

3RD ANNUAL ADVANCES AND UPDATES IN CARDIOVASCULAR DISEASES

FEBRUARY 28, 2026
SAINT LOUIS UNIVERSITY
EDUCATION UNION

PROSPECTUS

Greetings,

We are informing you of an opportunity to support as an exhibitor for the upcoming continuing medical education symposium *3rd Annual Advances and Updates in Cardiovascular Diseases*". The event will take place on Saturday, February 28, 2026 at Saint Louis University South Campus at the Education Union.

The intended audience includes Physicians, Trainees, Advanced Practice Providers, Nurses, Perfusionists, Healthcare Leaders and Medical Students focusing on advances in cardiovascular disease. This will be a great opportunity for learning and networking. The expected attendance is approximately 125-175. We will market this program on a regional scale to not only capture internal but also the Greater St. Louis community and outside states like Kansas, Illinois, Indiana, Iowa, and Arkansas. This activity has been approved for *AMA PRA Category 1 Credit*[™]

The exhibits will be in the exhibit hall (outside the auditorium), and near where breakfast, lunch, and refreshment breaks will be served. Exhibitors should visit our Exhibit Registration Site when they are ready to register and review the information in the prospectus for more details. Please note the Exhibitor Registration is due as soon as your organization has been approved for participation.

We appreciate your support of our program. If you have any questions, please reach out to Ms. Amanda Sain, CME Program Director. (314-977-7401) or myself and we will be happy to discuss.

Sincerely,

Divya Verma, M.D.

Division Chief (Interim) of Cardiology
Associate Professor of Medicine
St. Louis University Medical Center
1008 S Springs Avenue
Ph. 314-617-3286
Div.Verma@slucare.ssmhealth.com

Andrea Whitesides, MBA
Outreach Services – Business Development
SSM Health
Andrea.whitesides@ssmhealth.com
Office: 314-687-6147

3RD ANNUAL ADVANCES AND UPDATES IN CARDIOVASCULAR DISEASES

FEBRUARY 28, 2026

SAINT LOUIS UNIVERSITY EDUCATION UNION | ST. LOUIS, MO

EXHIBIT HALL:

FRIDAY, FEBRUARY 27

SET UP | 3:00 - 5:00 P.M.

SATURDAY, FEBURARY 28

SET UP | 6:30 - 7:00 A.M.

BREAKFAST | 7:00 - 8:00 A.M.

BREAK | 10:30 - 11:00 A.M.

LUNCH | 12:30 - 1:30 P.M.

BREAK | 3:00 - 3:30 P.M.

**Exhibit hours are subject to change*

VENUE:

SAINT LOUIS UNIVERSITY

EDUCATION UNION

1312 CARR LANE

ST. LOUIS, MO 63104

IMPORTANT DATES:

COMPANY LOGO

FEBRUARY 13, 2026

EMAIL TO : CRISTA.ELLIOTTOLSON@HEALTH.SLU.EDU






BADGE NAMES DUE

FEBRUARY 23, 2026

EMAIL TO : CRISTA.ELLIOTTOLSON@HEALTH.SLU.EDU



CONFERENCE RECOGNITION TIERS

	Gold \$6,000	Silver \$4,000
Pre-Conference		
Choice on Table Location	1st	2nd
Recognition on the conference website with logo		
At the Conference		
Exhibitor Rep Badges	3	2
Logo on Exhibit Signage		
Recognition during opening and closing remarks		
Additional Advertisement	1/2 Page Ad in Welcome Folder	
Sponsor signage at the Friday night Keynote Dinner. Representatives attendance included.		

3RD ANNUAL ADVANCES AND UPDATES IN CARDIOVASCULAR DISEASES

SESSIONS INCLUDE:

- SESSION 1 - CORONARY
- SESSION 2 - ELECTROPHYSIOLOGY
- SESSION 3 - STRUCTURAL HEART
- SESSION 4 - CONGESTIVE HEART FAILURE
- SESSION 5 - SHOCK

REGISTER TODAY!



<https://slu.cloud-cme.com/course/courseoverview?P=0&EID=19427>



February 28, 2026
7.00 A.M. - 4:00 P.M.

Registration and breakfast
starts at 7: 00 a.m.

SAINT LOUIS UNIVERSITY
EDUCATION UNION
1312 Carr Lane Ave
St. Louis, MO 63104

This activity has been approved for *AMA PRA Category 1 Credit*TM

Payment Information

Payments can be made online, check or by ACH.

Online

To make your payment online, please visit [3rd Annual Advances and Updates in Cardiovascular Diseases](#) and click on the Exhibitor tab. All major credit cards are accepted.

By check or ACH

Checks should be made payable to the Saint Louis University School of Medicine. Memo should state CME Office.

If an invoice is needed to issue a check or ACH payment, please email the CME office, cme@health.slu.edu.

Our tax ID # is 43-0654872

Checks can be sent by regular mail or by FedEx.

Saint Louis University CME Office

Attn: Amanda Sain

3556 Caroline Mall, C208

St. Louis, MO 63104

Exhibit Rules and Regulations

ACCME Guidelines

No materials promoting the goods and/or services of a commercial entity shall be displayed or distributed in the same room immediately before, during or after an educational activity that is accredited.

Representatives of commercial companies may attend an educational activity but may not engage in sales activities while in the room where the educational activity takes place.

Saint Louis University School of Medicine

We will not share participant names and information in respect of participant privacy. If you wish to have participant information, you may have a sign-in at your table to gather names and contact information.

**Request for Taxpayer
Identification Number and Certification**

Go to www.irs.gov/FormW9 for instructions and the latest information.

**Give form to the
requester. Do not
send to the IRS.**

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.) St. Louis University	
	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. <input type="checkbox"/> Individual/sole proprietor <input type="checkbox"/> C corporation <input type="checkbox"/> S corporation <input type="checkbox"/> Partnership <input type="checkbox"/> Trust/estate <input type="checkbox"/> 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. <input checked="" type="checkbox"/> Other (see instructions) 501 (c)(3)	4 Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3): Exempt payee code (if any) 1 Exemption from Foreign Account Tax Compliance Act (FATCA) reporting code (if any) A (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 <input type="checkbox"/>	
	5 Address (number, street, and apt. or suite no.). See instructions. 3545 Lindell Blvd, 3rd Floor	Requester's name and address (optional)
6 City, state, and ZIP code St. Louis, MO 63103		
7 List account number(s) here (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									
4	3		-	0	6	5	4	8	7 2

Part II Certification

Under penalties of perjury, I certify that:

- 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
- 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
- I am a U.S. citizen or other U.S. person (defined below); and
- 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 	Date January 7, 2025
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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.

New line 3b has been added to this form. A flow-through entity is required to complete this line to indicate that it has direct or indirect foreign partners, owners, or beneficiaries when it provides the Form W-9 to another flow-through entity in which it has an ownership interest. This change is intended to provide a flow-through entity with information regarding the status of its indirect foreign partners, owners, or beneficiaries, so that it can satisfy any applicable reporting requirements. For example, a partnership that has any indirect foreign partners may be required to complete Schedules K-2 and K-3. See the Partnership Instructions for Schedules K-2 and K-3 (Form 1065).

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