

Using the electronic Summary Disclosure of Financial Interests (eSDFI) Form

The Office of Sponsored Programs has replaced the paper SDFI form with the online eSDFI form.

The eSDFI is available at: <http://w3.umassmed.edu/ResearchForms/SDFI>

This link can be accessed on the OSP forms page as well as the Financial Conflict of Interest (FCOI) forms page.

The following page appears when you click on the eSDFI link:

The screenshot shows the top of the eSDFI form. It features the UMASS Medical School logo and the text "Office of Research". A navigation bar includes links for "Home", "Instructions", "Definitions", and "Review Process and Guidelines". The main heading is "Summary Disclosure of Financial Interests (Page 1 of 6)". Below this, there is a section titled "Please read the Disclaimer" with a paragraph of text explaining the mandatory nature of the form and its compliance with university and federal regulations. At the bottom of this section is a blue button labeled "Next".

Click on next. The following page will appear:

The screenshot shows the second page of the eSDFI form, titled "Summary Disclosure of Financial Interests (Page 2 of 6)". The section is "Enter Project Details". It contains several input fields: "Message to Disclosers" (with a text box containing "Please review and complete the SDFI form I just email you - Diego"), "Project Type*" (a dropdown menu set to "Proposal"), "PeopleSoft Proposal ID*" (text box "Test123456"), "Principal Investigator First Name*" (text box "John"), "Principal Investigator Last Name*" (text box "Doe"), "Principal Investigator Email*" (text box "sdfi@umassmed.edu"), and "Principal Investigator Title*" (text box "Assistant Professor"). To the right of these fields is a red-bordered box labeled "Item 1" containing a checked checkbox. Below this is a section for proxy information with fields for "Proxy First Name*" (text box "Diego"), "Proxy Last Name*" (text box "Vazquez"), and "Your Email*" (text box "diego.vazquez@umassmed.edu").

If you are preparing this form for someone other than yourself, please check the box above (Item 1) and enter your name and email address. After the remaining fields have been completed click on the next button (Item 2)

Department* :	<input type="text" value="Office of the Vice Provost for Research"/>
Project Title* :	<input type="text" value="Test of eSDFI Form"/>
Sponsor* :	<input type="text" value="NIH"/>
Project Start Date* :	<input type="text" value="04/01/2016"/>
Project End Date* :	<input type="text" value="03/31/2017"/>
Human Subjects?* :	<input type="radio"/> Yes <input checked="" type="radio"/> No

Will Non-University Investigators be responsible with the PI or Co-PI for the design, conduct, or reporting of the activities associated with the project. e.g., subrecipients, consultants, collaborators, others with significant responsibilities)? If yes, UMMS must be assured that the Investigators' home institution(s) have policies that comply with the sponsor's regulations. Such assurance should be provided * : Yes No

Please indicate the Non-university Investigator types below. (At least one must be chosen if you answered YES above.)

Sub Recipients* :	<input checked="" type="checkbox"/>
Consultants* :	<input type="checkbox"/>
Collaborators* :	<input type="checkbox"/>
Others* :	<input type="checkbox"/>

Item 2

The following page will appear:



Home Instructions Definitions Review Process and Guidelines

Summary Disclosure of Financial Interests (Page 3 of 6)

Enter UMMS Personnel Identified as Investigators

All individuals responsible for the design, conduct, or reporting of the results of work performed or to be performed under the sponsored project, referred to as "investigator" are required to complete this disclosure. The term "investigator" includes, but is not limited to the Principal Investigator, Co-investigators, and any other individuals (including personnel from other institutions) who are involved in accomplishing project objectives. It may include students, graduate and undergraduate, and other personnel who may be listed as authors on project results, even if they are not paid from the project.

Item 3

Disclosure Investigator Name	Title	Disclosure Investigator Email	Commands
------------------------------	-------	-------------------------------	----------

Click on the Add New Disclosure Investigator Button (Item 3) to add additional investigators to the SDFI.

Once clicked, a row of fields will appear for you to enter the Investigator's name. After you enter the Investigator's information please be sure to click the save button at the end of the row (Item 4). You will need to do this for each Investigator added. Please note that all Investigators need to be added before you click the "Next" button (Item 5).

Home Instructions Definitions Review Process and Guidelines

Summary Disclosure of Financial Interests (Page 3 of 6)

Enter UMMS Personnel Identified as Investigators

All individuals responsible for the design, conduct, or reporting of the results of work performed or to be performed under the sponsored project, referred to as "Investigator" are required to complete this disclosure. The term "Investigator" includes, but is not limited to the Principal Investigator, Co-investigators, and any other individuals (including personnel from other institutions) who are involved in accomplishing project objectives. It may include students, graduate and undergraduate, and other personnel who may be listed as authors on project results, even if they are not paid from the project.

