

Heart
Rhythm
SocietySM

Code of Ethics & Professionalism

Revised September 2025

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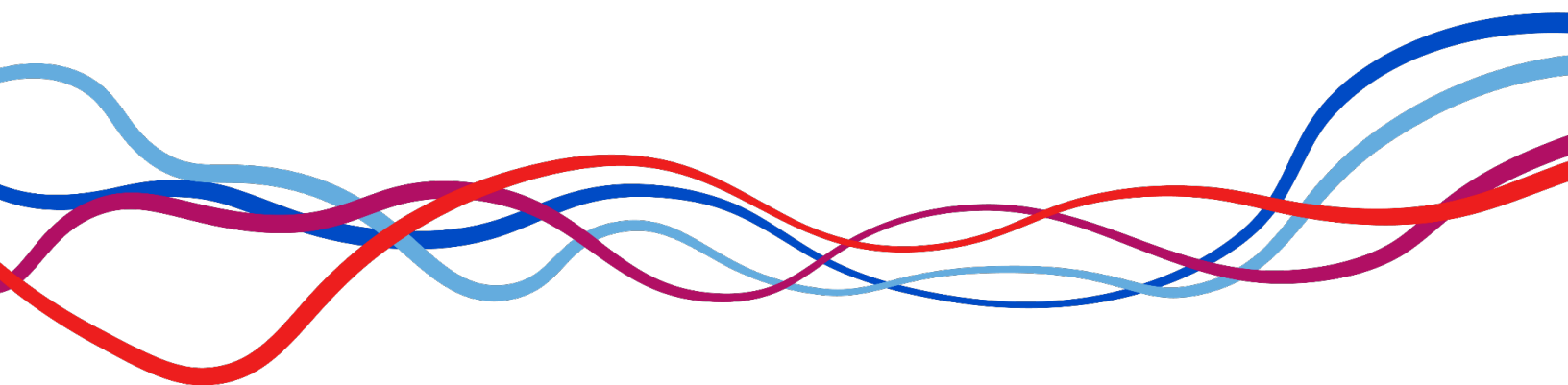
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Preamble

The Heart Rhythm Society (HRS or Society) is committed to transparency, accountability and to pursuing the highest standards of excellence in its activities.

HRS's mission is to improve the care of patients by promoting research, education and optimal health care policies and standards. HRS provides clinical guidance, recommendations, education and advocacy for research that drives excellence in the delivery of electrophysiology care. HRS members share a common passion for accomplishing our vision to end death and suffering due to heart rhythm disorders. HRS believes that our diverse backgrounds, experiences and interests are assets that will allow us to reach that goal. We are committed to providing an inclusive environment in all our activities, where all members feel valued, respected, and welcome. We strive to have organizational leaders who represent all aspects of our differences and similarities and who promote the values of diversity, equity, and inclusion that are essential to our success.

The Code of Ethics and Professionalism provides standards of ethical and professional conduct to HRS members, appointees¹, and staff. The Code of Ethics and Professionalism may be revised or amended to reflect the changing landscape.

¹For the purposes of this document, the term “appointee” refers to any individual who serves the Society, whether appointed or elected. This includes officers and board members, chairs and vice chairs, committee and council members, task force and working group members, writing group members, Editors-in-Chief, editors, editorial board members, invited speakers at official HRS scientific and educational meetings, and others in an invited role.

Our Values and Principles

This Code is based on shared values and principles including:

- Honesty
- Integrity
- Respect
- Inclusivity
- Equity
- Fairness
- Diversity
- Transparency/Disclosure
- Professional excellence and ongoing unbiased learning
- Community and societal responsibilities
- Balance between the needs of patients, the commitment to evidence-based clinical care and the responsibilities to HRS and the global community

Commitments of our Members

Commitment to Professionalism

Respect for Others

- Treat patients, colleagues and team members with respect and dignity
- Value basic human rights
- Do not discriminate on the basis of sex, gender identity, race, ethnicity, religion, national identity, or disability
- Do not engage in any form of discrimination, harassment or retaliation

