14th Annual Multidisciplinary Cardiovascular and Thoracic Critical Care Conference

October 5-7, 2017
Omni Shoreham Hotel • Washington, DC

www.sts.org/criticalcare

EXHIBITOR PROSPECTUS
About the STS Critical Care Conference

The 14th Annual Multidisciplinary Cardiovascular and Thoracic Critical Care Conference is designed to advance the knowledge and expertise of health care professionals in cardiovascular and thoracic (CVT) critical care. Its goal is to bring together the entire team of health care professionals who provide care for patients undergoing CVT operations and interventional procedures.

The conference will address the complex nature of CVT critical care cases, including their unique physiology, array of procedures, and potential complications. The latest management strategies for challenging clinical problems will be presented and current controversies will be discussed utilizing a variety of educational methodologies. Leading experts will present new concepts, technologies, management protocols, and clinical experiences in their respective disciplines.

Stand Out Among Your Competitors & Partners

Increase your company’s opportunity for personalized interactivity with attendees by exhibiting at the STS Critical Care Conference. Seven breaks take place in the exhibit area and have been scheduled so that attendees have plenty of time to visit your booth.

The intimate size of the STS Critical Care Conference Exhibition helps ensure that you will have quality access to meeting attendees. Secure your company’s space today by contacting Angel Law, STS Exhibit Manager, at alaw@sts.org or (312) 202-5838. An exhibit booth space application can be found on page 4.

Exhibitor Information

2017 Venue
Omni Shoreham Hotel
2500 Calvert St NW, Washington, DC 20008

The Exhibit Hall will be located in the Blue Pre-function Room on the lobby level of the Omni Shoreham Hotel. Educational sessions will be held in the Blue Room that is connected to the Exhibit Hall. All attendees must use the Blue Pre-function Room in order to enter the educational sessions.

Exhibition Schedule
Thursday, October 5, 2017 — 7:00 a.m. – 4:30 p.m.
Friday, October 6, 2017 — 7:00 a.m. – 4:00 p.m.
Break Schedule

*Thursday, October 5*
- 9:45 a.m. – 10:15 a.m.
- 11:45 a.m. – 12:00 p.m.
- 4:00 p.m. – 4:30 p.m.

*Friday, October 6*
- 10:00 a.m. – 10:30 a.m.
- 11:45 a.m. – 12:00 p.m.
- 1:00 p.m. – 1:30 p.m.
- 3:30 p.m. – 4:00 p.m.

Floor Plan
APPLICATION FOR EXHIBIT SPACE

14th Annual Multidisciplinary Cardiovascular and Thoracic Critical Care Conference
October 5-7, 2017 • Washington, DC • Omni Shoreham Hotel

Application to exhibit dated ____________________, 2017, by and between __________________________ (hereinafter called “Exhibitor”) and The Society of Thoracic Surgeons (hereinafter called “STS”).

In accordance with the terms and conditions governing exhibits at the STS Multidisciplinary Cardiovascular and Thoracic Critical Care Conference at the Omni Shoreham Hotel, Washington, DC, October 5-7, 2017, the undersigned hereby makes this application for exhibit space, which, when accepted by STS, becomes a contract between Exhibitor and STS. Terms and conditions listed in this Application and in the following Exhibit Space Rules & Regulations, as well as those conditions under which exhibit space in the Omni Shoreham Hotel is leased to STS, are a material part of this contract.

COMPANY INFORMATION

Company Name

Mailing Address

City      State   ZIP Code

Contact Name     Title

Telephone Number    Fax Number   E-mail Address

Authorized Signature

BADGE INFORMATION (Indicate company representatives for your three complimentary exhibitor badges.)

1. Name             E-mail Address
2. Name             E-mail Address
3. Name             E-mail Address

Additional Badges (Additional badges are $100 per person.)

