

American Association of Hip and Knee Surgeons Member and Association Ethical Guidelines

Adopted 3/30/11 (Replaces ethics policies adopted 9/8/08)

The American Association of Hip & Knee Surgeons (AAHKS) is a professional Association that includes physicians, surgeons and staff dedicated to the improvement of surgical and non-surgical care of patients with diseases and injuries of the hip and knee. The AAHKS will conduct its business honestly and ethically wherever we operate. The AAHKS will strive to improve the quality of our services, products and operations, and establish and live up to a reputation for honesty, fairness, respect, responsibility, integrity, trust and sound professional judgment. No illegal or unethical conduct on the part of officers, directors, employees or volunteers is in the association's best interest. The AAHKS will not compromise its principles for short-term advantage. The ethical performance of the Association is the sum of the ethics of the men and women, who volunteer in leadership positions, are members or employees of the AAHKS. Thus, we are all expected to adhere to high standards of personal integrity.

Officers, directors, and employees of the Association must never permit their personal interests to conflict, appear to conflict, or allow the possibility of conflict with the interests of the Association, its members or volunteers. Officers, directors and employees must be particularly careful when representing the AAHKS in any transaction with others with whom there is any outside business affiliation or relationship

Officers, directors, and employees shall avoid using their Association contacts to advance their private business or personal interests at the expense of the Association, its members or volunteers.

No bribes, kickbacks or other similar remuneration or consideration shall be given to any person or organization in order to attract or influence business activity. Officers, directors and employees shall avoid the solicitation or the acceptance of anything more than \$10.00 in gifts, gratuities, fees, bonuses or excessive entertainment, in order to attract or influence business activity.

Officers, directors and employees of AAHKS will often come into contact with, or have possession of, proprietary, confidential or business-sensitive information and must take appropriate steps to assure that such information is strictly safeguarded. Proprietary, confidential and sensitive information about this Association, other associations or companies, individuals and entities should be treated with sensitivity and discretion and only be disseminated if permitted by mutual advanced agreement and/or on a need-to-know basis to only those who appreciate and will maintain the requisite of confidentiality.

Officers, directors and employees will seek to report all information accurately and honestly, and as otherwise required by applicable reporting requirements.

Officers, directors and employees will refrain from gathering competitor intelligence by illegitimate means and refrain from acting on knowledge which has been gathered in such a

manner. The officers, directors and employees of AAHKS will seek to avoid exaggerating or disparaging comparisons of the services and competence of their competitors.

Officers, directors and employees will obey all Equal Employment Opportunity laws and act with respect and responsibility towards others in all of their dealings.

All officers, directors and employees agree to disclose unethical, dishonest, fraudulent and illegal behavior, or the violation of association policies and procedures, directly to the leadership. If an employee believes that disclosing an unethical, dishonest, fraudulent or illegal behavior to his/her supervisor will be detrimental to his/her employment, the employee should directly contact the president and/or the executive director.

Association Leadership individuals are not to promote, endorse, use, or permit the use of their elected, appointed, or employed title or position to promote any product, service or organization. An exception is when the appointed title is promoted to his or her surgery practice so long as such business is the individual's primary employment and promotion is targeted to his or her primary consumer. (Primary employment defined as the individual spending the majority of working hours in or deriving the majority of income from this business.)

No Association Leadership individual, specifically including the Editor of the *Journal of Arthroplasty*, may use his or her elected or appointed titles in any promotion or endorsement in any Association publication, including the *Journal of Arthroplasty*.

No Association Leadership individual may allow his or her elected title to be used in an endorsement of a surgical product he admires, whether payment is made or not. Nor may he or she do so in a product review published in a magazine or on the Internet.

No Association Leadership individual may use his or her official title in an advertisement for his own private surgical practice that provides his primary source of income.

No Association Leadership individuals may allow his or her AAHKS title to be used to promote a different, third party surgical practice, business, or organization.

The Association recognizes that many Association Leadership individuals perform a valuable educational function. While encouraging Association Leadership individuals to continue their service as educators, the Association wishes to avoid any perception of possible conflicts of interest.

