc.)

Proposed Faculty Members:

Provide a list of faculty, to include professional affiliation. Faculty must complete a disclosure form 45 days prior to the course or their participation will not be permitted. Faculty selection will ultimately be a joint decision by ASCO and the host society.

Describe your plans to promote this event to general practitioners and/or other specialties:

Applicant agrees to use the ASCO course evaluation form Yes No

Applicant agrees to provide a complete list of attendees with email addresses to ASCO Yes No

Official language of the conference is: _____
Will simultaneous interpretation (translation) be offered? Yes No
If yes, in what language(s): _____

Names and affiliations of ASCO members who will participate in organizing the course:

Does your organization plan to publish course proceedings or post them on a website?

Yes No If yes, please describe in detail: _____

Does this course require approval from a governing body (i.e., Ministry of Health)?

Yes No

If yes, please provide the following information:

1. Name/title of government official _____
2. Name of government body _____
3. Length of time to complete approval process _____

Names of other entities being approached for sponsorship of the course:

Are you applying for funding?

Yes No

If yes, please fill out the Funding Request form and send it in with this application.

Submit a preliminary budget. Include anticipated registration and sponsorship revenue. Indicate all anticipated sources and amounts of funding, specify expenditures for facilities, travel, honoraria, accommodations, course materials, etc. Failure to submit a detailed budget may hinder ASCO's ability to fully evaluate the application.

MCMC Train the Trainer Program

The Multidisciplinary Cancer Management Course (MCMC) "Train the Trainer" program is designed to increase the understanding of multidisciplinary cancer care concepts and equip organizers of future ASCO courses and other educational activities with effective teaching methods and practical skills for course implementation. Participants learn general teaching principles and elements of multidisciplinary treatment, improve their presentation skills, and discuss implementation strategies for organizing an MCMC of their own.

Are you interested in holding a workshop to certify ASCO MCMC trainers? Yes No

Please note that all materials containing ASCO content, including ASCO logo and materials must be pre-approved in writing by ASCO prior to release

Required Signatures

By signing this application to hold an MCMC, the applicant organization agrees that if this application is accepted in writing by ASCO, it will conduct the course in accordance with the *Legal Terms and Conditions Governing ASCO Multidisciplinary Cancer Management Courses* attached hereto.

Authorized Official of Applicant Organization

Signature

Title of Authorized Official

Please print or type name

Date

Physician Course Chairperson

Signature

Please print or type name

Date

Coordinator (Primary Contact Person)

Signature

Please print or type name

Date

**Before you send in this application,
please be sure to attach the following documentation:**

- A letter of support from an ASCO member
- Budget for the course
- Funding application, if applicable
- Draft Agenda

Legal Terms and Conditions

Governing ASCO Multidisciplinary Cancer Management Courses (MCMCs) held outside of the U.S.

Upon written approval by ASCO of the signed ASCO MCMC Application, Applicant and ASCO shall be bound by agreement to these Legal Terms and Conditions:

- I. Risk of financial gain or loss from the event is to be borne by applicant organization, and not ASCO. ASCO shall provide no funding for the event except to the extent funding from ASCO is expressly set forth in the Funding Request Form and has been approved by the MCMC Working Group.
- II. The educational program must present a balanced view of treatment options. Presenters should use generic drug terms instead of brand names in presentations.
- III. All materials bearing the ASCO name must be pre-approved by ASCO in writing. No mention of the course or ASCO participation can be made prior to approval being granted. Specific written permission is required for the use of the ASCO logo and such permission must be approved through the ASCO National Headquarters in Alexandria, Virginia. Criteria for the use of the logo will be sent with a copy of the ASCO logo upon request of the logo. When the ASCO name or logo is used, the following disclaimer in a conspicuous and unaltered form must accompany it: *"This program has the American Society of Clinical Oncology's approval for quality of educational content. ASCO endorsement does not constitute medical advice. Health care providers should exercise their own independent medical judgment."*
- IV. ASCO reserves the right to withdraw its involvement in the event at any time upon written notice to applicant if the applicant's actions or omissions have caused the event to be out of compliance with ASCO policies. In such event, the applicant will reimburse ASCO for its expenses incurred in connection with the event, and shall provide reasonable notice to faculty and attendees that ASCO has no involvement in the event.
- V. ASCO faculty must submit a completed financial Disclosure Declaration to ASCO at least 45 days prior to the meeting. In the Disclosure Declaration, each faculty member must disclose significant financial interests or relationships with all manufacturers of drugs, devices, or instruments discussed during presentations, and with any for-profit or commercial organizations that provide financial support for the course presentations. ASCO may publish faculty financial declarations in program materials and reserves the right to replace or limit the participation of faculty upon ASCO's determination that a conflict of interest exists.
- VI. Within **45 days** after the conclusion of the program, ASCO must be provided with a complete list of attendees with their email addresses and evaluation documents.
- VII. If commercial entities sponsor or provide support for an MCMC presentation that sponsorship or support must be in the form of a grant made directly to the ASCO-approved applicant organization serving as host for the Course. The grant should cover such items as meals and beverages for attendees of the Course and honoraria and travel-related costs for speakers. No representative of a commercial entity may be involved in the course planning, preparation of course content, or selection of MCMC speakers and course attendees. Representatives of commercial entities may not distribute literature or promote products in the meeting rooms.

Legal Terms and Conditions

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- VIII. ASCO shall not be liable to Applicant, to Applicant's agents, employees, officers, members, or to any MCMC faculty member for any costs, claims, expenses, or damages (consequential or otherwise) arising out of the MCMC meeting or Applicant's use, publication, or distribution of MCMC materials.
- IX. Applicant organization may not assign the Agreement or any of Applicant organization's rights hereto.
- X. The laws of the Commonwealth of Virginia (USA) apply to this agreement; and the federal and state courts in Alexandria, Virginia, have exclusive jurisdiction over the parties and the subject matter in any dispute relating to this agreement.
- XI. This agreement only concerns the subject matter herein and cannot be amended without both parties' written agreement
- XII. Applicant must obtain the prior written permission of ASCO before creating, publishing, or distributing ASCO content or any materials bearing the ASCO name or logo. In addition, Applicant may not re-publish or re-distribute ASCO course materials, and subsequent publication or distribution of any content from ASCO curricula is subject to prior written approval by ASCO. Enduring materials which contain ASCO content will be subject to ASCO publication procedures and must be approved by ASCO prior to production.
- XIII. ASCO owns the copyright to all MCMC material; any modifications to the core MCMC course materials will require assignment of copyright to ASCO.



FUNDING REQUEST FORM

Please indicate below which expenses you would like ASCO to fund and send the form in with your application. Return this form to ASCO with your completed application and draft budget. Indicate all anticipated sources and amounts of funding, specify expenditures for facilities, travel, honoraria, accommodations, course materials, etc.

Failure to submit a detailed budget may hinder ASCO’s ability to fully evaluate the application.

Organization: _____

Conference Date(s): _____

Conference Location: _____

I am applying for: Advanced Cancer Course MCMC

Please detail other requests for funding from organizations and industry:

ITEM	FUNDING* REQUESTED	NUMBER OF SPEAKERS	TOTAL (IN U.S. DOLLARS)
Roundtrip airfare/business class <i>(flights in duration of 6 hours or more)</i> Include estimated travel cost	<input type="checkbox"/> Yes <input type="checkbox"/> No		\$
Roundtrip airfare/coach class <i>(flights in duration of less than 6 hours)</i> Include estimated travel cost	<input type="checkbox"/> Yes <input type="checkbox"/> No		\$
Honoraria @ \$500 per person	<input type="checkbox"/> Yes <input type="checkbox"/> No		\$
Other:	<input type="checkbox"/> Yes <input type="checkbox"/> No		\$
TOTAL (in U.S. dollars)			\$

*LOCAL CONFERENCE ORGANIZERS ARE RESPONSIBLE FOR THE COST OF

- ground transportation,
- hotel accommodations
- and meals for speakers.