Professional Integrity and Competence

- Practice career competently, safely and with integrity
- Pursue lifelong learning strategies to develop and advance professional knowledge, skills and competencies
- Demonstrate accountability for professional activities
- Accept the importance of independent, impartial and periodic peer review

Professional Excellence

- Advance the heart rhythm care field through clinical practice, research, education, quality improvement, innovation, advocacy, mentorship and leadership
- Participate in the establishment and maintenance of professional standards
- Contribute in HRS activities to promote volunteer and leadership development and achieve the highest standards of professionalism

Commitment to the Global Community

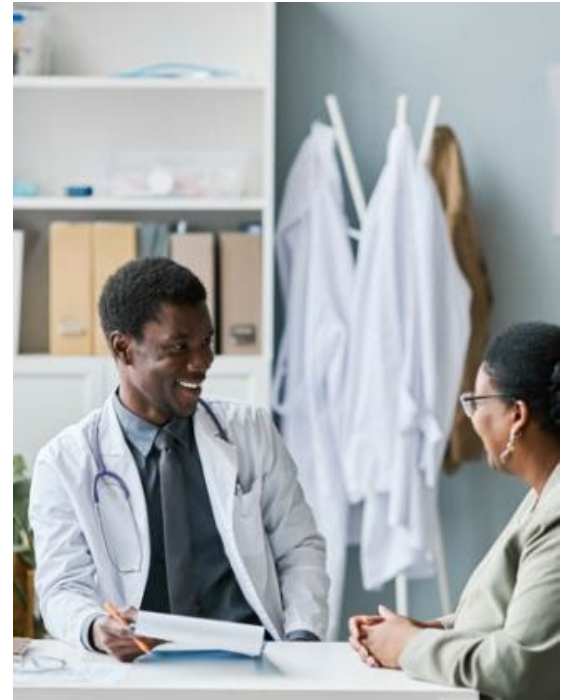
- Promote collaboration and partnership in the worldwide cardiovascular community and across all professional disciplines
- Support access to quality health care throughout the world
- Encourage participation in global activities

Self-Care and Peer Support

- Strive for personal health and wellness and a healthy balance in personal and professional life
- Support colleagues to achieve a healthy balance in their personal and professional lives

Commitment to the Patient

- Make the well-being of the patient the top priority
- Treat the patient with compassion, dignity and respect
- Offer patients the best possible care based on available, evidence-based treatment options
- Engage in shared decision making with the patient
- Do not exploit the patient for personal benefit
- Make ethical decisions concerning patient care such as respecting patient preference based on cultural and religious values, recognizing patients' rights for self-determination
- Recognize and explain potential benefits and risks associated with any medical intervention and with not performing that treatment
- Act to optimize positive outcomes and minimize harm
- Disclose any potential conflicts of interest in the patient/health care provider relationship
- Acknowledge importance of no undue, outside interference
- Maintain confidentiality consistent with all policies of institutions where patient care is delivered and all government regulations and laws
- Do not discriminate on the basis of sex, gender identity, race, ethnicity, religion, national identity or disability



Commitment to HRS

- Be conversant with, and work to promote the Society's mission, goals and objectives
- Agree to adhere to the HRS Member Code of Conduct ([Appendix A](#))
- Use the HRS Volunteer Competency Framework: Professional Acumen, Collaboration, Vision and Direction, Delivering Results as a guide for developing strong leadership skills within the Society ([Appendix B](#))
- Maintain the confidentiality of all discussions that occur in the context of work with the Society
- Recognize that while HRS members participate in other professional societies' activities, while acting as a representative for HRS this Society's interests should have priority

Relationships

Relationships with Other Organizations

The behavior and decisions of individual members of the Society reflect upon the Society, as do the decisions and policies of the Society reflect upon the individual members. Members in certain roles may at times speak for the Society as determined by the descriptions of each position and activity. Participation in other organizations enriches the value of the contribution of the individual members but can be complicated by conflicting priorities. It is therefore mandatory that there is transparency of each HRS member concerning these additional relationships. These relationships can at times disqualify members from serving in certain positions (Table 2). With transparency and full disclosure, these potential conflicts can be acknowledged and managed effectively. The dynamic nature of the Society's agenda and relationships requires frequent examination of potentially conflicting relationships.