+ Add New Disclosure Investigator			
Disclosure Investigator Name	Title	Disclosure Investigator Email	Commands
<input type="text" value="Janice Lagace"/>	<input type="text" value="AD, OSP"/>	<input type="text" value="janice.lagace@umassmed.edu"/>	<input checked="" type="button" value="Save"/> <input type="button" value="Cancel"/>

Item 5 Item 4

Once you click the save button, the Commands section field will change to Edit to reflect that investigator has been added (see below).

<input type="text" value="Janice Lagace"/>	<input type="text" value="AD, OSP"/>	<input type="text" value="janice.lagace@umassmed.edu"/>	<input checked="" type="button" value="Edit"/> <input type="button" value="Delete"/>
--	--------------------------------------	---	--

Once the Next button is clicked, you will be taken to the eSDFI Confirmation page where you will be able to review the eSDFI form before sending it to the Investigators. If you need to revise any of the information on the page, click on the Previous button (Item 6) to go back and make revisions. If everything is ok, click on the Send button (Item 7) to distribute the eSDFI form for signatures.

Home Instructions Definitions Review Process and Guidelines

Summary Disclosure of Financial Interests (Page 4 of 6)

Confirmation

Please confirm the following information and click the SEND button if you are ready. Otherwise, click the PREVIOUS button to go back and revise your information.

Message

Please review and complete the SDFI form I just email you - Diego

Project Title

Test of eSDFI Form

AGREEMENT INFORMATION

Project Type :	Proposal
PeopleSoft ID :	Test123456
Principal Investigator First Name :	John
Principal Investigator Last Name :	Doe
Principal Investigator Email :	sdfi@umassmed.edu
Principal Investigator Title :	Assistant Professor
Proxy First Name :	Diego
Proxy Last Name :	Vazquez
Proxy Email :	diego.vazquez@umassmed.edu
Department :	Office of the Vice Provost for Research
Sponsor :	NIH
Project Start Date :	04/01/2016
Project End Date :	03/31/2017
Human Subjects? :	No
Will Non-University Investigators be responsible with the PI or Co-PI for the design, conduct, or reporting of the activities associated with the project.:	Yes


The following Non-University Investigator Types were chosen:

Sub Recipients

If you would like to change any of this information, please click PREVIOUS.
If you are ready to send this agreement out, please click SEND.

Item 6 Item 7

When the "Send" button is clicked, the page below will appear. **Please bookmark this page so you can return to check the status of the form and to send reminders.**



Office of Research

Home Instructions Definitions Review Process and Guidelines

Summary Disclosure of Financial Interests

Agreement Status Information

Congratulations, your Document has been sent for signature.

Please BOOKMARK this status page so you can return to check status and send reminders.

Status information for: **Test123456-John Doe**

MESSAGE

Please review and complete the SDFI form I just email you - Diego

GENERAL STATUS

Signatures were requested on **3/30/2016 11:59:07 AM**.
The **OVERALL STATUS** for this SDFI Form is **OUT FOR SIGNATURE**.

