

CALL FOR EXHIBITORS



University of Tennessee Cancer Institute The Big 4 Conference: Education for Everyone: *Research, Prevention, Screening and Outcomes* October 14-15, 2016

Holiday Inn World's Fair Park, Knoxville, Tennessee

Jointly-Sponsored by UTMC Cancer Institute and UT Graduate School of Medicine

Topics for the 2016 Conference

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

- Formulate new therapeutic options for the treatment of breast, lung, head and neck malignancies
- Evaluate current issues and trends in the breast, lung, head and neck malignancies
- Describe recent updates and current controversies in the multidisciplinary management of patients with breast, lung, head and neck malignancies
- Identify creative strategies for collaboration with primary care professionals on overall coordination of patients' cancer care

Primarily attended by healthcare professionals practicing in

- Dentists
- Family Medicine
- Internal Medicine
- Medical Oncology
- Oral Surgery
- Otolaryngology
- Pathology
- Pharmacy
- Pulmonary Medicine
- Radiology
- Surgery

Exhibit booths will be positioned in an area directly outside the conference general session meeting room depending on exhibit level. Please see the attached diagram. **Due to space constraints the number of vendors will be limited.**

Participants will have access to the exhibit area throughout the duration of the conference on Friday (all day) and Saturday (half day).

Two levels of support are offered for this conference, which are outlined on the subsequent page.

Setup time will be confirmed closer to the conference date and is dependent upon the availability of the Holiday Inn on Thursday, October 13.

UTMC Cancer Institute Big 4 Conference
Exhibit Opportunities
October 14-15, 2016

Gold- \$1,500 (max 13 exhibitors)

1. One 6-foot exhibit booth on Friday, October 14, 2016 **ONLY**
2. Booth will be located along the back hallway of the general session and meal rooms (see diagram)
3. **One** complimentary registration which includes access to all educational sessions and meals
4. Recognition at the conference as gold level supporter

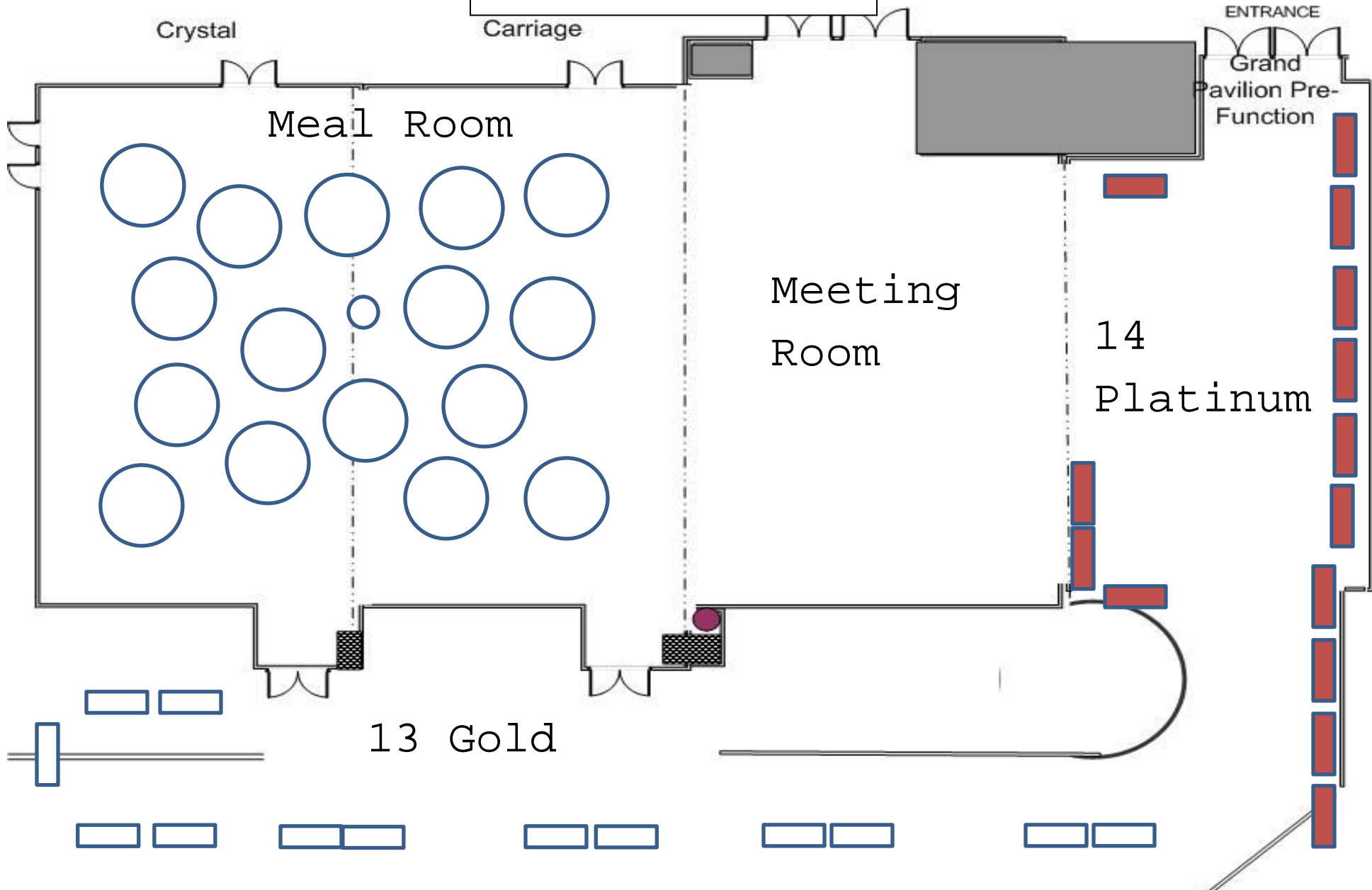
Platinum- \$3,000 (max 14 sponsors)