Any Association Leadership individual who is engaged in teaching or producing surgically related products or programs that compete directly or indirectly with AAHKS programs or products shall disclose those conflicts prior to participating in AAHKS discussions, meetings or events,

In speaking or educational situations (and in the promotion of same), the Association Leadership individual may use his or her elected, appointed, or employed title in a

biographical paragraph context. The Association Leadership individual must additionally make full disclosure regarding any business or financial interests related to the subject matter that is intended to be discussed in such lecture through a clear and understandable conspicuous disclaimer (the AAHKS does not endorse any products or surgical techniques). All AAHKS Leadership individual opinions expressed are those only of the Leadership individual and should not in any way be interpreted to imply that they represent the AAHKS.

Association Leadership individuals are permitted (and encouraged) to express personal opinions about political issues in forums, other organizations, and in the society at large. In expressing such opinions, however, they may not utilize their position on the Board in any manner that would imply their personal opinion is the position of the AAHKS, its committees or component and subsidiary organizations. If there is any question raised, the Association Leadership individual should clarify that the AAHKS does not endorse any products or surgical techniques. The opinions expressed should be clearly stated as that of the Association Leadership individual only and should in no way be expressed or implied as representing the AAHKS.

In professional writing containing information on surgical products, services or methodologies, the Association Leadership individual shall not use or reference any Association leadership title. Any use of Association titles in professional publications would require advanced approval of the AAHKS Board, an appropriate disclaimer containing language that the opinions expressed in this writing are only those of the Association Leadership individual and should in no way be interpreted to imply that they necessarily represent those of the AAHKS and if appropriate the disclaimer identifying that the AAHKS does not endorse any products or surgical techniques.

All AAHKS Officers, Board Members, Committee Chairs, and Members are expected to comply fully with the American Academy of Orthopaedic Surgery (AAOS) Standards of Ethics and Professionalism.

Reference: <http://www.aaos.org/about/papers/ethics.asp>
<http://www3.aaos.org/member/profcomp/sop.cfm>

Violation of this Guide for Association and Leadership Behavior may result in discipline, including possible termination. The degree of discipline will relate in part to the nature of the violation whether there was a voluntary disclosure of any ethical violation and whether or not the violator cooperated in any subsequent investigation.

AAHKS Conflict of Interest Policy

Rationale

All members of the AAHKS have the primary duty to serve the best interests of hip and knee surgery patients under their care. In the course of that care and in the course of their professional careers for all members and/or leaders of the AAHKS, situations will occur in which financial or personal considerations may, or may appear to, compromise or create a conflict in professional judgments. Additionally members participating in the advancement and mission of their professional association may, or may appear to, have conflicts that could similarly compromise judgments. All members of the Board of Directors, Committee Chairs, Committee Members, Executive Director, and other individuals who serve in AAHKS elected or appointed positions have primary and fiduciary duties of care and loyalty to the Association. Among these duties include a duty to avoid and disclose Conflicts of Interest (COI), a duty not to expropriate corporate opportunities, and a duty to place the interest of the Association foremost in their dealings related to the Association or that may impact the Association.

The appearance of a conflict by itself may be serious enough to damage objectivity and as such all apparent conflicts should be managed with the same degree of concern as known or established conflicts. AAHKS members must disclose to peers and patients any financial relationships or conflicts of interest with industry that may relate individual patient care or professional activities.

Areas of “Conflict of Interest” (COI) in Hip and Knee Surgery

COI in Clinical Practice

Most surgical care provided by hip and knee surgeons for hip and knee patients is delivered in a hospital setting and requires the use of commercial surgical implants including a commercial surgical implant system and pharmaceutical products. Most hospitals and health care systems supporting these surgeries have unique COI policies governing behaviors of all care participants for hip and knee surgery patients. AAHKS members should be knowledgeable of these policies and abide by these unique local COI policies, locally governing behaviors and relationships between patients, hospitals, hospital employees, surgeons and commercial entities. These specific COI policies are most relevant to the clinical episode of care being provided and as such should be a primary guide for the behavior of hip and knee surgeons in their local hospital setting.

AAHKS members may be involved with formal surgical patient outcome assessment and/or implant/system design. Such surgeons may have conflicts through consulting relationships or royalty payments for intellectual property utilized by commercial entities for such products as implants, implant systems, design, manufacturing and pharmaceuticals. All AAHKS members have the duty to disclose to hip and knee patients and hospitals any conflicts of interest that may exist in these relationships affecting or possibly affecting surgical hip and knee care.

