

Bio/Disclosure Form

As a prospective planner or presenter/content expert/moderator, we need your help in protecting our learning environment from industry influence. Please complete the form below. All information will be kept confidential. Failure to comply with this request, will remove your ability to participate as planner/presenter/content expert/moderator for this activity. Attach additional pages, if needed.

*Only moderators participating in education (i.e., serving on panels, Q&A, or impacting content in any manner) require a biodisclosure. Moderators serving solely as announcers and time managers do *not* require a biodisclosure.

Date Submitted (mm/dd/yyyy)

Role in Educational Activity (Check all that apply.)

☒ Planner ☐ Presenter/Content Expert ☐ Moderator*

Section 1: Demographic Data

Name and credentials	Svetlana Smorodinsky, MPH	
Position and title	Disaster Epidemiologist	
Current employer and address	California Department of Public Health 850 Marina Bay Parkway, P-3 Richmond, CA 94804	
Phone	510.620.3642	Email svetlana.smorodinsky@cdph.ca.gov

Section 2: Education and Expertise

Describe education specific to the educational activity listed above.

Degree	Year	Institution
MPH	1998	UCLA

Describe expertise specific to the educational activity listed above.

Svetlana Smorodinsky, MPH is a disaster epidemiologist with the Environmental & Occupational Emergency Preparedness Team, California Department of Public Health. She provides training and expertise in disaster epidemiology and participates in preparedness and response activities related to environmental and occupational incidents. Svetlana has held leadership roles in several CASPER projects and has provided CASPER training to field teams and local jurisdictions. Results of several rapid assessments she took part in have been published in CDC Morbidity and Mortality Weekly Reports, American Journal of Public Health, and Journal of Environmental Health. During COVID-19 response, Svetlana worked to implement CDC/NIOSH Emergency Responder Health Monitoring and Surveillance (ERHMS) framework at CDPH and has served as CDPH EOC Safety Officer. Svetlana is a co-chair of the Council of State and Territorial Epidemiologists' Disaster Epidemiology subcommittee; represents Health on a Local Emergency Planning Committee; and has a California Emergency Management Specialist Certificate.

Section 3: Conflict of Interest

For Federal employees only: For the past 24 months, I have been a federal employee and have been covered by all of the federal ethics rules, including the bribery and illegal gratuities statute (18 U.S.C. § 201), the criminal conflict of interests statutes (18 U.S.C. §§ 202-209), and the Standards of Ethical Conduct for Employees of the Executive Branch (5 C.F.R. Part 2635).

☐ Yes ☐ No

OR

For Non-federal employees only: Please disclose **all** financial **relationships** that you have had in the past 24 months with ineligible companies. An ineligible company is any entity whose primary business is producing, marketing, selling, re-selling, or distributing healthcare products used by or on patients (e.g., device manufacturers, pharmaceutical companies, or bio-medical startups that have begun a governmental regulatory approval process.) For any questions related to ineligible companies or any possible financial relationships, please contact your assigned CE Consultant.

NOTE: There is no minimum financial threshold; we ask that you disclose all financial relationships regardless of the amount with ineligible companies. Disclose the relationship regardless of the potential relevance of each relationship to the education. *Examples of financial relationships include employee, researcher, consultant, advisor, speaker, independent contractor (including contracted research), royalties or patent beneficiary, executive role, or ownership interest. Individual stocks and stock options should be disclosed; diversified mutual funds do not need to be disclosed. Research funding from ineligible companies should be disclosed by the principal or named investigator even if that individual's institution receives the research grant and manages the funds.*

For the past 24 months, have you had **any** financial relationship with **any** ineligible company?

☐ Yes ☒ No

If yes, complete the table below.

Name of Ineligible Company	Nature of Financial Relationship	Has the Relationship Ended? (Y/N)

FOR DEVELOPERS ONLY: Indicate the mitigation strategy used for the individual(s) who identified financial relationships with ineligible companies.	
Mitigation steps for planner (choose at least one) ☐ Divest the financial relationship ☐ Recusal from controlling aspects of planning and content with which there is a financial relationship ☐ Peer review of planning decisions by persons without relevant financial relationships ☐ Use other methods (please describe):	Mitigation steps for presenter and others (choose at least one) ☐ Divest the financial relationship ☐ Peer review of content by persons without relevant financial relationships ☐ Attest that clinical recommendations are evidence-based and free of commercial bias (e.g., peer-reviewed literature or adhering to evidence-based practice guidelines) ☐ Use other methods (please describe):

****If Planner only, Skip sections 4 and 5.**

Section 4: Unlabeled Use

Will your presentation(s) or content you contributed include any discussion of unlabeled use of commercial products or products for investigational use?

☐ Yes ☒ No

If Yes, please explain your use of unlabeled products or products under investigational use. Attach additional pages, if needed.

Section 5: Title of Presentation (Live) **OR** Content Provided

Planner for 2023 Disaster Epi Workshop

Section 6: Statement of Understanding

Completion of the line below serves as the electronic signature of the individual completing this form and attests to the accuracy of the information given above.

Svetlana Smorodinsky, MPH

2/23/2023

Typed Signature: Name and Credentials (Required)

Date