1. Name             E-mail Address
2. Name             E-mail Address

PAYMENT INFORMATION (Exhibit space fee: $5,000.00)

___ Check (made payable to The Society of Thoracic Surgeons) in the amount of $5,000.00

___ Credit card charge in the amount of $5,000.00  □ American Express   □ VISA   □ MasterCard

Credit Card #: ___________________________________________ Exp. _____/_____

Cardholder Name: _______________________________________ Signature: __________________________

Billing Address: ________________________________________________________________________________________________

Please fax completed form with credit card information to (312) 268-7469 or mail with check to The Society of Thoracic Surgeons, PO Box 809308, Chicago, IL 60680-9308. Contact Angel Law at (312) 202-5838 or alaw@sts.org with any questions. Space is assigned on a first-come, first-served basis. The Exhibitor is responsible for 100% of the exhibit fee unless the event is canceled.
1. General
These Rules & Regulations apply to the STS 14th Annual Multidisciplinary CVT Critical Care Conference, to be held at the Omni Shoreham Hotel, October 5-7, 2017 (the “Exhibition”). All matters and questions not covered by these Rules & Regulations are subject to the decision of The Society of Thoracic Surgeons. In the event of any such decision being of general interest, written notice will be given by the Society to exhibitors that may be affected.

The words “the Society” used herein shall mean The Society of Thoracic Surgeons, its officers, directors, agents, and employees acting for the management of the Meeting and Exhibition.

The word “Exhibitor” used herein shall mean a company or organization that has entered into a contract (“Contract”) with the Society for exhibit space at the Exhibition, including its owners, officers, employees, and representatives.

2. Exhibit Space Includes
• 3 complimentary Exhibitor badges
• 1 6’ x 8’ booth
• 1 6’ x 30” table
• 2 chairs
• 1 sign listing company name
• 1 standard electrical hookup
• 1 wastebasket

3. Exhibit Dates and Hours
The exhibit area will be open Thursday, October 5, 2017, from 7:00 a.m. to 4:30 p.m., and Friday, October 6, 2017, from 7:00 a.m. to 4:00 p.m., local time.

4. Setup and Teardown of Exhibits
Space is assigned on a first-come, first-served basis upon the Society’s receipt of payment.

The setup of exhibits will begin at 8:00 a.m. on Wednesday, October 4, 2017, and must be completed by 5:00 p.m. that same day. If an Exhibitor is not set up by that time, the Society reserves the right to reassign the space to another Exhibitor or make other use of the space as it deems necessary, with no refund being made to the original contracting Exhibitor.

Teardown of exhibits will begin at 4:00 p.m. on Friday, October 6, 2017, and must be completed by 8:00 p.m. that same day. If an exhibit is not removed by that time, the Society has the right to remove the exhibit and charge all associated expenses to the Exhibitor. Teardown of exhibits may not begin prior to 4:00 p.m. on Friday, October 6, 2017.

5. Conduct of Exhibitors
Exhibitor representatives shall conduct themselves in an ethical and professional manner at all times and in conformance with the Contract, including these Rules & Regulations. The Society reserves the right to deny the privileges of the Exhibition area to any and all Exhibitors who do not so conduct themselves. Exhibitor badges are personal, not transferable, and must be worn at all times by the individual named thereon.

No Exhibitor may photograph or videotape the booth, products, staff, or visitors of any other Exhibitor without the express permission of the other Exhibitor.

6. Special Effects and Giveaways
• Objectionable audible or visual attention-getting devices or effects and offensive odors from exhibits are prohibited.
• Distribution of samples, printed literature, or any other materials shall not interfere with other Exhibitors’ spaces.
• Distribution of refreshments or other products for consumption on the premises, with the exception of water, will not be permitted unless explicitly approved by the Society.
• Films of purely entertainment character, without educational or informative value, will not be permitted.

7. Booth Construction and Arrangement
• Only informational/educational papers, promotional pieces, or small equipment items that fit on a 6’ x 30” table and/or items that do not exceed 6’ in height will be allowed.
• Exhibitors may not use racks, stands, bins, or other point-of-purchase materials unless they can be confined to the booth.

Continued on Page 6...
• Limited quantities of extra handout materials may be stored underneath the display table.
• Flammable materials are not allowed.
• Simulators are not allowed at any time.
• Animal or human tissue is not allowed at any time.

