#114

COMPLETE

Collector: Web Link 1 (Web Link)

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Page 2: Part 1

Q1

Title of activity

Radiocontrast Hypersensitivity - Recommendations from the CAR/CSACI Guidelines

Q2

Date of activity

Friday October 17, 2025

Q3 Speaker

What is your role in the CPD activity? (Select all that apply)

Q4 Combination - Community and Academic

What's your practice type?

Please indicate:

Q5 I HAVE a relationship with a for-profit and/or a not-for-

profit organization to disclose. If so, please indicate below (questions 5 to 10) the organization(s) with which you have/had a relationship over the previous two years and briefly describe the nature of that relationship.

Q6

Any direct financial payments including receipt of honoraria

Name of FOR PROFIT and/or NOT-for-profit organization(s)

(separate with commas)

Institute of the McGill University Health Centre (RI-

MUHC), University of Melbourne, McGill University

Montreal General Hospital Foundation, Research

Q7 Membership on advisory boards or speakers' bureaus	Respondent skipped this question
Q8 Funded grants or clinical trials	Respondent skipped this question
Q9 Patents on a drug, product or device	Respondent skipped this question
Q10 All other investments or relationships that could be seen by a reasonable, well-informed participant as having the potential to influence the content of the educational activity	Respondent skipped this question
Page 3: Part 2: To be completed by presenters only Q11 I intend to use trade names during my presentation.Note: Only generic names should be used whenever possible. If trade names are used, they should be accompanied by the generic name.	Yes (please list - Only generic names should be used whenever possible. If trade names are used, they should be accompanied by the generic name): trade names - omnipaque, visipaque, isovue
Q12 I intend to make therapeutic recommendations for medications that have not received regulatory approval (i.e. "off-label" use of medication). Note: You must declare all off-label use to the audience during your presentation.	No
Q13 If you answered "Yes" to the previous question, are the medications recommended manufactured by companies you have received funding from?	Respondent skipped this question
Q14 I acknowledge that the National Standard requires that any description of therapeutic options utilize generic names (or both generic and trade names) and not reflect exclusivity and branding.	Yes

Page 4: Part 3 (Anonymous & Optional): Equity, Diversity and Inclusion (EDI)

CSACI - CONFLICT DISCLOSURE FORM

Q15	Yes
I confirm that I've completed the EDI Survey linked above	
Page 5: PART 4: Acknowledgement and signature (for a	all)
Q16	
First Name:	
Ana Maria	
Q17	
Last Name:	
Copaescu	
Q18	She/Her
Gender Pronouns - How would you like us to address you?	
Q19	I confirm that the above information is accurate and
Please review and check the items below.	complete.
	I understand that this information may be publicly available