HRS leadership positions carry significant responsibility. Dual fiduciary authority in competitive organizations is not appropriate. A list of competitive organizations is contained in [Appendix C](#) and will be updated as needed. Those in the Presidential Track and Board of Trustees members may not hold equivalent positions in these competing organizations.

Relationships with the Community

Society members are also members of the larger community, including local, regional, national and global communities. As such, we must comply with the laws and regulations that govern our profession within each jurisdiction.

There are a number of aspects that significantly influence our social responsibility which extend well beyond our legal mandates. Members are strongly encouraged to contribute to efforts, including the following:

- Deliver quality medical services through establishment and maintenance of professional standards
- Recognize social determinants and other factors that influence the health of the community and the individual
- Interpret and present scientific knowledge to the community objectively and without personal bias
- Collaborate with others to improve health care services and delivery for the community and individual well being
- Contribute to improving public health, patient health and well-being and the prevention and management of heart rhythm disorders

Disclosure of Relationships

HRS requires all individuals engaged in HRS-related activities to disclose and manage personal, professional, and nonfinancial relationships while engaged in Society activities. For those serving in certain roles (Table 2), financial relationships are also required for disclosure.

Individuals engaged in HRS-related activities are defined as members of the Society's Board of Trustees, committees, subcommittees, writing groups, working groups, task forces, councils, Heart Rhythm Society journals' Editors-in-Chief, Deputy Editors, Associate Editors, Section Editors, Statistical Editors, Social Media Editors, Editorial Board members and participants in HRS-led educational activities.

These disclosures apply as well to an individual's spouse/partner. While not all relationships are prohibited or harmful, full disclosure of such relationships is required, and mechanisms are in place to identify and resolve potential or perceived conflicts of interest. All relationships must be disclosed and updated at least annually. Additional updates may be required at the time of consideration for participation in an HRS-related activity.

The types and descriptions of relationships requiring disclosure are summarized in Table 1. Individuals engaged in HRS-related activities must disclose relationships with any company whose primary business is producing, marketing, selling, re-selling, or distributing healthcare products used by or on patients. Appointees shall also disclose whether and to what extent they are involved in the leadership of another organization, including other medical professional societies.

Along with disclosing the existence of relationships, those serving in certain roles, defined in Table 2, must also disclose the monetary value of each relationship. When an exact monetary value cannot be determined, for example, in the case of the value of stock options or ownership of start-up companies, appointees are expected to provide a good-faith estimate of the likely value of each such financial relationship.

Management of Conflict of Interest

The Ethics Committee is responsible for: a) obtaining and auditing disclosures, and, on an annual basis, reviewing those submitted by the Board of Trustees, certain committee chairs, members and other appointees as deemed necessary; b) providing and communicating a process for reporting potential violations; c) evaluating complaints; d) assisting to determine appropriate measures to resolve or mitigate any actual or perceived conflicts of interest; e) levying and enforcing sanctions; and f) providing a mechanism for the appeal of decisions.

The Ethics Committee will annually review disclosures for individuals in specified roles as outlined in Table 2. Any concerns that arise from such a review will be communicated to the appointee.

The Ethics Committee is not required to review disclosures for other committee, council or temporary chairs or members. Furthermore, these individuals are not required to include financial amounts with their disclosed relationships.

The Board of Trustees delegates many responsibilities to the committees, and these groups serve an important role in implementing the organization's strategic plan and operational goals.

Although it is the responsibility of all participants to manage potential and existing conflicts during a discussion, the Committee Chair and Vice Chair are expected to promote transparency and manage potential and existing conflicts. The Chair and Vice Chair are also responsible for ensuring productive and inclusive participation and preventing an individual from unduly influencing the outcome of the discussion.