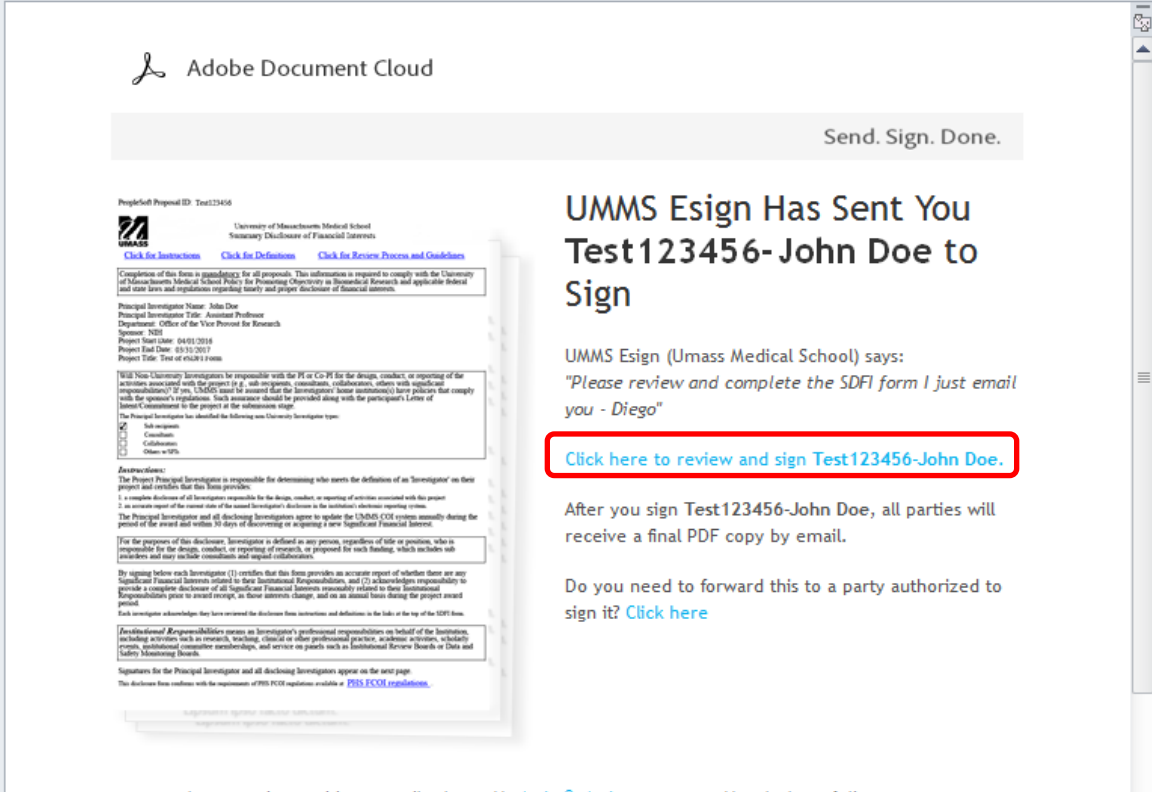
DETAILED STATUS

NAME	STATUS
sdfi@umassmed.edu	WAITING FOR SIGNATURE

[Re-send Document to those who have not yet signed](#)

Recipients will receive the following email:


From: UMMS Esign <echosign@echosign.com> Sent: Wed 3/30/2016 11:59 AM
To: SDFI
Cc:
Subject: Please sign Test123456-John Doe



Adobe Document Cloud

Send. Sign. Done.

PeopleSoft Proposal ID: Test123456

 University of Massachusetts Medical School
Summary Disclosure of Financial Interests

[Click for Instructions](#) [Click for Definitions](#) [Click for Review Process and Guidelines](#)

Congratulation of this form is mandatory for all proposals. This information is required to comply with the University of Massachusetts Medical School Policy for Promoting Openness in Biomedical Research and applicable federal and state laws and regulations regarding timely and proper disclosure of financial interests.

Principal Investigator Name: John Doe
Principal Investigator Title: Assistant Professor
Department: Office of the Vice Provost for Research
Sponsor: NIH
Project Start Date: 04/01/2016
Project End Date: 03/31/2017
Project Title: Test of chik111000

Will You/University Investigators be responsible with the PI or Co-PI for the design, conduct, or reporting of the activities associated with the project (i.e., sub-contracts, consultants, collaborators, others with significant responsibilities)? If yes, UMMS must be assured that the Investigator's home institution(s) have policies that comply with the sponsor's regulations. Such assurance should be provided along with the participant's Letter of Intent Commitment to the project of the submission stage.

The Principal Investigator has identified the following non University Investigator types:

- Sub-contract
- Consultant
- Other = 97%

Instructions:
The Project Principal Investigator is responsible for determining who meets the definition of an 'Investigator' on their project and certifies that this form provides:
1. a complete disclosure of all investigators responsible for the design, conduct, or reporting of activities associated with the project
2. an accurate report of the current state of the investigator's disclosure to the submission submission reporting system.
The Principal Investigator and all disclosing Investigators agree to update the UMMS COI system annually during the period of the award and within 30 days of becoming or acquiring a new significant financial interest.

For the purposes of this disclosure, Investigator is defined as any person, regardless of title or position, who is responsible for the design, conduct, or reporting of research, or provision of such funding, which includes sub-contractors and may include consultants and unpaid collaborators.

By signing below each Investigator (1) certifies that this form provides an accurate report of whether there are any Significant Financial Interests related to their Institutional Responsibilities, and (2) acknowledges responsibility to update a complete disclosure of all Significant Financial Interests immediately related to their Institutional Responsibilities prior to award receipt, in those instances change, and on an annual basis during the project award period.

Each investigator acknowledges they have reviewed the disclosure form instructions and definitions in the link at the top of the SDFI form.