8. Insurance and Liability

It is the Exhibitor’s sole responsibility to obtain, at its own expense, all applicable licenses and permits and to comply with all federal, state, and local laws, including District of Columbia ordinances, for any activities conducted in association with or as part of the Exhibition.

Exhibitor shall be fully responsible for any claims, liabilities, losses, damages, or expenses relating to or arising from any injury to any person or any loss of or damage to property where such injury, loss, or damage is incident to, arises out of, or is in any way connected with, Exhibitor’s presence at the exhibition site, including but not limited to acts or omissions of its employees, agents, subcontractors, guests, and/or invitees. Exhibitor shall protect, indemnify, hold harmless, and defend the Society, Omni Shoreham Hotel, Omni Hotels Management Corporation, the Official Service Contractor, and their respective officers, directors, agents, and employees, against all such claims, liabilities, losses, damages, and expenses, including reasonable attorneys’ fees and costs of litigation, arising from or in any way connected with Exhibitor’s negligent acts, omissions, and/or participation in the Exhibition and/or presence at the exhibition site, or that of its employees, agents, subcontractors, guests, and/or invitees, provided that the foregoing shall not apply to injury, loss, or damage caused by or resulting from the willful misconduct of the Society, Omni Shoreham Hotel, Omni Hotels Management Corporation, the Official Service Contractor, or their officers, directors, agents, or employees.

During the exhibition, including installation and removal period, Exhibitor, its agents, subcontractors, and representatives shall maintain insurance coverages as set forth in Exhibit A viewable on pages 7-8, incorporated herein and made a part of these Rules and Regulations. The Society of Thoracic Surgeons, Omni Shoreham Hotel, Omni Hotels Management Corporation, and the Official Service Contractor must be named as additional insureds, on a primary and non-contributory basis on all liability insurance, excluding workers’ compensation. Any policy providing liability and/or property insurance must contain an express waiver by the Exhibitor and its insurance company of any right of subrogation as to any claims against the Society, Omni Shoreham Hotel, Omni Hotels Management Corporation, the Official Service Contractor, and their respective officers, directors, agents, or employees. Exhibitor shall submit proof of such insurance to the Society at least 30 days prior to the Exhibition. Exhibitor shall ensure that each independent contractor or subcontractor performing work for Exhibitor during the Exhibition complies with all insurance requirements set forth in Exhibit A, and Exhibitor shall submit proof of the required insurance to the Society at least 30 days prior to the Exhibition.

In the event that any part of the Exhibition Hall is destroyed or damaged so as to prevent the Society from permitting Exhibitor to occupy assigned space during any part or the whole Exhibition period, or in the event occupation of assigned space during any part or the whole of the Exhibition period is prevented by strikes, acts of God, national emergency, or other causes beyond the control of the Society, Exhibitor will be charged for space during the period it was or could have been occupied by Exhibitor, if any, and Exhibitor hereby waives any claim against the Society, its directors, officers, agents, or employees for losses or damages that may arise in consequence of such inability to occupy assigned space, its sole claim against the Society being one for a refund of rent paid for the period it was prevented from using the space.

9. Noise Level

Electrical, mechanical apparatus, movie, or musical/voice sounds must be inaudible to neighboring Exhibitors.

10. Registration and Badges

Exhibitor shall register its personnel in advance. Any additions or changes in registration made during the Exhibition must be certified by an officer of the Exhibitor or by the person in charge of the Exhibitor’s booth space.

Additional Exhibitor badges (beyond the three complimentary badges) may be purchased separately. There will be a charge of $100 each for badge over the complimentary allotment.