While the Ethics Committee has responsibilities for ensuring the overall compliance with the Society's Code of Ethics, Chairs and Vice Chairs have a role in the oversight of these procedures, and, as necessary, will forward to the Ethics Committee issues for resolution. To promote transparency, appointee disclosures will be posted on the HRS website annually. In addition, the Chair Statement will be read at the beginning of all HRS meetings or conference calls. The current disclosures of all participants will be distributed to the attendees in advance. Participants will also be asked to update any new disclosures at the beginning of the meeting.

Restrictions on HRS Leaders and Other Influential Appointees

There are additional restrictions on some HRS leaders and individuals appointed to high-visibility and influential positions, all of whom are required to disclose financial amounts. (Table 2). The Ethics Committee will annually review all disclosures of these individuals as well as individuals under consideration for an appointment to a leadership or influential position, including the HRS President and Health Policy and Regulatory Affairs Committee Chair. The Ethics Committee will review the Board of Trustees, Editors-in-Chief and Deputy Editors of Heart Rhythm Society journals, Accreditation & Assessment Committee Chair and Vice Chair, Clinical Guidelines Committee Chair and Vice Chair, Nominations/Audit Committee Chair, and the Ethics Committee Chair, Vice Chair, and members if their total disclosures, excluding institutional research and fellowship support, exceed \$500,000.

Disclosures of Editors-in-Chief, Deputy Editors, Associate Editors, Section Editors, Social Media Editors, Statistical Editors, and members of the Editorial Boards of Heart Rhythm Society journals will also be posted on the respective Journal websites.

Author (Peer Reviewer/Advisor) Disclosure Tables of HRS documents will list all RWI and denote which ones are relevant to the document topic(s), but will not include dollar amounts.

Resolution of Conflicts

Within 30 days of receipt of an alleged violation, the Ethics Committee shall review all potential conflicts of interest. The Ethics Committee shall determine whether there is an actual, potential, or perceived conflict of interest and which actions, policies, or processes can be implemented to resolve, mitigate, or manage the conflict. These determinations must be documented. The Ethics Committee has the authority to set and enforce all decisions. An appeals process is provided via a three-person independent appeals panel, appointed by the Ethics Committee. A written request for an appeal must be within 30 days of the date of the notification of the Ethics Committee's determination. The appeals panel's decision on sanctions is final.

If a conflict cannot be adequately resolved, mitigated, or managed, then the Ethics Committee or the Board of Trustees (upon recommendation from the Ethics Committee) may require the person to limit or curtail certain activities with HRS, and/or ask the individual to eliminate or remedy the conflict if they want to continue participation in HRS activities.

Complaints

Any member of the Society, including appointees, session participants, faculty and staff, may report a potential violation of the Society's disclosure and conflict of interest policies to the Ethics Committee. However, in all allegations of bias, real or perceived, appointees are encouraged to first raise their concerns at the committee level.

The Heart Rhythm Society or an individual will not retaliate against a whistleblower.

Any whistleblower who believes he/she is being retaliated against must contact the Chair of the Ethics Committee immediately. HRS will use its good faith and reasonable efforts to maintain the confidentiality of the whistleblower. However, identity may have to be voluntarily disclosed in order to proceed with a proper and thorough investigation and to provide accused individuals with due process in any ensuing hearing or legal process. In the context of a retaliation claim, whistleblower identity would most likely have to be disclosed in order to prosecute that claim.

Violations

Violations are reported to the Ethics Committee for review and sanctions if appropriate. Violations also may be reported to an individual's academic institution or employer. The Society maintains a process for disqualifying individuals who have a conflict that cannot be adequately resolved by other measures.



