



Department of Radiology

2024 Tutorials in Diagnostic Radiology

January 14-18, 2024
Fairmont Kea Lani, Maui, Hawaii



EXHIBITOR PROSPECTUS

DEAR INDUSTRY COLLEAGUES:

On behalf of Drs. Robert P. Hartman, B. Matthew Howe, Christopher H. Hunt, Robert W. Maxwell and the Mayo Clinic Department of Radiology Continuing Medical Education Office, we are pleased to announce our upcoming Tutorials in Diagnostic Radiology course to be held January 14-18, 2024, at Fairmont Kea Lani, Maui, Hawaii.

Mayo Clinic recognizes these types of educational programs would not be possible without your support. Therefore, we invite you to exhibit at this educational activity with an exhibit fee in the amount of \$5,000. This fee is for the exhibit space, which includes one draped table and two chairs. In support of ACCME guidelines, exhibitors will be located in a separate area from the educational activity but near the food and beverage area for optimal contact during breakfast and coffee breaks.

To exhibit at this course:

- Complete and return the provided Exhibitor Agreement form. This agreement may be substituted with your company's standard Letter of Agreement form.
- Submit payment before December 8, 2023. Please make payment payable to Mayo Clinic and send to the address below. For your convenience, our Federal tax Identification Number is 41-6011702.

We look forward to another successful Tutorials in Diagnostic Radiology course and hope you will be able to join us in Maui! If you have any questions or your company requires completion of a web-based application, please feel free to contact me at the address below.

GENERAL INFORMATION

Official Meeting Dates

January 14-18, 2024

Welcome Reception

January 14th
6-8 p.m.

Meeting Location

[Fairmont Kea Lani](#)
Maui, Hawaii

Expected Attendees

120 Radiologists

Booth Fee

\$5,000

Room Rate/Deadline

Starting at \$499+ by Dec. 12, 2023. Early reservations are highly encouraged.

EXHIBIT SCHEDULE

Vendors will be allowed to exhibit during all breakfast and break times throughout the course. The program schedule will be available on our [website](#).

*Schedule subject to change

CONFERENCE HIGHLIGHTS

Topics and speakers are carefully chosen to provide quality, practical and evidence-based sessions.

Presentation topics for 2024 include:

- Strategies for Optimizing Breast MR Protocols
- Imaging of Sports-Related Hand and Wrist Injuries
- Imaging Features of Benign Versus Malignant Spine Fractures
- Cystic Pancreatic Lesions
- Lung Cancer Characterization and Staging

WHY SPONSOR

Technical and educational exhibits provide a professional and educational environment in which attendees can receive demonstrations, view products and services and discuss the uses of your products and/or services. Additionally, the exhibits enhance the educational content of the meeting helping to provide quality continuing medical education.

Benefits of Sponsorship:

- Interact face-to-face with numerous medical professionals
- Build visibility for your company in a competitive marketplace
- Expand your customer base and strengthen existing customer relationships
- Introduce new products and services
- Additional advertisement opportunities to expand reach and further socialize with attendees

PAYMENT

Payments are due no later than Dec. 8, 2023. Acceptable methods: VISA, Master Card, AMEX or check.

Please see Exhibitor Agreement form below for more information.

KEY CONTACTS

If interested in exhibiting and have questions, please contact:

Holly Schlink
CME Specialist
schlink.holly@mayo.edu
507-284-2849

Mayo School of Continuous Professional Development (MSCPD) Exhibitor Agreement

Activity Title	Tutorials in Diagnostic Radiology
Activity Number	24R01801
Location	Fairmont Kea Lani, Maui, HI
Dates	January 14-18, 2024

Agreement between: ACCREDITED PROVIDER: Mayo Clinic College of Medicine – MSCPD AND:

Company Name (Exhibitor) (as it should appear on printed materials)	
Exhibit Contact (if different then exhibit Rep.)	
Name(s) of Representative(s) exhibiting: (Maximum of two representatives allowed per exhibit)	
Address	
Telephone	
Fax	
Email	
The named exhibitor wishes to exhibit at the above named activity for the amount of	\$5,000

TERMS AND CONDITIONS

- EXHIBITOR agrees to abide by ACCME Standards for Commercial Support as stated at www.accme.org: SCS 4.2: "Product-promotion material or product-specific advertisement of any type is prohibited in or during CME activities. The juxtaposition of editorial and advertising material on the same products or subjects must be avoided. Live (staffed exhibits, presentations) or enduring (printed or electronic advertisements) promotional activities must be kept separate from CME." "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 only distribute educational promotional materials at their exhibit space. Distribution of non-educational items (pens, notepads, etc.), pharmaceuticals or product samples is prohibited.
- All exhibit fees 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 provider, 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 or Code of Conduct violation.
- 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.

By signing below, I agree to the “Terms and Conditions” outlined on Page 1 of this Exhibitor Agreement (including ACCME Standards for Commercial Support):

The person signing below is authorized to enter into this agreement:

Exhibitor Representative Name	Signature	Date
Mayo Clinic Representative Name	Signature	Date

PAYMENT INFORMATION

Please indicate your method of payment:

PROVIDER **Federal Tax ID number is 41-6011702.**

Please remit check payable to: Mayo Clinic- Mayo School of CPD. Please identify name of course on the check stub.

<input type="checkbox"/> Check	<input type="checkbox"/> Credit Card
<p>Make payable to: Mayo Clinic</p> <p>Remit to: Mayo Clinic Radiology CME Office - Holly Schlink 200 First Street SW, RO_MA_02_48WRAD Rochester, MN 55905</p> <p>Please identify the course name, Tutorials, on the check.</p>	<p>For payment by credit card, please call the Radiology CME Office Registrar at 866-246-1581</p> <p><i>Do not send credit card information via email or fax.</i></p>

NOTE: There may be additional charges depending on the meeting location (power, internet access, etc).
Please list additional requests here:

Complete and return this form along with your payment made to Mayo Clinic, Federal Tax ID# 41-6011702, before **December 8, 2023** to:

Mayo Clinic
Radiology CME Office – Holly Schlink
200 First St SW, RO_MA_02_48WRAD
Rochester, MN 55905

E-mail: radiologycme@mayo.edu
T: 507-284-2593; F: 507-266-3061