11. Americans with Disabilities Act

Exhibitor shall be responsible for making its exhibit accessible to persons with disabilities, as required by the Americans with Disabilities Act, and shall indemnify and hold harmless the Society and its officers, directors, agents, and employees from and against any consequences of Exhibitor’s failure in this regard.
### General Requirement

<table>
<thead>
<tr>
<th>Specific Requirement</th>
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<tbody>
<tr>
<td><strong>GENERAL LIABILITY</strong></td>
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<tr>
<td>Insurance Amount</td>
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<tr>
<td>$1,000,000 Each Occurrence</td>
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<tr>
<td>$2,000,000 General Aggregate</td>
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<tr>
<td>$2,000,000 Products-Completed Operations aggregate</td>
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<tr>
<td>$1,000,000 Personal /Advertising Injury Limit</td>
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<tr>
<td>$100,000 Damage to Rented Premises</td>
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<td>$10,000 Medical Expense (any one person)</td>
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<td>Scope of Coverage</td>
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<td>Premises/Operations, Products and Products/Completed Operations</td>
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<td>Form</td>
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<td>Occurrence (not claims made)</td>
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<td>Per Project Aggregate</td>
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<tr>
<td>Primary and Non-Contributory</td>
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<td>With The Society of Thoracic Surgeons, Arata Expositions, Inc., the Omni Shoreham Hotel and Omni Hotels Management Corporation</td>
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<tr>
<td>Additional Insured</td>
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<td>The Society of Thoracic Surgeons, Arata Expositions, Inc., the Omni Shoreham Hotel and Omni Hotels Management Corporation</td>
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<tr>
<td>Waiver of Subrogation in favor of</td>
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<td>The Society of Thoracic Surgeons, Arata Expositions, Inc., the Omni Shoreham Hotel and Omni Hotels Management Corporation</td>
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<tr>
<td>Evidence of Insurance</td>
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<td>Certificate of Insurance</td>
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<td>Insurer’s A.M. Best’s Rating</td>
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<tr>
<td>A,X or better</td>
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<td><strong>Personal Property, Tools &amp; Mobile Equipment</strong></td>
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<tr>
<td>Limit adequate to cover equipment on site</td>
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### AUTOMOBILE LIABILITY

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**WORKERS COMPENSATION/EMPLOYERS LIABILITY**

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<tr>
<th>Limits</th>
<th>$1,000,000/$1,000,000/$1,000,000</th>
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<td>The Society of Thoracic Surgeons, Arata Expositions, Inc., the Omni Shoreham Hotel and Omni Hotels Management</td>
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<tr>
<td>Alternate Employers Endorsement in favor of</td>
<td>The Society of Thoracic Surgeons</td>
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<tr>
<td>Evidence of Insurance</td>
<td>Certificate of Insurance</td>
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<tr>
<td>Insurer’s A.M. Best’s Rating</td>
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**UMBRELLA LIABILITY**

<table>
<thead>
<tr>
<th>Insurance Amount</th>
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<tr>
<td>Follow form Primary Auto &amp; General Liability</td>
<td></td>
</tr>
<tr>
<td>Evidence of Insurance</td>
<td>Certificate of Insurance, and we reserve the right to request policies or endorsements for our review.</td>
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Coffee Cup Sleeves

- $4,000
- Exclusive Opportunity

Put your company’s message directly in the hands of conference attendees by adding your company logo to coffee cup sleeves. Coffee will be provided during six program breaks: Thursday – 9:45 a.m. – 10:15 a.m. and 4:00 p.m. – 4:30 p.m.; Friday – 10:00 a.m. – 10:30 a.m., 1:00 p.m. – 1:30 p.m., and 3:30 p.m. – 4:00 p.m.; and Saturday – 10:00 a.m. – 10:20 a.m. **Price includes production.**

*Deadline to submit materials to STS: September 5, 2017*

Food & Beverage Napkins

- $3,000
- Exclusive Opportunity

Provide napkins with your company logo for food and beverage stations located in the Exhibit Hall. **Price includes production.**

*Deadline to submit materials to STS: September 5, 2017*

Graphic Boards

- $2,500 each
- 4 available

Standing advertisements—approximately 7’ tall and 3’ wide, single-sided—will be placed in high-traffic areas of the hotel, offering a great opportunity to promote your company’s message. **Price does not include production.**

*Deadline to submit materials to STS: September 5, 2017*

Wall Clings

- $2,500 each
- 2 available

Feature your company’s message on the walls of the stairway that attendees will use as they travel between their hotel rooms and the meeting rooms. Clings are single-sided. **Price does not include production.**

