# CERTIFICATION OF ADOPTION OF THE PATHOLOGY TECHNOLOGY AUSTRALIA CODE OF CONDUCT

On behalf of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (company) I certify that, to the best of my knowledge and at the date of this certification:

* I have read and am familiar with the provisions of the Pathology Technology Australia Code of Conduct 3rd Edition (the Code)
* Our Company requires all officers, employees and representatives to abide by the Code for all interactions involving Healthcare Professionals, as that term is defined in the Code
* Our Company has made a copy of the Code available for viewing and download via our Company’s website
* Our Company has implemented an appropriately tailored effective compliance program related to our interactions with Healthcare Professionals by taking the following steps :

❑ Established and implemented policies and procedures consistent with the provisions of the Code

❑ Maintained effective oversight over the Compliance Program, by nominating an individual with responsibility to actively monitor the Company’s compliance with the Code.

❑ Provided comprehensive training to those employees and representatives who are engaged in activities which are addressed by the Code.

❑ Established a resource for employees to ask questions as well as a reporting mechanism to facilitate internal reporting of suspected violations of Company policies that are based on the Code.

❑ Established a process to respond to suspected deficiencies or violations of Company policies that are based on the Code.

Signed : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 [Pathology Technology Australia Authorised Representative]

Name : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Title : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

*Please print on Company letterhead and forward to* *ea@pathologytechnology.org.au*