

CALL FOR EXHIBITORS



Tenth Annual Diabetes Regional Conference: *Evolving Guidelines for Management*

Saturday, November 8, 2014
UT Conference Center
Knoxville, Tennessee

Directly-Sponsored by
UT Graduate School of Medicine and UT Department of Medicine

Topics for the 2014 Conference

At the conclusion of this program, the participant should be able to

1. Formulate a plan to address cost issues with diabetes management
2. Employ appropriate treatment regimens for hypertension and dyslipidemia in patients with diabetes
3. Discuss literature surrounding recent guidelines for management of dyslipidemia and hypertension
4. Recognize, evaluate and treat depression in people with diabetes
5. Appraise and apply new treatments for diabetes

Come join us for this quality CME activity in Knoxville.

FEATURES

Primarily attended by healthcare professionals practicing in Family Medicine and Internal Medicine

Exhibit booths will be positioned in an area outside and separate from the conference general session area.

Due to space constraints the number of vendors will be limited to the first 16 respondents.

Setup time will be confirmed closer to the conference date and is dependent upon the availability of the UT Conference Center on Friday, November 7.

Your company name will be included and announced in the list of exhibitors and/or supporters.

REGISTRATION FORM

Tenth Annual Regional Diabetes Conference

Saturday, November 8, 2014

UT Conference Center

Knoxville, Tennessee

- | | |
|--|--------------|
| <input type="checkbox"/> Exhibitor Booth (includes one representative) | \$700 |
| <input type="checkbox"/> Additional Booth (includes one representative) | \$500 |
| <input type="checkbox"/> Additional Exhibitors _____ @ \$50 each | |

TOTAL \$ _____

Contact Name: _____ Title: _____
 Company: _____
 Address: _____
 City: _____ Province/State: _____ Postal Code/Zip: _____
 Phone: _____ Fax: _____
 E-Mail Address: _____

Yes, I require electricity at my booth.

PAYMENT METHODS:

- Check Enclosed (payable to the **University of Tennessee**)
- Check in Process (name of company sending check _____)
- Credit Card:
 Mastercard / Visa / American Express
- Card #: _____ Expiration Date: _____
 Cardholder's Name: _____ Signature Code: _____
 Signature: _____ Date: _____

SPACE IS NOT RESERVED UNTIL FORM IS RECEIVED BY UT

CANCELLATION

_____ **[Initial Here]** In the unlikely event that you should decide to cancel your sponsorship of this activity, the following cancellation charges will apply:

30+ days prior to activity	100% refund of payment
30-15 days prior to activity	50% refund of payment
14 days prior to arrival	0% refund of payment

FAX OR EMAIL TO: JENNIFER RUSSOMANNO (865) 305-6823 or JRussomanno@utmck.edu

THE UNIVERSITY OF TENNESSEE
Continuing Education and Professional Development



Date: April 30, 2014

To: Prospective Exhibitors

Re: Exhibiting at the Diabetes Conference

UT Graduate School of Medicine

1924 Alcoa Highway, D-116

Knoxville, TN 37920-6999

Tel: (865) 305-9190

Fax: (865) 305-6823

The University of Tennessee Graduate School of Medicine and the UT Department of Medicine is presenting an upcoming continuing medical education activity, **Tenth Annual Diabetes Regional Conference: *Evolving Guidelines for Treatment***. The conference will be held **November 8, 2014** at the **UT Conference Center** in **Knoxville, Tennessee**.

You are invited to exhibit at this event. Each booth is \$700 (made payable "The University of Tennessee Graduate School of Medicine"), which includes the exhibit booth and one company representative. Each additional representative will be \$50 each. **We anticipate between 100-150 participants based on conference history.**

The exhibit space is staged outside the conference session room. Many companies are being asked to attend. Space is limited.

According to the 2010 data from the Center for Disease Control (CDC) Behavioral Risk Factor Surveillance System (BRFSS), 11.3% of Tennesseans have been diagnosed with diabetes and 5.2% with pre-diabetes. This is a significantly higher rate compared to the remainder of the United States population with 8.7% diagnosed with diabetes and 1.2% with pre-diabetes. This same source indicates that 85% of the people with diabetes in Tennessee are overweight or obese. Primary care providers are at the forefront of diabetes diagnosis and management. With the increasing prevalence of diabetes in the United States and Tennessee, it is crucial to continue to provide educational updates to primary care providers on diabetes and related disease diagnosis and management. With the incidence of weight problems in people with diabetes, this topic needs to be addressed along with other management issues.

The American Diabetes Association updates the diabetes mellitus standards of care on an annual basis. In 2012, the American Diabetes Association and the European Association for the Study of Diabetes published "Management of Hyperglycemia in Type 2 Diabetes: A Patient Centered Approach". These guidelines present differing opinions in regards to the selection of medications in patients with type 2 diabetes mellitus, which can be confusing for a primary care practitioner.

Diabetes is usually first confronted by primary care providers. The target audience of the *Diabetes Regional Conference: Evolving Guidelines for Treatment* is primary care providers who treat diabetes and related diseases frequently.

Using case-based examples, the *Diabetes Regional Conference: Evolving Guidelines for Treatment* will provide direct contact with individuals focusing on these health related issues and subsequently offer guidance on treatment outcomes for patients in the area of diabetes mellitus and its related diseases.

As the accredited provider (ACCME), The University of Tennessee appreciates your consideration of this request for exhibit space. For reporting purposes, our federal tax ID number is 62-6001636.