Accredited Continuing Education (ACE) Disclosure and Conflict of Interest Resolution Policy for Educational Activities

HRS is committed to the provision of Accredited Continuing Education (ACE) that is balanced, objective, and evidence-based. HRS adheres to the Standards for Integrity and Independence in Accredited Continuing Education of the Accreditation Council for Continuing Medical Education (ACCME) which require that those individuals in a position to control the content of an educational activity (including, but not limited to, planners, faculty, authors, committee members, content reviewers, editors, and staff) disclose all financial relationships with an ACCME-defined ineligible company (ineligible to sponsor ACCGME activities) within the 24 months prior to the disclosure. HRS maintains an Accreditation & Assessment Committee that oversees both the ACE Policy and the Conflict of Interest (COI) Resolution policy to safeguard the credibility and reputation of the Society's ACE activities. The definition of ACCME-defined ineligible companies aligns with HRS' definition of industry and can be found on the ACCME website.

Any individual who fails to disclose financial relationships will be disqualified from participating in HRS ACE-certified activities. Owners and employees of ACCME-defined ineligible companies may have no role in the planning or implementation of ACE activities without a special written exception from the HRS Chief Learning Officer that will be granted only in specific circumstances that meet ACCME requirements.

Society Documents

Members of all HRS document writing committees/groups have a special obligation for full disclosure due to the impact on organizational integrity of actual or perceived conflicts of interest. All disclosures must be updated and reviewed by the appropriate oversight² committee. prior to appointment to a writing group. Specific management of these activities is outlined in [Appendix D](#).

² *The Oversight Committee is the one indicated in the charge of the relevant committee.*

Research and Other Academic Activities



The Society promotes the responsible conduct of research and encourages compliance with ethical standards and government regulations governing research. HRS members engaged in research activities are expected to protect the integrity of their scientific data and meet accepted ethical standards for conducting research and publishing scientific data. The Society's policy applies to all members, including but not limited to physicians, scientists, other investigators, students, and postdoctoral fellows, whether performing research funded by HRS or by other organizations. Specific management of responsibilities and management of research activities is outlined in [Appendix E](#).

Expert Witness

Consulting as an Expert Witness In Legal Proceedings

The Society recognizes two general categories in which a member may be involved as an expert witness, including providing opinions as well as testimony at deposition or trial, depending on the nature of the litigation and who is employing the Member as a consultant. In both cases, the Member is acting individually and is not acting as a representative of the Society. These two categories are expert witness consulting on behalf of a commercial entity or as expert witness consulting in medicolegal litigation. The former relationship must be disclosed. The latter relationship is considered to be part of the practice of medicine and does not need to be disclosed. The details of this policy are outlined in [Appendix F](#).

Management of Professional Misconduct

Automatic Suspension of Membership will occur on:

- Conviction of a felony
- Suspension or termination of license for clinical practice (e.g., medicine, nursing, pharmacy) or academic appointment due to violations of professional conduct

Any complaints concerning violations of the HRS Code of Ethics and Professionalism are to be submitted in writing with appropriate documentation to the Chair of the Ethics Committee. Within 30 days of receipt of an alleged violation, the Ethics Committee shall review the complaint. The Ethics Committee shall determine whether there is violation of the Code of Ethics and Professionalism and whether sanctions are required. The Ethics Committee has the authority to set and enforce all decisions. An appeals process is provided via a three-person independent appeals panel, appointed by the Ethics Committee. A written request for an appeal must be made within 30 days of the date on the notification of the Ethics Committee's determination. The appeals panel's decision on sanctions is final.

Public Communications and Social Media Conduct Policy

Members, staff, and anyone engaged in Heart Rhythm Society activities are expected to uphold the highest standards of professionalism, respect, and inclusivity in all public communications, including on social media.

The Society strictly prohibits hate speech—defined as any public or online communication, pictures, or meme that incites violence, expresses or promotes hostility, dehumanization, or discrimination against individuals or groups based on race, ethnicity, national origin, religion, gender, gender identity, sexual orientation, disability, or other protected characteristics.

Examples of Hate Speech Include, but are not Limited to:

- Calling for violence against a specific ethnic or religious group
- Using slurs with the intent to demean or threaten someone based on their identity
- Distributing propaganda promoting racial superiority
- Denying historical genocides in a way that promotes hatred (illegal in some jurisdictions)
- Using imagery or memes to incite hatred
- Anyone involved in HRS activities who engages in hate speech, including but not limited to social media posts, public statements, or shared content that violates these principles, may be subject to dismissal or removal from Heart Rhythm Society activities.
- The Heart Rhythm Society Ethics Committee reserves the right to review and act on any public or online conduct—past or present—that undermines the safety, dignity, or professional standing of our diverse community.