COI in Education

AAHKS members may be involved with surgical education programs as students, faculty and/or lab instructors. Surgeon to surgeon learning through both CME courses and/or non-CME education programs are important ways for surgeons to share their knowledge and experience directly benefitting patient care by minimizing “learning curve” effects of new surgical technology and techniques. In such programs, the surgeon speaker or educator must be solely responsible for the intellectual content of materials presented including printed materials, illustrations and slide presentations.

Surgical education requires both intellectual and psychomotor knowledge. Psychomotor skills education may occur through live surgical visitations/observations, proctoring, cadaveric surgical dissection simulation and/or other virtual surgical simulation learning techniques. Such psychomotor skills surgical education programs must be differentiated and recognized as important complimentary education to didactic learning needed for medical or pharmaceutical education. Direct surgeon-to-surgeon teaching and training is critically important to safe patient care by reducing surgical errors and optimizing patient outcomes.

The importance of complimentary didactic and psychomotor education is recognized by the FDA through its regulatory mandates for surgeon education by experienced surgeons for the introduction of some new surgical technologies and/or techniques.

Surgeons are critically involved with the design, introduction and testing of surgical implants or implant systems. As such they are most knowledgeable about technical surgical factors that may only otherwise be learned through ‘trial and error’ surgical experiences. Designer surgeon knowledge and experience, however, requires appropriate and thorough ‘transparent’ disclosure of conflicts. Surgeons with industry conflicts of interest are an important component of surgical education for “less” knowledgeable or experienced surgeons. Surgeons, industry, professional medical organizations, universities and medical centers must collaborate transparently and fully in this process to insure optimal patient care and outcomes.

COI policies of the AAOS may apply for some surgical education when the focus and/or site of the activity is supported by the AAOS. In such circumstances, the COI policies of the AAOS should be the primary guide for surgeon educator behavior. Additionally for CME educational courses, ACGME guidelines and policies apply and should be supported by AAHKS members.

For industry based/supported courses or education programs, full and appropriate, all AAHKS members require disclosure. It should also be made clear by faculty and/or instructors that even with full disclosure to hip and knee students/course participants by surgeon teachers/faculty members, conflicts still exist and may require active management beyond disclosure. Under these circumstances the welfare of the surgical hip and knee patient is paramount.

AAHKS members participating as faculty and/or lab instructors in formal education programs may accept fair market value honoraria and reimbursements for reasonable expenses. AAHKS members, not acting as teachers or instructors should not accept directly or indirectly any “benefit” from commercial entities.

COI in Research

For the benefit of hip and knee patients research on clinical outcomes, basic science and implant design is often done through formal collaboration of knowledgeable surgeons and commercial entities dedicated to implant design and production. The history of this collaborative relationship is well recognized and has demonstrated a significant benefit for patients. Compensation for such collaboration and intellectual property (IP) is appropriate and should be based upon a fair market value of the IP, product improvement or new product.

Hip and knee research in medical school or medical center settings should be governed by local COI and Disclosure policies of the specific medical school or medical center involved with the research. Hip and Knee research requires knowledge and compliance for all AAHKS hip and knee member researchers and compliance with local Institutional Research Board (IRB) policies. All AAHKS members have the duty to place the welfare of the patient first in all such research activities and programs.

COI in Association Leadership

Conflicts of Interest may occur when Association members in a position of trust, such as an officer, director, or other person in a leadership position, has professional or personal interest/s that compete with, or differ from, the Association’s interests. Such competing interests may make it difficult to fulfill his or her duties impartially. Association Leadership individuals are not to use their position or title for their own personal gain or for the private gain of friends, relatives, or other organizations (except as provided in the section following below). “Gain” for purposes of this policy includes direct or indirect financial benefit, equity interests, promise of future or current payment of other consideration including products, services, promotion, publicity, professional advancement, or favors. Even if there is no evidence of improper actions or Gain, a COI can create an appearance of impropriety that can undermine confidence in the ability of that person to act properly in his or her position. It is important to be sensitive to and avoid apparent conflicts of interest as well as actual conflicts. Place the Association’s interest first in dealings on the Association’s behalf. Be alert to possible opportunities and risks, and promptly inform appropriate personnel concerning the opportunities or risks.

Be alert to possible COI and to circumstances that could create even the appearance of a COI and at a minimum disclose those conflicts before taking part in any deliberations or decisions on subjects where conflicts or possible conflicts exist. Be aware that recusal may be appropriate where an actual or apparent COI exists.