Sincerely,

Jennifer Russomanno, CMP
CME Coordinator

Tenth Annual Diabetes Regional Conference:

Evolving Guidelines for Diabetes Management

November 8, 2014

UT Conference Center, Knoxville, TN

7:00 - 7:30 a.m.	Registration and Continental Breakfast
7:30 – 7:45 a.m.	Welcome <i>Donald Keeble, M.D.</i>
7:45 - 8:45 a.m.	Applying New Guidelines for Hypertension Management <i>Maricarmen Malagon-Rogers, M.D.</i>
8:45 - 9:45 a.m.	Applying New Guidelines for Lipid Management <i>Jim Yates, M.D.</i>
9:45 - 10:15 a.m.	Break and Visit Exhibits
10:15 - 11:15 a.m.	Reality Check: How to Afford Diabetes Management <i>Lyn Goan, MSW</i>
11:15 a.m. - 12:15 p.m.	Dealing with Depression <i>Ed Rogers, Ph.D. & John Eaddy, M.D.</i>
12:15 - 1:15 p.m.	Lunch (<i>provided</i>)
1:15 - 2:15 p.m.	What's New in Blood Glucose Management <i>Amit Vora, M.D.</i>
2:15 - 2:30 p.m.	Break (<i>Last chance to visit Exhibits</i>)
2:30 - 4:00 p.m.	Panel Discussion and Audience Q&A <i>Faculty</i>
4:00 - 4:15 p.m.	Closing Remarks & Adjourn

Request for Taxpayer Identification Number and Certification

**Give Form to the
 requester. Do not
 send to the IRS.**

Print or type See Specific Instructions on page 2.	Name (as shown on your income tax return) University of Tennessee	
	Business name/disregarded entity name, if different from above	
	Check appropriate box for federal tax classification: <input type="checkbox"/> Individual/sole proprietor <input type="checkbox"/> C Corporation <input type="checkbox"/> S Corporation <input type="checkbox"/> Partnership <input type="checkbox"/> Trust/estate <input type="checkbox"/> Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=partnership) ▶ _____ <input checked="" type="checkbox"/> Other (see instructions) ▶ University	Exemptions (see instructions): Exempt payee code (if any) _____ Exemption from FATCA reporting code (if any) _____
	Address (number, street, and apt. or suite no.) 301 Andy Holt Tower City, state, and ZIP code Knoxville, TN 37996	Requester's name and address (optional) UT Graduate School of Medicine Continuing Education 1924 Alcoa Highway, Box D116 Knoxville, TN 37920
List account number(s) here (optional)		

Part I Taxpayer Identification Number (TIN)

Enter your TIN in the appropriate box. The TIN provided must match the name given on the "Name" line to avoid backup withholding. For individuals, this is your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the Part I instructions on page 3. For other entities, it is your employer identification number (EIN). If you do not have a number, see *How to get a TIN* on page 3.

Social security number								

Note. If the account is in more than one name, see the chart on page 4 for guidelines on whose number to enter.

Employer identification number								
6	2	-	6	0	0	1	6	3

Part II Certification

Under penalties of perjury, I certify that:

1. The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me), and
2. I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding, and
3. I am a U.S. citizen or other U.S. person (defined below), and
4. The FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting is correct.

Certification instructions. You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and generally, payments other than interest and dividends, you are not required to sign the certification, but you must provide your correct TIN. See the instructions on page 3.

Sign Here	Signature of U.S. person ▶	Date ▶ 6/23/14
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General Instructions

Section references are to the Internal Revenue Code unless otherwise noted.

Future developments. The IRS has created a page on www.irs.gov/w9 for information about Form W-9, at www.irs.gov/w9. Information about any future developments affecting Form W-9 (such as legislation enacted after we release it) will be posted on that page.

Purpose of Form

A person who is required to file an information return with the IRS must obtain your correct taxpayer identification number (TIN) to report, for example, income paid to you, payments made to you in settlement of payment card and third party network transactions, real estate transactions, mortgage interest you paid, acquisition or abandonment of secured property, cancellation of debt, or contributions you made to an IRA.

Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN to the person requesting it (the requester) and, when applicable, to:

1. Certify that the TIN you are giving is correct (or you are waiting for a number to be issued),
2. Certify that you are not subject to backup withholding, or
3. Claim exemption from backup withholding if you are a U.S. exempt payee. If applicable, you are also certifying that as a U.S. person, your allocable share of any partnership income from a U.S. trade or business is not subject to the

withholding tax on foreign partners' share of effectively connected income, and

4. Certify that FATCA code(s) entered on this form (if any) indicating that you are exempt from the FATCA reporting, is correct.

Note. If you are a U.S. person and a requester gives you a form other than Form W-9 to request your TIN, you must use the requester's form if it is substantially similar to this Form W-9.

Definition of a U.S. person. For federal tax purposes, you are considered a U.S. person if you are:

- An individual who is a U.S. citizen or U.S. resident alien,
- A partnership, corporation, company, or association created or organized in the United States or under the laws of the United States,
- An estate (other than a foreign estate), or
- A domestic trust (as defined in Regulations section 301.7701-7).

Special rules for partnerships. Partnerships that conduct a trade or business in the United States are generally required to pay a withholding tax under section 1446 on any foreign partners' share of effectively connected taxable income from such business. Further, in certain cases where a Form W-9 has not been received, the rules under section 1446 require a partnership to presume that a partner is a foreign person, and pay the section 1446 withholding tax. Therefore, if you are a U.S. person that is a partner in a partnership conducting a trade or business in the United States, provide Form W-9 to the partnership to establish your U.S. status and avoid section 1446 withholding on your share of partnership income.