1. One 6-foot exhibit booth on **both** Friday, October 14 and Saturday, October 15, 2016
2. Booth will be located in the foyer directly in front of general session entry doors (see diagram)
3. **Two** complimentary registrations which includes access to all educational sessions and meals
4. Recognition at the conference as platinum level supporter

Holiday Inn World's Fair

UT Big 4 Cancer
Conference

Ballroom W/
Pre-Function



THE UNIVERSITY of
TENNESSEE
Graduate School of Medicine

REGISTRATION FORM
UTMC Cancer Institute Big 4 Conference
October 14-15, 2016
Holiday Inn World's Fair Park
Knoxville, Tennessee

- Gold Exhibitor (includes **one** representative, Friday only) **\$1,500**
 Platinum Exhibitor (includes **two** representatives, both days) **\$3,000**

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 **UT Medical Center, and mail to: Jennifer Russomanno, UT Graduate School of Medicine, 1924 Alcoa Highway, D116, Knoxville, TN 37920**)

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 MEDICAL CENTER

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: March 21, 2016
To: Prospective Exhibitors
Re: Exhibiting at the UTMC Cancer Institute Conference

UT Graduate School of Medicine
1924 Alcoa Highway, D-116
Knoxville, TN 37920-6999
Tel: (865) 305-9190
Fax: (865) 305-6823

The UTMC Cancer Institute and the University of Tennessee Graduate School of Medicine are presenting an upcoming continuing medical education activity, **UTMC Cancer Institute 2016 Big 4 Conference**. The conference will be held **Friday and Saturday, October 14-15, 2016** at the **Holiday Inn World's Fair Park in Knoxville, Tennessee**.

As the accredited provider (ACCME), The University of Tennessee, Graduate School of Medicine appreciates your consideration of this request for exhibit space. This course is designed for physicians practicing in primary care, medical oncology, oral surgery, pulmonary medicine, radiology and surgery. Physician assistants, pharmacists, nurse practitioners, nurses and allied healthcare professionals are also welcome to attend.

You are invited to exhibit at this event. Two levels of sponsorship range from \$1,500 to \$3,000 (made payable "UT Medical Center"). Sponsorship levels are outlined on page 2 of this call for exhibitor package.

Participants will have access to the exhibit area throughout the duration of the conference on Friday (all day) and Saturday (half day). Based on previous conference history, we are anticipating 100 attendees for the activity.

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

The burden of cancer on our population is expected to rise sharply over the next 20 years. Overall cancer incidence is expected to increase by 45% between 2010 and 2030, and cancer will become the nation's leading cause of death largely due to older adults and minorities. By 2030, approximately 70% of all cancers will be diagnosed in older adults, and 28% of all cancers will be diagnosed in minorities. Cancer is an enormous health burden in the United States, touching every region and socioeconomic level. Today, cancer accounts for one in every eight deaths worldwide.

For reporting purposes, federal tax ID number for the UT Medical Center is 31-1626179 and the mailing address is: UT Graduate School of Medicine, CEPD Department, 1924 Alcoa Highway, D116, Knoxville, TN 37920. The contact person for exhibit fees is Jennifer Russomanno at jussomanno@utmck.edu and (865) 305-9190.

Sincerely,

A handwritten signature in black ink, appearing to read 'JRussomanno'.

