

Subscribe to UpToDate® at our special trainee group price.

Groups of 10 or more will receive a discount on their subscription price. Simply follow these four easy steps...

Step 1- Organize a group of medical students (trainees), residents, or fellows in your institution to subscribe together. Determine whether you qualify for a discount based on the size of your group (see pricing below*).

Number of individuals in group	UpToDate Online subscription cost (per subscriber)		One-year UpToDate MobileComplete™† (per subscriber) (One-year: US \$49) (Two-year: US \$89)	One-year UpToDate® Advanced* (per subscriber) (One-year: US \$49) (Two-year: US \$89)
	One-year	Two-year		
1-9	US \$199 <i>(savings of \$320)</i>	US \$369 <i>(savings of \$560)</i>	US \$49	US \$49
10+	US \$159 <i>(savings of \$360)</i>	US \$299 <i>(savings of \$630)</i>	US \$49	US \$49

*Prices are subject to change without notice. Quoted savings are based on a one-year professional subscription price of \$519 and a two-year price of \$929. UpToDate MobileComplete and/or UpToDate Advanced can be added to Individual Online subscriptions for an additional fee. UpToDate MobileComplete and UpToDate Advanced are not available as standalone products.

Step 2- Have each individual within your group complete the **Trainee Group Member Subscription Form (A)**, see reverse). Make sure each form includes complete payment information. If you are subscribing individually versus part of a group, you will need to provide proof of status with your order (see details below).

Step 3- Complete the **Trainee Group Order Verification (B)** and the **Trainee Group Order Summary Form (C)**. In order to qualify for these trainee group rates, all individual trainee orders and payments must be received together.

Step 4- Collect and submit all of the following forms:

- Trainee Group Member Subscription Forms (A)** – one for each individual trainee subscribing
- Trainee Group Order Verification (B)** – one per group
- Trainee Group Order Summary Form (C)** – one per group

Mail: UpToDate, 230 Third Avenue, Waltham, MA 02451 USA

Fax: 781-642-8840

Definition of "Medical Student/Medical Trainee," "Resident," and "Fellow"

(includes Nurse Practitioners and Physician Assistant Trainees)

Medical Student/Trainee: Any student enrolled in a program of basic medical education under the faculty of medicine at a university or medical college.

Resident or Fellow: Pre-registrant: any postgraduate doctor who has completed medical education at the university level and is participating in an "internship," "turnus," "pre-registration," or equivalent period.** Specialist trainee: Any doctor pursuing postgraduate, post-internship (where applicable) specialist training under the supervision of a clinical department head at a recognized teaching hospital.

***"Internship," "turnus," and "pre-registration" are intended to be general terms. The name for this stage of training may differ from country to country. It denotes the period in which a physician is not yet fully qualified to work independently and therefore works under the supervision of senior colleagues.

Proof of Trainee Status

If subscribing as a group, the signature of verification from a Program Director, Chief of Service, or Dean's Representative on Trainee Group Order Form B serves as proof of trainee status.

Students, residents, and fellows (trainees) must provide at least one of the items below as proof of their trainee status.

- Signed, dated letter from the director of your program on letterhead from the institution stating that you are currently in medical training and in good standing
- Copy of the first and last page of your current contract indicating your medical trainee status and date
- Legible copy of an ID badge bearing your name, medical trainee status designation, and future expiration date

We must receive your proof of status before we can process your order. If your proof of status is not received within 30 days of the receipt of your order, your order will not be processed and will need to be resubmitted.

Trainee Group Member Subscription Form

Valid through August 31, 2019

Medical Student | Medical Trainee | Resident or Fellow

Submit to your group contact for trainee verification. See instructions for definitions and proof of status.

Trainee subscriptions do not offer CME/CPD credit.

ENTER SUBSCRIBER INFORMATION

GROUP NAME _____

SUBSCRIBER NAME _____

SUBSCRIBER ADDRESS _____

CITY _____ STATE/PROVINCE _____

COUNTRY _____ POSTAL CODE _____

EMAIL _____ SPECIALTY _____

OFFICE PHONE _____ MOBILE PHONE _____

A secure email address is required for account access. We do not rent, share, or sell information to third parties.

