

May 13, 2025

RE: Cancer Pain Management Symposium: Best Practices and Breakthroughs – Virtual Conference

Dear Potential Representative:

On behalf of **The University of Texas MD Anderson Cancer Center** and **Activity Directors, Saba Javed, MD** and **Dhanalakshmi Koyyalagunta, MD**, we would like to invite you to virtually exhibit at our upcoming **Cancer Pain Management Symposium: Best Practices and Breakthroughs** on **Saturday, November 1, 2025**.

MISSION

MD Anderson's mission is to eliminate cancer in Texas, the nation and the world through exceptional programs that integrate patient care, research, and prevention. Our mission also includes education for undergraduate and graduate students, trainees, professionals, employees, and the public.

VISION

We shall be the premier cancer center in the world, based on the excellence of our people, our research-driven patient care and our science.

OVERVIEW

This activity will advance the understanding and management of cancer-related pain through the dissemination of the latest clinical research, emerging therapies, and evidence-based best practices globally. The goal is to bring together healthcare professionals, researchers, and thought leaders around the world to foster collaboration, innovation, and education. By focusing on personalized, multidisciplinary and interdisciplinary approaches to pain management, we aim to improve the quality of life for cancer patients and provide professionals with the tools to offer compassionate, effective care that addresses both the physical and emotional aspects of cancer pain.

NEEDS ASSESSMENT

Address the disparities in cancer pain management in underserved regions worldwide by bridging existing gaps. Focus on sharing innovative breakthroughs, treatment strategies, and best practices to improve care in these areas. Emphasize the importance of collaboration between healthcare providers, researchers, and global organizations to ensure equitable access to effective pain management solutions. By promoting awareness and knowledge exchange, we can enhance the quality of life for cancer patients in resource-limited settings, reduce suffering, and improve outcomes. This collaborative approach will foster global progress in addressing cancer pain management challenges in underserved communities.

OBJECTIVES

At the conclusion of this educational activity, participants should be able to:

- Implement and integrate the shared content into their local communities, institutions, and patient populations.
- Promote personalized, multidisciplinary approaches to pain management that address both physical and emotional aspects of cancer pain.
- Improve the quality of life for cancer patients by equipping professionals with evidence-based tools and strategies for pain management.
- Foster collaboration and innovation by bringing together healthcare professionals, researchers, and thought leaders to share insights and best practices.
- Disseminate the latest clinical research and emerging therapies in cancer-related pain management to healthcare professionals globally.

TARGET AUDIENCE

This activity should be of interest to physicians, physician associates, nurses (APRN, RN, LVN), students and trainees and any other healthcare professions that specialize in anesthesiology and pain management.

EDUCATIONAL FORMAT

Lecture

ACCREDITATION



In support of improving patient care, The University of Texas MD Anderson Cancer Center is jointly accredited by the Accreditation Council for Continuing Medical Education (ACCME), the Accreditation Council for Pharmacy Education (ACPE), and the American Nurses Credentialing Center (ANCC) to provide continuing education for the healthcare team.

CREDIT DESIGNATIONS

The University of Texas MD Anderson Cancer Center designates this live activity for a maximum of 6.75 *AMA PRA Category 1 Credits™*. Physicians should claim only the credit commensurate with the extent of their participation in the activity.

The University of Texas MD Anderson Cancer Center designates this live activity will award 6.75 Nursing Contact Hour(s) which includes APRN 3.50 Pharmacotherapeutics credit(s).



The University of Texas MD Anderson Cancer Center has been authorized by the American Academy of PAs (AAPA) to award AAPA Category 1 CME credit for activities planned in accordance with AAPA CME Criteria. This activity is designated for 6.25 AAPA Category 1 CME credits. Approval is valid until December 1, 2025. PAs should only claim credit commensurate with the extent of their participation.

Virtual Exhibit Package – \$2,500

- Recognition at the Bronze level
- Two Complimentary Registrations
- Ability to Set-up a Zoom Meeting (attendees can choose to attend during breaks)
- Acknowledgement on the Supporter/Exhibitor Tab
 - Company Name
 - Company Logo
 - Link to Company Website
 - Two Representative Contacts (name, email, and phone)
 - Ability to Post 3 – 6 Product Information (PDFs)

Please let me know if you have any questions or need any additional information for this request. We appreciate your consideration to provide support for this exceptional educational activity.

I look forward to hearing from you soon.

Best,

Cicely A. Simon

Manager, Accreditation and Industry Support
Continuing Professional Education

Before you begin. For guidance related to the purpose of Form W-9, see *Purpose of Form*, below.

Print or type.
See Specific Instructions on page 3.

1 Name of entity/individual. An entry is required. (For a sole proprietor or disregarded entity, enter the owner's name on line 1, and enter the business/disregarded entity's name on line 2.)
The University of Texas MD Anderson Cancer Center

2 Business name/disregarded entity name, if different from above.

3a Check the appropriate box for federal tax classification of the entity/individual whose name is entered on line 1. Check only **one** of the following seven boxes.

☐ Individual/sole proprietor ☐ C corporation ☐ S corporation ☐ Partnership ☐ Trust/estate

☐ LLC. Enter the tax classification (C = C corporation, S = S corporation, P = Partnership) _____
Note: Check the "LLC" box above and, in the entry space, enter the appropriate code (C, S, or P) for the tax classification of the LLC, unless it is a disregarded entity. A disregarded entity should instead check the appropriate box for the tax classification of its owner.

☒ Other (see instructions) **Agency within the Government of the State of Texas**

4 Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3):
Exempt payee code (if any) **3**
Exemption from Foreign Account Tax Compliance Act (FATCA) reporting code (if any) **C**
(Applies to accounts maintained outside the United States.)

3b If on line 3a you checked "Partnership" or "Trust/estate," or checked "LLC" and entered "P" as its tax classification, and you are providing this form to a partnership, trust, or estate in which you have an ownership interest, check this box if you have any foreign partners, owners, or beneficiaries. See instructions ☐

5 Address (number, street, and apt. or suite no.). See instructions.
1515 Holcombe Boulevard

6 City, state, and ZIP code
Houston, TX 77030

7 List account number(s) here (optional)

Requester's name and address (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 instructions for Part I, later. For other entities, it is your employer identification number (EIN). If you do not have a number, see *How to get a TIN*, later.
Note: If the account is in more than one name, see the instructions for line 1. See also *What Name and Number To Give the Requester* for guidelines on whose number to enter.

Social security number
 - -
or
Employer identification number

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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 for Part II, later.

Sign Here
Signature of U.S. person **Omer F. Sultan**
Date **2/11/2025 | 9:47 AM CST**

General Instructions
Section references are to the Internal Revenue Code unless otherwise noted.
Future developments. For the latest information about developments related to Form W-9 and its instructions, such as legislation enacted after they were published, go to www.irs.gov/FormW9.
What's New
Line 3a has been modified to clarify how a disregarded entity completes this line. An LLC that is a disregarded entity should check the appropriate box for the tax classification of its owner. Otherwise, it should check the "LLC" box and enter its appropriate tax classification.

Purpose of Form
An individual or entity (Form W-9 requester) who is required to file an information return with the IRS is giving you this form because they