Table 1: Relationship Category Descriptions and Relevant ACCME Definitions

All relationships with industry, non-industry, and other professional societies relevant to healthcare from the 12 months preceding an assignment must be disclosed (24 months for educational activities). Disclosure does not require financial amounts, except for those listed in Table 2.

Definition: For purposes of Tables 1 and 2, industry shall mean a company whose primary business is producing, marketing, selling, re-selling, or distributing healthcare products used by or on patients.

Category	Description
Honoraria/Speaking/Consulting Fees	Honoraria, gifts or in-kind compensation for consulting, lecturing, speaking engagements, advisory board, or membership, certain types of legal testimony or consultation (see Appendix E), or other purposes.
Speakers Bureau: when a company controls content	When a company has the right to dictate or control the content of the presentation or talk, or the company creates the presentation material or has final approval of the content and edits, and/or you are expected to act as a company's agent or spokesperson for the purpose of disseminating company or product information.
Stocks or Stock Options – Public	Includes any stock or stock options for a publicly traded company in industry (excluding mutual funds)
Stocks or Stock Options – Non-Public (including start-up companies)	Includes any stock or stock options for a non-publicly traded company in industry including a start-up company. (excluding mutual funds)
Majority Shareholders	Majority shareholders of a company in industry and a non-industry company.

Table 1: Relationship Category Descriptions (cont.)

Royalty/Commission Income	Payments received from others for the grant of license or other rights to them to use or exploit intellectual property rights, including copyrights, trademarks and patents and materials and assets derived from them. Also included are payments received from others for the sale of specified products and services.
Officer, Trustee, Director, or Any Other Fiduciary Role	Officer, Trustee, Director, or Any Other Fiduciary Role of a relevant for-profit or non-profit organization, whether remuneration is received for service.
Non-financial Relationship	Participation in an activity at a relevant for-profit or non-profit organization (e.g., committee, council, Board of Trustees, Board of Directors).
Ownership/Partnership/Principal (industry)	Status or position of Ownership/Partnership/Principal in a company in industry.
Ownership/Partnership/Principal (non-industry)	Status or position of Ownership/Partnership/Principal in a non-industry company.
Institutional Research Grants (PIs and Named Investigators only)	For principal investigator and named investigators only, grants received from industry, foundations or government sources granted to the institution.
Fellows in Training Salary	Fellowship salary support granted to the individual's institution.
Salary from Employment (industry)	Salary from industry employment.

Table 1: Relationship Category Descriptions (cont.)

Intellectual Property Rights	The rights to own and profit from intellectual creations, such as inventions, innovations and authored materials of any type and in any form or media, including, without limitation, creations registered as patents, patent applications, copyrights, trademarks, service marks, trade names and trade dress or unregistered creations such as trade secrets and other know-how, whether tangible or intangible, and whether or not such rights are currently commercialized via a license agreement or other means.
Travel/Entertainment	Disclosure of travel, entertainment, food, beverage, and education expenses.
Other Financial Relationships	Other relevant relationships related to healthcare not described above must be disclosed.
For Board Members Only	Family relationship shall mean all lineal relationships (i.e., parents, grandparents, children and grandchildren, etc.) and brothers and sisters, in all cases determined as a matter of blood, adoption or marriage.
For Board Members Only	Business relationships with another member of the Board.

Table 2: Disclosure Requirements by Role

Definition: For purposes of Table 2 “industry” shall mean any company whose primary business is producing, marketing, selling, re-selling or distributing healthcare products used by or on patients.

Appointees: Participation as officers and board members, chairs and vice-chairs, committee and council members, task force members, writing group members, Editors-in-Chief, editors, editorial board members, invited speakers at official HRS scientific and educational meetings, and others in an invited role.