*Deadline to submit materials to STS: September 5, 2017*

Bag Inserts

- $1,000 each
- 3 available

Be among the select few exhibitors to secure this highly visible opportunity! Exhibitor inserts are limited to three (no more than one per company), so your promotion will not be lost among a mass of paper. Conference bags are handed to all attendees at registration. **Price does not include production.**

*Deadline to submit 300 inserts to STS: September 22, 2017*
Other Opportunities

**STS Multidisciplinary CVT Critical Care Conference Registrant List License**
Purchase a 2017 STS Multidisciplinary CVT Critical Care Conference registrant list license to send STSapproved mailings (fee $500). STS does not license, sell, or distribute attendees’ phone/fax numbers or e-mail addresses under any circumstance.

**STS Membership List License**
Purchase an STS membership mailing list license (fee: $1,000), which consists of more than 7,300 names and postal mailing addresses, to send STS-approved mailings. STS does not license, sell, or distribute members’ phone/fax numbers or e-mail addresses under any circumstance. Visit [www.sts.org/membershipmailinglist](http://www.sts.org/membershipmailinglist) for more information.

**Educational Grant Support**
Become a Benefactor of the STS Multidisciplinary CVT Critical Care Conference by providing an unrestricted educational grant. Benefactors will be acknowledged in the Program Book that will be given out at registration and on walk-in slides, signage, and an e-mail communication.

**Satellite Activities**
Offer independent programs to be held in conjunction with the STS Multidisciplinary CVT Critical Care Conference. These programs can include educational activities, receptions, meal functions, investigator meetings, and focus groups. See pages 15-18.

For more information on any of these opportunities, contact Samantha McCarthy, Industry Relations Manager, at smccarthy@sts.org or (312) 202-5869.

**Important Information**

- All artwork, graphics, logos, signage, and promotional messages must be approved by the Society in advance of production.
- Please contact STS for all specifications. Dimensions provided in this catalog are approximate.
- All signed agreements are final. Cancelations are not accepted.
- All reasonable efforts will be made to preserve materials in their original condition; however, STS is not responsible for lost or damaged materials.
- Branding opportunities and satellite activities are available only to exhibitors of the STS Multidisciplinary CVT Cardiovascular and Thoracic Critical Care Conference. For more information on exhibiting at the Conference, contact Angel Law, STS Exhibit Manager, at alaw@sts.org or (312) 202-5838.
- In planning for branding opportunities in this catalog, please consider external guidelines and policies, such as the ACCME’s “Standards for Commercial Support,” PhRMA’s “Code on Interaction with Healthcare Professionals,” and AdvaMed’s “Code of Ethics for Interactions with Healthcare Professionals.”
Dear STS Exhibitor/Sponsor:

Attached you will find the “STS Policy Regarding Industry-Sponsored Satellite Activities” for programs your company may want to offer in conjunction with STS standalone programs. We believe this is an excellent opportunity for you to reach the cardiothoracic surgical team with important education regarding your company’s current products, as well as products in development.

The provision of satellite training and educational activities complies with the AdvaMed Code of Ethics on Interactions with Health Care Professionals, particularly in regard to Section III, “Company-Conducted Product Training and Education.” Specifically, it allows your company to offer “training on the safe and effective use of Medical Technologies” that is expected from industry in an environment that is “conducive to the effective transmission of information,” as described in the updated AdvaMed Code. In addition, the AdvaMed Code affords you the ability to provide modest meals and refreshments during your program, which attendees will appreciate.

We hope you will consider taking advantage of this opportunity. If you have any questions about our satellite activity policy or any related matters, don’t hesitate to contact me directly at smccarthy@sts.org or (312) 202-5869.