Institutional Responsibilities means an Investigator's professional responsibilities on behalf of the Institution, including activities such as research, teaching, clinical or other professional practice, academic activities, scholarly work, translational/computer partnerships, and service on panels such as Institutional Review Boards or Data and Safety Monitoring Boards.

Signatures for the Principal Investigator and all disclosing Investigators appear on the next page.
The disclosure form conforms with the requirements of FDOS (FCOI) regulations available at [FDOS \(FCOI\) regulations](#).

UMMS Esign Has Sent You
Test123456- John Doe to Sign

UMMS Esign (Umass Medical School) says:
"Please review and complete the SDFI form I just email you - Diego"

Click here to review and sign Test123456-John Doe.

After you sign Test123456-John Doe, all parties will receive a final PDF copy by email.

Do you need to forward this to a party authorized to sign it? [Click here](#)

To ensure that you continue receiving our emails, please add echosign@echosign.com to your address book or safe list.

When you click on the link in the email, it will take you to an Adobe Echosign pdf of the SDFI form. The Investigator should click on the yellow start arrow (Item 8) which will take them to the disclosure and signature box.

PeopleSoft Proposal ID: Test123456



University of Massachusetts Medical School
Summary Disclosure of Financial Interests

[Click for Instructions](#)

[Click for Definitions](#)

[Click for Review Process and Guidelines](#)

Completion of this form is **mandatory** for all proposals. This information is required to comply with the University of Massachusetts Medical School Policy for Promoting Objectivity in Biomedical Research and applicable federal and state laws and regulations regarding timely and proper disclosure of financial interests.

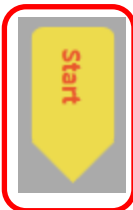
Principal Investigator Name: John Doe
Principal Investigator Title: Assistant Professor
Department: Office of the Vice Provost for Research
Sponsor: NIH
Project Start Date: 04/01/2016
Project End Date: 03/31/2017
Project Title: Test of eSDFI Form

Will Non-University Investigators be responsible with the PI or Co-PI for the design, conduct, or reporting of the activities associated with the project (e.g., sub recipients, consultants, collaborators, others with significant responsibilities)? If yes, UMMS must be assured that the Investigators' home institution(s) have policies that comply with the sponsor's regulations. Such assurance should be provided along with the participant's Letter of Intent/Commitment to the project at the submission stage.

The Principal Investigator has identified the following non-University Investigator types:

- Sub recipients
- Consultants
- Collaborators
- Others w/SFIs

Item 8



Instructions:

The Project Principal Investigator is responsible for determining who meets the definition of an 'Investigator' on their project and certifies that this form provides:

1. a complete disclosure of all Investigators responsible for the design, conduct, or reporting of activities associated with this project
2. an accurate report of the current state of the named Investigator's disclosure in the institution's electronic reporting system.

The Principal Investigator and all disclosing Investigators agree to update the UMMS COI system annually during the period of the award and within 30 days of discovering or acquiring a new Significant Financial Interest.

For the purposes of this disclosure, Investigator is defined as any person, regardless of title or position, who is responsible for the design, conduct, or reporting of research, or proposed for such funding, which includes sub awardees and may include consultants and unpaid collaborators.

By signing below each Investigator (1) certifies that this form provides an accurate report of whether there are any Significant Financial Interests related to their Institutional Responsibilities, and (2) acknowledges responsibility to provide a complete disclosure of all Significant Financial Interests reasonably related to their Institutional Responsibilities prior to award receipt, as those interests change, and on an annual basis during the project award period.

Each investigator acknowledges they have reviewed the disclosure form instructions and definitions in the links at the top of the SDFI form.

Institutional Responsibilities means an Investigator's professional responsibilities on behalf of the Institution, including activities such as research, teaching, clinical or other professional practice, academic activities, scholarly events, institutional committee memberships, and service on panels such as Institutional Review Boards or Data and Safety Monitoring Boards.

Signatures for the Principal Investigator and all disclosing Investigators appear on the next page.

This disclosure form conforms with the requirements of PHS FCOI regulations available at [PHS FCOI regulations](#).

The Investigator will need to answer the disclosure question (Item 9). Once they have answered yes or no to the question, they will need to click on the signature box (Item 10) to sign the document.

PeopleSoft Proposal ID: Test123456

Principal Investigator Disclosure & Certification

Do you, your spouse/domestic partner or dependent children have any Significant Financial Interests (SFI) related to the Investigator's Institutional Responsibilities? Please answer below.