REVIEW SUBSCRIPTION INFORMATION

Ask your group coordinator your group size so you know which subscription price you are eligible for (see pricing below*).

Number of individuals in group	UpToDate Online subscription cost (per subscriber)		UpToDate MobileComplete™† (per subscriber)		UpToDate® Advanced* (per subscriber)	
	One-year	Two-year	One-year	Two-year	One-year	Two-year
1-9	US \$199	US \$369	US \$49	US \$89	US \$49	US \$89
10+	US \$159	US \$299	US \$49	US \$89	US \$49	US \$89

* Prices are subject to change without notice.

SELECT SUBSCRIPTION OPTION

30-day recurring billing option is also available in select countries for non-group orders. All recurring billing orders must be placed online; terms and conditions apply. Please go to www.uptodate.com/store to order.

UpToDate MobileComplete and/or UpToDate Advanced can be added to Individual Online subscriptions for an additional fee.

UpToDate MobileComplete and UpToDate Advanced are not available as standalone products.

ORDER TYPE:	<input type="radio"/> NEW <input type="radio"/> RENEWAL (Account # _____)
ENTER SUBSCRIPTION AMOUNT FOR SELECTED TERM (all must be the same)	US \$ _____
ADD MOBILECOMPLETE (+ \$49 1-YEAR OR + \$89 2-YEAR — must match subscription term)†	+ US \$ _____
ADD UPTODATE ADVANCED (+ \$49 1-YEAR OR + \$89 2-YEAR — must match subscription term)‡	+ US \$ _____
ESTIMATED SALES TAX, VAT, AND GST§	+ US \$ _____
ESTIMATED ORDER TOTAL	= US \$ _____

† Please go to www.uptodate.com/mobile for current information on supported devices.

‡ Please go to go.uptodate.com/advanced for additional information.

§ Applicable tax will be added at the time your order is processed. UpToDate collects sales tax in US states that require it for online purchases. If you are eligible for tax-exempt status on this order, you must supply your tax-exempt certificate with this form. The tax exemption cannot be applied at a later date. UpToDate is required to collect and remit VAT, sales tax, and GST in select countries. Tax will be added to your order at time of processing, if applicable.

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For system requirements, go to www.uptodate.com/home/help-manual-sysreq.

Proof of trainee status must accompany order.

PROVIDE PAYMENT INFORMATION

Full payment with check or credit card is required at the time of order. If you are not completely satisfied with your annual (or longer) subscription, simply cancel within 60 days and request a full refund (issued in US dollars).

ENCLOSED IS PAYMENT FROM MY INSTITUTION (MY INSTITUTION IS ISSUING ONE PAYMENT FOR THE GROUP ORDER)

For wire transfer information, visit www.uptodate.com/home/payment-options.

CHECK ENCLOSED (Payable to UpToDate in US dollars drawn on US bank)

CREDIT CARD BILLING ADDRESS (if different from primary address)

CHARGE MY CREDIT CARD (Please select one.)

VISA MASTERCARD

NAME _____

DISCOVER AMERICAN EXPRESS

ADDRESS _____

CARD NUMBER _____

EXPIRATION DATE _____

CITY _____ STATE _____

SIGNATURE _____

COUNTRY _____ POSTAL CODE _____

Trainee Group Order Verification

Valid through August 31, 2019

Medical Student | Medical Trainee | Resident or Fellow

This form is to be submitted by the program director or designee for group orders only.

Trainee subscriptions do not offer CME/CPD credit.

GROUP NAME _____

CONTACT NAME _____

Attached are subscription orders for the following individuals who are members of this group.

All individual orders and payments MUST be submitted together with this form to qualify for the special pricing and additional discount if applicable.

SUBSCRIBER NAMES: **SUBSCRIBER SPECIALTY:** **MobileComplete™ UpToDate® Advanced**
 Check box below to include with subscription.