Jennifer Russomanno, CMP
CME Coordinator

**UT Medical Center Cancer Institute Big 4 Conference
Education for Everyone: Research, Prevention, Screening, Outcomes
October 14-15, 2016 Holiday Inn World's Fair Park, Knoxville, TN**

Friday October 14, 2016

7:15 – 7:50am	Registration & Breakfast
7:50 – 8:05am	Welcome & Pre-Conference Test – John L. Bell, MD
8:05 – 9:05am	“Screening for Head & Neck Cancer, Risk Reduction Strategies & Management of Early Stage Oral Cancer” – Eric Carlson, DMD, MD
9:05 – 10:05am	“Multidisciplinary Management of Laryngeal Carcinoma” – David Gallegos, MD
10:05 – 10:30am	Break & Visit Exhibits
10:30 – 11:30am	“Value Based Multidisciplinary Head & Neck Cancer Care” – Randal S. Weber, MD
11:30 – 12:15pm	Visit Exhibits & Lunch (provided)
12:15 – 1:15pm	“Pitfalls & Rewards of Establishing a Lung Cancer Screening Program” – J. Francis Turner, Jr., MD
1:15 – 2:15pm	“What’s New in Lung Cancer Management” Molecularly Targeted Agents & Immunotherapies – Timothy Yap, MBBS, PhD Radiation Therapy – Joseph Kelley, MD Surgery - Thomas Gaines, MD
2:15 – 2:30pm	Break & Visit Exhibits
2:30 – 3:30pm	“Genetics of Cancer 101 – Which Cancers Can We Test for Today (How, When, Why, Where)” – Courtney Cook, MS, Genetic Counselor
3:30 – 4:30pm	“The Marriage of Genetics & Precision Medicine” Tissue Biorepository – Lisa Duncan, MD Novel Targeted Therapies – Timothy Yap, MBBS, PhD
4:30 – 5:30pm	Case Presentations/Tumor Board - Head & Neck, Lung: Eric Carlson, DMD, MD; Courtney Cook, MS; Lisa Duncan, MD; Thomas Gaines, MD; David Gallegos, MD; Joseph Kelley, MD, PhD; J. Francis Turner, MD; Randal Weber, MD; Timothy Yap, MBBS, PhD

Saturday October 15, 2016

7:30 – 8:00am	Breakfast
8:00 – 8:30am	Breast Cancer Case Presentations – Jillian Lloyd, MD
8:30 – 9:00am	Carcinomatosis & Heated Intraperitoneal Chemotherapy (HIPEC) Case Presentations & Treatment Options – James McLoughlin, MD
9:00 – 10:00am	“Palliative Care in Cancer Comes of Age: Not Just for End of Life” – Joseph Simpson, MD & Teresa Palmer, APN-BC, ACHPN-BC
10:00 – 10:15am	Break
10:15 – 11:15am	“Economics of Cancer Care in 2016 & the Future” – Edward Partridge, MD
11:15 – 11:30am	Closing Remarks & Post Conference Test

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.	1 Name (as shown on your income tax return). Name is required on this line; do not leave this line blank. University Health System, Inc.		
	2 Business name/disregarded entity name, if different from above University of Tennessee Medical Center		
	3 Check appropriate box for federal tax classification; check only one of the following seven boxes: <input type="checkbox"/> Individual/sole proprietor or single-member LLC <input type="checkbox"/> Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=partnership) ▶ _____ Note. For a single-member LLC that is disregarded, do not check LLC; check the appropriate box in the line above for the tax classification of the single-member owner. <input checked="" type="checkbox"/> Other (see instructions) ▶ 501(c)(3) under 501(a)		4 Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3): Exempt payee code (if any) 1 Exemption from FATCA reporting code (if any) A <small>(Applies to accounts maintained outside the U.S.)</small>
	5 Address (number, street, and apt. or suite no.) 1924 Alcoa Highway		Requester's name and address (optional)
	6 City, state, and ZIP code Knoxville, TN 37920		
	7 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 line 1 to avoid backup withholding. For individuals, this is generally 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.

Note. If the account is in more than one name, see the instructions for line 1 and the chart on page 4 for guidelines on whose number to enter.

Social security number									
				-			-		
or									
Employer identification number									
3	1	-	1	6	2	6	1	7	9

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 ▶ *Susan Reed*

Date ▶ *06/01/15*

General Instructions

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

Future developments. Information about developments affecting Form W-9 (such as legislation enacted after we release it) is at www.irs.gov/fw9.

Purpose of Form

An individual or entity (Form W-9 requester) who is required to file an information return with the IRS must obtain your correct taxpayer identification number (TIN) which may be your social security number (SSN), individual taxpayer identification number (ITIN), adoption taxpayer identification number (ATIN), or employer identification number (EIN), to report on an information return the amount paid to you, or other amount reportable on an information return. Examples of information returns include, but are not limited to, the following:

- Form 1099-INT (interest earned or paid)
- Form 1099-DIV (dividends, including those from stocks or mutual funds)
- Form 1099-MISC (various types of income, prizes, awards, or gross proceeds)
- Form 1099-B (stock or mutual fund sales and certain other transactions by brokers)
- Form 1099-S (proceeds from real estate transactions)
- Form 1099-K (merchant card and third party network transactions)

- Form 1098 (home mortgage interest), 1098-E (student loan interest), 1098-T (tuition)
- Form 1099-C (canceled debt)
- Form 1099-A (acquisition or abandonment of secured property)

Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN.

If you do not return Form W-9 to the requester with a TIN, you might be subject to backup withholding. See What is backup withholding? on page 2.

By signing the filled-out form, you:

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. See *What is FATCA reporting?* on page 2 for further information.