Sincerely,

Samantha McCarthy
Industry Relations Manager

cc: Robert A. Wynbrandt, Executive Director & General Counsel
Natalie Boden, Director of Marketing & Communications
Damon K. Marquis, Director of Education & Member Services
STS Policy Regarding Industry-Sponsored Satellite Activities
Held Concurrently with STS Standalone Educational Activities

Overview
The Society of Thoracic Surgeons (STS) recognizes the importance of working collaboratively with industry to meet the needs of the Society’s membership. In an effort to provide more opportunities for STS meeting attendees to benefit from their relationships with industry, the Society has established this STS Policy Regarding Industry-Sponsored Satellite Activities to allow educational and other programs offered by industry—and not developed or sponsored by STS—to be held in conjunction with STS meetings. These programs include educational activities, receptions, meal functions, investigator meetings, and focus groups. This policy document has been developed to facilitate overall meeting planning and for the benefit of STS members. Industry-sponsored activities that take place concurrently with STS standalone educational programs and within 48 hours before or after it and are targeted at STS meeting attendees may not take place without STS written consent requested through submission of the attached Application, including payment of the applicable fee, and must adhere to this policy document.

General Rules

1. Activities designed by or on behalf of industry for attendance by STS standalone educational program attendees are considered satellite activities. There can be no implication in any promotional materials, handouts, or enduring materials that they are planned, sponsored, or endorsed by STS absent special arrangements with, and prior written approval of, STS.

2. Satellite activities developed by industry must be offered during times allotted by STS (see attached Application). STS has sole discretion to schedule all activities at its meetings.

3. Companies applying to offer satellite activities must be Exhibitors or Educational Grant Benefactors for the STS standalone educational activity unless an explicit exception is granted in writing by STS.

4. Promotional materials for satellite activities must receive prior approval from STS (see “Promotion” below).

5. STS does not provide Continuing Medical Education credit for satellite activities. Any satellite activities that offer CME must comply with ACCME requirements. All satellite activities must be in compliance with the AMA’s Ethical Opinion on Gifts to Physicians from Industry.

6. Once STS approves the satellite activity, the provider, commercial supporter(s), event title, content, date, and time as approved by STS for the event may not change without STS approval.

7. Organizers of satellite activities are solely responsible for making all appropriate financial arrangements for their activity (see “Logistics” below).

8. Representatives from STS may attend the satellite activity without cost to audit compliance with this policy.

9. STS is not responsible for multiple companies offering programs at the same time and/or addressing the same topic.

10. STS encourages sponsors of satellite activities to evaluate their offered program and requests that sponsors who conduct such evaluations share their results with the Society.

Logistics

1. Satellite activities will be scheduled by STS.
2. Sponsors of satellite activities may use the full time allotted or a reduced amount of time, **but may not exceed the scheduled time.**

3. Space for satellite activities will be provided on a first-come, first-served basis and will only be assigned after the proposal is accepted by STS.

4. Sessions must be contained within the room assigned.

5. Audiovisual requirements are the responsibility of the sponsor of the satellite activity.

6. Food functions must occur within the assigned event schedule.

7. **All expenses associated with the event, including room rental (if applicable), setup, cleanup, food and beverage, A/V, electrical, telephone, shipping, etc., are the sole responsibility of the sponsor of the satellite activity.**

8. All satellite activities offered to STS meeting attendees must be held in hotels in which STS has contracted meeting space unless a formal waiver is granted by STS.

**Promotion**

1. **All promotional materials must be submitted to Samantha McCarthy at smccarthy@sts.org for STS approval.** STS must review and approve all promotional materials produced in conjunction with the satellite activity (e.g., invitations, announcements, signs, flyers, website information) before their dissemination. STS has the right to reject such promotional materials at its sole discretion.

2. A minimum of **5 business days** are required for STS review of promotional materials.

3. Promotional materials should not be pre-printed prior to approval. It is not the responsibility of STS to cover any costs associated with materials that have been pre-printed and are not approved.

4. Exhibit booth representatives may distribute invitations and other promotional material for the activity at their booth.

5. The STS name, logo, and other intellectual property may not be used on any announcement, including e-mail, sign, publication, or other material, without the prior written approval of STS.

6. All invitations, promotional materials, and other materials related to the activity, print or electronic, must include the following statement: "**This industry-sponsored activity will be held in conjunction with an STS standalone educational activity. It is not part of the official scientific program of STS.**"

7. Satellite activities consisting in whole or in part of educational sessions require the following statement to be clearly and prominently displayed on the syllabus and on all promotional and other related materials, print or electronic: "**Continuing Medical Education (CME) credit for this event is not offered by STS.**"

**Benefits**

1. This satellite activity option offers a limited opportunity to provide a customized event marketed to surgeons and allied health care professionals who are in attendance at the STS meeting.