1.	_____	_____	_____
2.	_____	_____	_____
3.	_____	_____	_____
4.	_____	_____	_____
5.	_____	_____	_____
6.	_____	_____	_____
7.	_____	_____	_____
8.	_____	_____	_____
9.	_____	_____	_____
10.	_____	_____	_____
11.	_____	_____	_____
12.	_____	_____	_____
13.	_____	_____	_____
14.	_____	_____	_____
15.	_____	_____	_____
16.	_____	_____	_____
17.	_____	_____	_____
18.	_____	_____	_____
19.	_____	_____	_____
20.	_____	_____	_____
21.	_____	_____	_____
22.	_____	_____	_____
23.	_____	_____	_____
24.	_____	_____	_____
25.	_____	_____	_____

For additional names, please photocopy, complete, and attach to this form.

Trainee Status Verification

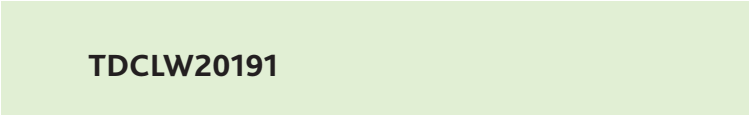
(MUST be verified by one of the following)

I attest that the above-named subscribers are all clinicians-in-training within this institution's training program.

- PROGRAM DIRECTOR CHIEF OF SERVICE DEAN'S REPRESENTATIVE

SIGNED _____ DATE _____

PRINT NAME _____ TITLE _____



Trainee Group Order Summary Form
 Valid through August 31, 2019
 Medical Student | Medical Trainee | Resident or Fellow
Trainee subscriptions do not offer CME/CPD credit.

ENTER GROUP INFORMATION

GROUP NAME _____

CONTACT NAME _____

CONTACT ADDRESS _____

CITY _____ STATE/PROVINCE _____

COUNTRY _____ POSTAL CODE _____

OFFICE PHONE _____ MOBILE PHONE _____

EMAIL _____

A secure email address is required for account access. We do not rent, share, or sell information to third parties.

CALCULATE GROUP PAYMENT

*UpToDate MobileComplete™ and/or UpToDate® Advanced can be added to Individual Online subscriptions for an additional fee. UpToDate MobileComplete and UpToDate Advanced are not available as standalone products.

Group size (Select one)	A UpToDate Online Subscription cost*		B UpToDate MobileComplete†	C UpToDate Advanced‡	D Sales Tax§, VAT, GST	E Total cost per subscriber (A + B + C + D)	F Total number of subscribers	Grand total (E x F)
	One-year	Two-year	(One-year: US \$49) (Two-year: US \$89)	(One-year: US \$49) (Two-year: US \$89)				
1-9	US \$199	US \$369	US \$ _____	US \$ _____	US \$ _____	US \$ _____	_____	US \$ _____
10+	US \$159	US \$299	US \$ _____	US \$ _____	US \$ _____	US \$ _____	_____	US \$ _____

*Prices are subject to change without notice.

†Please go to www.uptodate.com/mobile for current information on supported devices.

‡Please go to go.uptodate.com/advanced for additional information.

§Applicable tax will be added at the time your order is processed. UpToDate is required to collect and remit sales tax, VAT, and GST where required for online purchases. If you are eligible for tax-exempt status on this order, you must supply your tax-exempt certificate with this form. The tax exemption cannot be applied at a later date.

For system requirements, go to www.uptodate.com/home/help-manual-sysreq.

Proof of trainee status must accompany order.

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PROVIDE PAYMENT INFORMATION

Individual payments: If each participant is paying individually, valid credit card information or a check in US dollars made **payable to UpToDate** and drawn on a US bank must be included with each **Trainee Group Member Subscription Form (A)**.

OR

Institutional payment: If the institution is paying for the order, please make sure that the "ENCLOSED IS PAYMENT FROM MY INSTITUTION" box is checked on each **Trainee Group Member Subscription Form (A)** and complete the payment section below. For wire transfer information, visit www.uptodate.com/home/payment-options.

CHECK ENCLOSED (Payable to UpToDate in US dollars drawn on US bank)

CHARGE MY CREDIT CARD (Please select one.)

- VISA MASTERCARD
 DISCOVER AMERICAN EXPRESS

CARD NUMBER _____

EXPIRATION DATE _____

SIGNATURE _____

CREDIT CARD BILLING ADDRESS (if different from primary address)

NAME _____

ADDRESS _____

CITY _____ STATE _____

COUNTRY _____ POSTAL CODE _____