All Appointees	All relationships are to be disclosed for the 12 months preceding the start of an assignment. The types and definitions of these relationships and the financial amounts to be disclosed are outlined in Tables 1 and 2.
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High-Level and Influential Appointee Positions

President	<p>The Society’s President shall be prohibited from receiving income from companies in industry that have the potential for conflict of interest, during the year(s) in which they hold the position.</p> <p>Continued participation in industry-sponsored clinical trials, steering committees, data and safety monitoring boards, and advisory boards, without personal remuneration, are allowed, as well as continued participation as an expert witness on behalf of device or pharmaceutical companies if these relationships were established prior to assuming the Presidential year.</p> <p>Casual conversations to gain the perspective of HRS or to share developments with HRS are permitted, without compensation.</p> <p>Stocks in companies obtained prior to the Presidential year whose primary business is heart rhythm-related must be sold or placed in escrow for the President year.</p>
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Table 2: Disclosure Requirements by Role (cont.)

President (Cont.)	<p>The President must not profit from active trading in stock options or other ownership equity in a heart rhythm-related enterprise during the term of their Presidency, excluding mutual funds that may hold such stocks in its portfolio. It is recognized that partnership or principal interests in a heart rhythm-related enterprise, including a startup company, may require active decision-making during the Presidential year. Such cases will be dealt with on an Ad Hoc basis by the Ethics Committee.</p> <p>Involvement at industry-sponsored meeting/events/activities is acceptable if:</p> <ul style="list-style-type: none">• No honorarium is received, and reasonable expenses can be reimbursed.<ul style="list-style-type: none">○ The HRS Travel Policy is the benchmark for defining what are considered reasonable expenses• All aspects of the talk must be self-directed with no influence from the company sponsor.• They may participate in legislative/regulatory events (i.e., congressional hearings) but only speak on behalf of HRS, not the company. <p>Royalty income and licensing agreements that existed before becoming President are permissible.</p> <p>Obtaining stock or exercising stock options during the President's year is not allowed.</p>
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High-Level and Influential Appointee Positions (Cont.)

<p>Accreditation & Assessment Committee Chair and Vice Chair</p> <p>Clinical Guidelines Committee Chair and Vice Chair</p> <p>Ethics Committee Chair, Vice Chair, and Members</p> <p>Nominations/Audit Committee Chair</p>	<p>These individuals must disclose financial amounts for all relationships and will be reviewed by the Ethics Committee if their total disclosures, excluding institutional research and fellowship support, exceed \$500,000.</p>
<p>Board of Trustees, including Presidential Track Members Other than the President (see President requirements above)</p>	<p>Board members must disclose financial amounts for all relationships and will be reviewed by the Ethics Committee if their total disclosures, excluding institutional research and fellowship support, exceed \$500,000.</p> <p>Board members are ineligible to serve as Editors-in-Chief of another non HRS heart-rhythm-related journal that is peer reviewed and/or indexed in PubMed.</p> <p>Board members must not hold dual fiduciary authority in competitive organizations listed in <u>Appendix C</u>.</p> <p>Board members must disclose all lineal (Family) relationships (relationships (i.e., parents, grandparents, children and grandchildren, etc.) and brothers and sisters, in all cases determined as a matter of blood, adoption or marriage with another member of the Board.</p> <p>Board members must disclose business relationships with another member of the Board.</p>

Table 2: Disclosure Requirements by Role (cont.)