2. An invitation, created by an approved provider of the satellite activity, will be included in an e-mail sent by STS to standalone activity registrants (subject to “Promotion” above).

3. All providers of approved satellite activities may also purchase [STS mailing list licenses](#). (Providers of non-approved satellite activities may not purchase STS mailing list licenses.)

4. Approved satellite activity providers have the opportunity to post a sign advertising the event in a designated sign area, as well as outside the room in which the event takes place.
5. While STS will undertake reasonable efforts to help avoid scheduling conflicts that might bear on attendance at approved satellite activities, it cannot guarantee nor be responsible for attendance at such events consistent with the provider’s expectations.

Cancelation Policy
1. STS must be notified promptly in writing of the cancelation of any scheduled satellite activity.

2. If written notification of the cancelation of a satellite activity is received by STS at least 21 days prior to a scheduled satellite activity, a 75% refund will be issued.

3. No refunds will be issued for cancelations made any time thereafter.

Violations and Sanctions
STS, at its sole discretion, reserves the right to revoke privileges for future programs of any sponsoring organization, supporting organization, or activity organizer involved in planning a satellite activity that does not comply with the rules and requirements set forth in this policy document.

Application Process
Please be thorough and detailed when completing the attached Application. Once a completed application is submitted, the proposal will be referred to relevant staff for review. The requesting organization will be contacted in writing regarding the outcome of the application.

Information on approved satellite activities will be forwarded to the hotel. The hotel staff will confirm meeting space assignments with the primary contact noted on the application and will convey this information to STS. After notification of meeting room assignment, the sponsor of the satellite activity will work directly with the hotel to manage all meeting needs.

In the event that final approval is not granted, STS will not be responsible for canceling any arrangements that may have been made by the applicant in connection with the proposed event. In addition, STS will not be responsible for any costs incurred for the proposed event.

Requests for industry-sponsored satellite activities should be submitted to:

Samantha McCarthy
Industry Relations Manager
The Society of Thoracic Surgeons
633 N. Saint Clair St., Floor 23
Chicago, IL  60611
(312) 202-5869
(312) 202-5801 (fax)
smccarthy@sts.org
Industry-Sponsored Satellite Activities
Held Concurrently with STS Standalone Educational Activities

APPLICATION

STS Multidisciplinary CVT Critical Care Conference – October 5-7, 2017 • Washington, DC

Submission Deadline – September 5, 2017

Exhibiting/Sponsoring Company: _________________________ Marketing or Medical Education Communication Co. Name:

Primary Contact: _________________________________ _________________________________

Mailing Address: _________________________________ Primary Contact: _________________________________

_________________________________________________ Mailing Address: _________________________________


Phone: ___________________________________________ Phone: ___________________________________________

Fax: _____________________________________________ Fax: _____________________________________________

E-mail: ___________________________________________ E-mail: ___________________________________________

LOCATION:
The Omni Shoreham Hotel will be used exclusively for satellite activities.

If food will be served, please check appropriate selections:

☐ Buffet Dinner ☐ Plated Dinner ☐ Reception

REQUESTED DATE AND TIME: Please check one:*

_____ Thursday, October 5 6:30 p.m. – 10:00 p.m.

_____ Friday, October 6 7:30 p.m. – 10:00 p.m.

*STS reserves the right to modify times available for satellite activities and will notify exhibitors if this occurs.

FOR STS USE ONLY:

APPROVED: ______________________ DATE: ___________ HOTEL: ______________________ ROOM: ___________

Satellite Activities
FEES:
The fee structure for industry-sponsored satellite activities is as follows: (Circle Price)

<table>
<thead>
<tr>
<th>Satellite Activity Category</th>
<th>Projected Attendance</th>
<th>DINNER/RECEPTION</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>0 – 50</td>
<td>$5,000</td>
</tr>
<tr>
<td>2</td>
<td>51+</td>
<td>$8,000</td>
</tr>
</tbody>
</table>

The fee must be submitted along with the completed Application. This fee will not be deposited until after the satellite activity is approved. After that time, the relevant Cancelation Policy applies. STS is not responsible for any costs incurred in association with any aspect of the satellite activity.