Preserve the confidentiality of information acquired in one's capacity as a volunteer or employee of the Association wherever it appears that the information is proprietary to the Association. Do not appropriate corporate opportunities available to the Association.

Resource: *Association Law Handbook*, 3rd Edition

Resolution of Overlapping COI Policies in Hip and Knee Surgery

Because of the complex character of care delivered to hip and knee patients, it is frequent to have COI policies that overlap or appear to compete during episodes of care, during education programs and research programs or activities. When such overlapping policies exist, the benefit of the patient is paramount and the policy most relevant, specific or local, should be used to provide primary guidance for all parties.

Definitions

Conflict of Interest – circumstances that create a risk that professional judgments or actions regarding a primary interest will or could be unduly influenced by a secondary interest. Such conflicts can occur in the course of clinical and professional circumstances including: clinical practice decisions, research decisions, education decisions, leadership decisions, and financial decisions

Benefit – a gift, gratuity, compensation, remuneration, loan, service, entertainment, scholarship, reimbursement of travel expenses or other favor given to an AAHKS member or family member valued >\$10.

Fair Market Value – the value of a good or service in a business transaction consistent with the general market value

Product – something that is distributed for use or consumption

Financial Interest/s – an interest based upon an investment in a common enterprise including a note, stock, treasury bond, debenture, certificate of interest, or participation in a profit agreement not including publicly available stock holdings such as mutual funds. These interests may also include venture capital investments or investments of undetermined financial value potential.

Commercial entity – any for profit enterprise that develops, manufactures, sells, or distributes drugs, medical devices, other goods or services to the health care industry.

Association – the AAHKS

AAHKS Disclosure Policy

Annual Disclosure

All AAHKS officers, committee chairs and annual meeting presenters or moderators must disclose and/or update any “conflicts of interest” (COI) as defined by the AAHKS annually.

Process for Disclosure

All required disclosures will be submitted by April 1 of each year through the American Academy of Orthopaedic Surgeons Disclosure Program.

Reference: http://www3.aaos.org/education/disclosure/disclosure_intro.cfm

During the course of the year, if not previously disclosed, any new “conflicts of interest” will be disclosed before relevant AAHKS Board, committee or annual meeting programs. All Board members, Committee Chairs and Annual Meeting Program Chair will receive a copy of the disclosure for related Board members committee members and annual meeting presenters or moderators annually to assist in appropriate management of conflicts where they exist.

Conference Calls: The notice for Conference Calls for the Board, and Calls or Meetings of the Committees and Task Forces of AAHKS shall inform participants that the expectation is for any participant on the call to disclose any potential conflict during the call. Any such conflicts would be noted in the minutes of that call.

Face to Face Board Meetings: The Printed Materials for the Meeting shall include the AAOS Disclosure Form for all participants. Each participant will verbally verify at the start of the meeting that those disclosures are accurate or provide corrections. Corrections would be included in the minutes of the meeting, and the person making the correction will update the disclosure form with AAOS as soon as practical.

Procedures and Guidelines for Dealing with a Potential COI

Notice & Full Disclosure. Upon a complaint or upon perceiving an actual or possible conflict in any matter that may come before the Association Board or committee, the Association Leadership individual in question shall make full and complete disclosure of the nature of the matter in writing to the Board for action or guidance.

Disclosure of Competing Organization Involvement. If an Association Leadership individual holds a position as trustee, director, officer in, or consultant to any organization other than the Association, she or he must make full disclosure of such interest or relationship if the organization is a competitor of the Association for membership of hip and knee surgeons or by providing services to hip and knee surgeons that the Association provides, including but not limited to educational offerings,

publications or advocacy. Full disclosure must also be made before any discussion or negotiation of a transaction between the Association and the organization.

Recusal. In the event that an Association Leadership individual has an actual, claimed or even potential conflict of interest with respect to any Association matter, the Association Leadership individual may recuse him or herself, or the body may elect to request the individual recuse him or herself, from any further presence or participation in any affected part of the Board or committee meeting, discussion, deliberation, or action upon such matter. Recusal means to disqualify oneself from participation in a matter; to remove oneself from participation in the discussion and voting to avoid a conflict of interest. The recused person may be invited back to answer additional questions or provide clarification and then recuse him or herself again.