HRS Documents

Writing Group Chair/Vice Chair	<p>For Clinical Guidelines/Expert Consensus Statements: the Chair and one Vice Chair must have no relationships with industry that are relevant to the document topics, excluding research and fellowship support.</p> <p>For Scientific Documents: either the Chair or the Vice Chair must have no relationships with industry that are relevant to the document topics, excluding research and fellowship support.</p> <p>For all HRS documents the Chair and Vice-Chairs (and their immediate family members) should not own stock, or stock options or have ownership, royalty income, partnership, licensing or principal interests in a heart rhythm related enterprise (including a start-up company) as deemed by the oversight committee² in consultation with the Ethics Committee, excluding mutual funds that may hold such stock in its portfolio, nor have the potential to profit financially from the recommendations of the document.</p>
Writing Group Members	<p>Writing committee members are required to disclose all relationships with industry, with or without remuneration.</p> <p>Dollar amounts are not required for disclosure.</p> <p>The oversight committee will determine which relationships with industry are relevant to the document.</p> <p>The relevancy of an RWI will be based on the relationship and the company.</p> <p>An appointed committee member's writing assignments may be determined by their RWI status, which is determined by the disclosures that are active from the start of the kickoff call.</p>

² The Oversight Committee is the one indicated in the charge of the relevant committee.

Table 2: Disclosure Requirements by Role (cont.)

HRS Documents (Cont.)

Writing Group Member (Cont.)	<p>Author (Peer Reviewer/Advisor) Disclosure Tables will list all RWI and denote which ones are relevant to the document topic(s) but will not include dollar amounts.</p> <p>Writing Group members shall not own, stock, or stock options or have ownership, royalty income, partnership, or principal interests in a heart rhythm related enterprise (including a start-up company) as deemed by the oversight committee² in consultation with the Ethics Committee, excluding mutual funds that may hold such stock in its portfolio, nor have the potential to profit financially from the recommendations of the document.</p> <p>Any member who has divested of relevant, stocks, or stock options ownership, royalty income, partnership, licensing or principle interests in a heart rhythm related enterprise (including a start-up company) prior to the document kickoff meeting is eligible to participate.</p>
External Peer-Reviewer	<p>There are no restrictions on participation for peer reviewers; however, all reviewers must disclose all relationships with industry, nonprofit organizations, and government agencies.</p>
Industry Involvement	<p>Employees of industry should not be allowed to serve on writing groups.</p> <p>An Industry Advisory Group or Forum can be established to provide advice and expertise.</p> <p>The use of Industry Advisory Groups or Forums should be disclosed in the document and the purpose and participants of the group/forum should be detailed in the appropriate section of the document.</p>

Table 2: Disclosure Requirements by Role(cont.)

Heart Rhythm Society Journals

<p>Editors-in-Chief and Deputy Editors of Heart Rhythm Society Journals</p>	<p>The Editors-in-Chief and Deputy Editors of Heart Rhythm Society journals must disclose all relationships annually, with financial amounts, and shall not receive remuneration from competing publications or products. They may serve on the editorial board (but not as an Editor in Chief, Deputy, section, senior statistical, and/or associate editor (or other equivalent role)) for other publications and shall not serve on advisory boards for competing organizations listed in <u>Appendix C</u>.</p> <p>Disclosures will be reviewed by the Ethics Committee if disclosure totals are greater than \$500,000, excluding research and fellowship support.</p> <p>A process must be in place for reviewing manuscripts and making editorial decisions when the Editor-in-Chief/Deputy Editor is affiliated with the same institution as the authors of the manuscript or has a relationship with industry involving a product, device, or procedure similar to the subject of the manuscript.</p>
<p>Associate Editors, Senior Statistical Editors, Advisors</p>	<p>Associate Editors, Senior Statistical Editors, and Advisors (or the equivalent) of Heart Rhythm Society journals are ineligible to serve as Associate Editors, Senior Statistical Editors, Advisors (or the equivalent) of another heart-rhythm-related journal that is peer reviewed and/or indexed in PubMed.</p> <p>Relationships are to be disclosed and should be updated at least annually. Additional updates may be required at the time of consideration for participation in an HRS activity.</p> <p>Disclosure does not require financial amounts or Ethics Committee review.</p>
<p>Section Editors, Statistical Editors, Editorial Board Members, Social Media Editors, Section Editors</p>	<p>Relationships are to be disclosed and should be updated at least annually. Additional updates may be required at the time of consideration for participation in an HRS activity.</p> <p>Disclosure does not require financial amounts or Ethics Committee review.</p>