PAYMENT METHOD: Application will not be processed without payment.

☐ Check payable to: The Society of Thoracic Surgeons Tax ID 36 302 2713
Credit Card: ☐ MasterCard ☐ American Express ☐ VISA Amount to be Charged: $______________
Name on Credit Card: _________________________________________________________________
Credit Card Number: _____________________________________________ Exp. Date: ____________
Credit Card Billing Address: __________________________________________________________
City: ____________________________________ State: _______________ Zip Code: ______________

I authorize STS to charge the total fee indicated on this form to the above-referenced credit card.

Signature: __________________________________________________________________________
Print Name: __________________________________________________________________________

Promotional listing in meeting materials
For approved Applications received on or before September 5, 2017, STS will include a promotional listing in its Standalone Educational Activities meeting materials if requested below:

_____ Yes, list approved activity.
_____ No, do not list approved activity.
Industry-Sponsored Satellite Activities

Application will not be processed if the below requested information is not complete

1. Title of the event: __________________________________________________________________________
   (Indicate the exact title of the satellite activity.) Title cannot be changed once submitted.

2. Rationale for holding the satellite activity: (30 words or more required)
   __________________________________________________________________________________________
   __________________________________________________________________________________________

3. Brief narrative description of the proposed satellite activity: (35 words or more required)
   __________________________________________________________________________________________
   __________________________________________________________________________________________
   __________________________________________________________________________________________

4. Program agenda: (Outline with times required)
   __________________________________________________________________________________________
   __________________________________________________________________________________________
   __________________________________________________________________________________________
   __________________________________________________________________________________________

5. Names of confirmed speakers (if any):
   __________________________________________________________________________________________
   __________________________________________________________________________________________
   __________________________________________________________________________________________

6. Contact name(s) of all commercial supporters of the satellite activity:
   Contact name: ____________________________________________________________
   Company name: ____________________________________________________________
   Mailing address: ____________________________________________________________
   Phone: _______________________________________________________________________
   E-mail: _______________________________________________________________________

   Contact name: ____________________________________________________________
   Company name: ____________________________________________________________
   Mailing address: ____________________________________________________________
   Phone: _______________________________________________________________________
   E-mail: _______________________________________________________________________

7. Submit copies of contracts/letters of agreement between commercial supporters and satellite activity organizers. THIS INFORMATION MUST BE ATTACHED.

   APPLICATION WILL NOT BE PROCESSED IF THE ABOVE REQUESTED INFORMATION IS NOT COMPLETE.
By signing this Application, I represent and warrant that I am authorized to act on behalf of the funding organization and meeting planning organization (if applicable) specified below with respect to this Application; that all information provided on this Application is complete and accurate to the best of my knowledge; that I have read the accompanying “Policy Regarding Industry-Sponsored Satellite Activities Held Concurrently with STS Standalone Educational Activities;” and that if this Application is approved by STS, the satellite activity described herein will be conducted in accordance with the terms of said Policy and the entity specified below will comply with all associated requirements.

**FUNDING ORGANIZATION**

_______________________________________
NAME

_______________________________________
DULY AUTHORIZED REPRESENTATIVE NAME

_______________________________________
DULY AUTHORIZED REPRESENTATIVE SIGNATURE

_______________________________________
DATE

**MEETING PLANNING ORGANIZATION (IF APPLICABLE)**

_______________________________________
NAME

_______________________________________
DULY AUTHORIZED REPRESENTATIVE NAME

_______________________________________
DULY AUTHORIZED REPRESENTATIVE SIGNATURE

_______________________________________
DATE

Applications should be returned to:
Samantha McCarthy, Industry Relations Manager
The Society of Thoracic Surgeons
633 N. Saint Clair St., Floor 23
Chicago, IL  60611
(312) 202-5869
(312) 202-5801 (fax)
smccarthy@sts.org

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