Start Do you have a Significant Financial Interest (SFI) to report? **Yes** **No** **Item 9**

If yes, investigator confirms the [UMMS COI SYSTEM](#) has been updated and is current.

Principal Investigator: John Doe
Title: Assistant Professor
Sign: **Item 10**

When you click on the signature box, the following screen pops up:

UMMS SDFI **Item 11**

Sign **Item 12**

UMMS SDFI

Cancel Apply

To sign, the Investigator can type their name in the type box (Item 11) or write their name with a drawing tool (Item 12).

Once the name has been entered, the investigator should click on the “Apply” button (Item 13) to sign the SDFI form.

John Doe

Sign

John Doe

Cancel **Apply** **Item 11**

Once the apply button is clicked, the signature is added to the form. Once the signature is added, all that remains is to click on the “Click to Sign” button (Item 14).

PeopleSoft Proposal ID: Test123456

Principal Investigator Disclosure & Certification

Do you, your spouse/domestic partner or dependent children have any Significant Financial Interests (SFI) related to the Investigator's Institutional Responsibilities? Please answer below.

Do you have a Significant Financial Interest (SFI) to report? Yes No

If yes, investigator confirms the [UMMS COI SYSTEM](#) has been updated and is current.

Principal Investigator: John Doe
Title: Assistant Professor
Sign: 
John Doe (Apr 4, 2016)

Item 14

I agree to the [Terms of Use and Consumer Disclosure](#) of this document

Click to sign

Once the button is clicked, you should receive the following notification in your browser:

You have successfully signed the agreement “Test 123456-John Doe”.

Copies will be e-mailed to all parties.

The responding investigator will also be able to download a copy of the agreement by clicking on the “Download a Copy” button on the webpage.

Once all disclosing investigators have signed, the system will send an email to the sdfi@umassmed.edu mailbox to notify OSP that the eSDFI form is completed.

From: Umass Medical School <echosign@echosign.com> Sent: Mon 4/4/2016 8:47 AM
To: SDFI
Cc:
Subject: Test123456-John Doe between Umass Medical School and John Doe is Signed and Filed!

Message:  Test123456-John Doe - signed.pdf (251 KB)

 Adobe Document Cloud

Send. Sign. Done.

Test123456-John Doe between Umass Medical School and John Doe is Signed and Filed!

From: UMMS Esign (Umass Medical School)
To: UMMS Esign and John Doe

Attached is a final copy of Test123456-John Doe.

Copies have been automatically sent to all parties to the agreement.

You can view [the document](#) in your Adobe Document Cloud account.

Why use Adobe Document Cloud:

- Exchange, Sign, and File Any Document. In Seconds!
- Set-up Reminders. Instantly Share Copies with Others.
- See All of Your Documents, Anytime, Anywhere.

To ensure that you continue receiving our emails, please add echosign@echosign.com to your address book or safe list.

An admin panel has been created for users to view the status of their SDFI forms:

<http://w3.umassmed.edu/ResearchForms/admin>

The admin panel can be queried by department and the following search types: PI Last Name, Proposal ID, or text searched. The panel also allows individuals to query by date range. In the query below, we are searching for OVPR SDFIs for a PI with the last name Doe.

UMASS MEDICAL SCHOOL

Office of Research

Home

SDFI Document Management

SDFI Document Status

Choose your department

Department:

Choose a specialized search, if desired

Search Type:

Search Text:

Choose a range of SDFI Initiation dates, if desired:

BEGIN Date:

END Date:

View List Item 12

When the view list button is clicked (Item 12), it will bring up the detail information of what was queried:

UMASS MEDICAL SCHOOL

Office of Research

Home

Office of the Vice Provost for Research ~ SDFI Documents

There is 1 **Office of the Vice Provost for Research** document for the selection criteria you chose [\(Choose different selection criteria?\)](#)

Project Title: Test of eSDFI Form

Current Status: Signed

Description: This SDFI document, initiated on **04/05/2016**, is from department **Office of the Vice Provost for Research**, has a project type of **Proposal** and is sponsored by **NIH**. The SponsorID is **12345**. The Project runs from **04/01/2016** to **03/31/2017**.

Message:

Principal Investigator: John Doe

Proxy: Diego Vazquez

Disclosers: sdfi@umassmed.edu

Human Subjects?: No

Part C?: yes

SubRecipients: yes

Consultants: No

Collabaorators: No

Others: No

If you require assistance with the eSDFI tool, contact the Office of Sponsored Programs at 508-856-2119 or email sdfi@umassmed.edu.