In endocrinology, you need advice from certified endocrinologists, as well as other specialists who can provide additional perspectives. Telehealth shifts during the COVID-19 pandemic have created new opportunities for patients to access care without leaving their homes. This has led to a rapid increase in the use of telehealth services, especially for patients with chronic conditions such as diabetes.

Successful telehealth requires more than a laptop, according to Matthew J. Holland, MD, chief commercial officer, and Christine Martynick, vice president of business development at Healio. "We went from 100% in-person visits to 97% telehealth visits in a matter of 2 weeks," Holland said.

Holland and Martynick noted that telehealth can be especially beneficial for patients with chronic conditions, such as diabetes, as it allows them to have regular check-ins with their doctors without having to travel. However, telehealth also has its challenges, including the need for patients to have access to technology and the potential for technical issues to disrupt appointments.

"We have found that patients who are older or have other health conditions are more likely to struggle with telehealth," Holland said. "We have to be creative and find ways to make it work for them."

Martynick added that telehealth can be particularly helpful for patients who live in rural areas or have transportation challenges. "For many patients, telehealth is the only way they can access care," she said.

Holland and Martynick noted that telehealth has also been used to support patients with acute conditions, such as diabetes emergencies. "Telehealth can be a lifeline for patients who are unable to travel to the hospital," Holland said.

Despite the challenges, telehealth has the potential to revolutionize healthcare delivery, according to Holland and Martynick. "Telehealth is here to stay," Holland said. "It will continue to evolve and improve as we learn more about how to use it effectively."
DISCOUNTS

1. Combined Earned Frequency Discount: All insertions of a parent company and its subsidiaries are combined to determine the earned frequency rate. Advertisers may combine advertisements run in all Healio and SLACK publications to achieve maximum frequency.

2. New Advertiser/Product Incentive: New product advertisers with a minimum 3 ad commitment receive a 10% discount off all advertising placed in 2021. This discount may not be combined with the Continuity Discount. To qualify, the advertisement must be for:
   a) Product that has not advertised in ENDOCRINE TODAY in the past calendar year
   b) New indication for a currently advertised product in ENDOCRINE TODAY

3. Continuity Incentive: Advertisements for an individual product are eligible for a discount based upon the number of issues in which they advertise. Issue insertions do not need to be consecutive. This program may not be combined with the New Advertiser Discount.
   a) 6 issues = 10% off
   b) 12 issues = 15% off

4. Prescribing Information Discount: B&W prescribing information (PI) pages are eligible for the following discount. The 3rd page of PI and after may take a 50% discount off the earned rate.

5. Clinical Trial Ad Buy One, Get One Free: Clinical trial advertisements may run a second insertion of the same ad unit in any issue for no charge. Ad creative must promote participation in a current clinical trial. Corporate and/or disease state advertisements are not eligible. May not be combined with other Continuity, Free Ad or New Advertiser Discounts.

6. Multichannel Program: Custom multichannel programs are available that meet your specific advertising needs. Contact your Sales Representative to discuss options.

7. Corporate Discount: Total net spend achieved in the year 2021 will set a Corporate Discount to be taken off 2022 advertising.

8. When taking advantage of more than one discount program, discounts must be taken in the following order: Gross Cost:
   a) Less New Advertiser/Product or Continuity Incentive
   b) Less Healio Strategic Solutions Corporate Discount
   c) Less 15% Agency Discount

      Equals net cost

ISSUANCE AND CLOSING

1. Established: February 2003
2. Frequency: 12 times per year
3. Issue Dates: 25th of the month of issue
4. Mailing Dates & Class: Mails within the issue month; Periodical Class.
5. Extensions and Cancellations:
   a) Extensions: If an extension date for material is agreed upon and material is not received by the Publisher on the agreed date, the advertiser will be charged for the space reserved.
   b) Cancellations: If, for any reason, an advertisement is canceled after the closing date, the Publisher reserves the right to repeat a former ad at full rates. If the advertiser has not previously run an ad, the advertiser will be charged for the cost of space reserved. Neither the advertiser nor its agency may cancel advertising after the closing date.

EDITORIAL

1. General Editorial Direction: ENDOCRINE TODAY is the first clinical newspaper that addresses the latest information on diabetes and endocrine disorders. It reports clinical news with expert perspective and features of interest to Endocrinologists, Diabetes Educators and IIs. From timely meeting coverage and the latest drug approvals to special features on growth hormones, pituitary tumors and information about legislative and socioeconomic topics, ENDOCRINE TODAY reports the news with expert perspective about what the news means to clinical practice.

2. Average Issue Projection:
   a) Average Number of Articles per Issue: 30
   b) Editorial Sections:
      - Diabetes
      - Metabolism
      - Pediatric Endocrinology
      - Thyroid
      - Cardiometabolic Disorders
      - Hormone Therapy
      - Bone and Mineral Metabolism
      - Neuroendocrinology
      - Adrenal
      - Reproduction
      - Androgen Disorders
      - Meeting Highlights
      - In the Journals
      - New Drug Approvals

3. Origin of Editorial:
   a) Staff written: 90%
   b) Solicited: 5%
   c) Submitted: 5%
   d) Articles or abstracts from meetings: 65%
   e) Peer review: No, meetings that are covered are in harmony with the policy of service to the healthcare profession and subject to Publisher’s approval. Non-professional product and service advertisers must submit ad copy two weeks prior to the closing date.

4. Date and source of breakdown: BPA Worldwide, July 2020

5. Total estimated circulation for 2021: 17,197

CIRCULATION

1. Description of Circulation Parameters:
   a) Endocrinologists
   b) Primary Diabetes
   c) Internal Medicine, General Practitioner, Family Practice, Prescribing Diabetes RXs
   d) Pediatric Endocrinologists
   e) Diabetes Educators
   f) Endocrine Physician Assistants

2. Demographic Selection Criteria:
   a) Prescribing: Yes
   b) Circulation Distribution: Controlled: 100%
   c) Paid Information: Association members:
      - Is publication received as part of dues? No
   d) Subscription rates:
      - U.S.: $411/yr. individual Canada: add 5% tax/yr.
      - Outside the U.S.: add $92/yr.

3. Circulation Verification:
   a) Audit: BPA Worldwide
   b) Mailing House: LSC Communications

4. Requirements for Advertising Acceptance:
   - Advertisements for professional and non-professional products or services are accepted provided they are in harmony with the policy of service to the healthcare profession and subject to Publisher’s approval. Non-professional product and service advertisers must submit ad copy two weeks prior to the closing date.

5. New Product Releases: Yes

6. Editorial Research: Yes

7. Ad Format and Placement Policy:
   a) Format: Within articles

8. Value-Added Services:
   a) Bonus Convention Distribution: See Editorial Calendar
   b) Other: Advertiser’s Index

9. Online Advertising Opportunities: Contact your sales representative for more information.

10. Additional Advertising Opportunities:
    a) BRC inserts: See 5b under Insert Information for specifications.
    b) Split-run advertising: Contact publisher for information.

11. Reprints: Yes. Email: scsreprints@sheridan.com.
AD SPECIFICATIONS

1. Available Advertising Unit Sizes:

<table>
<thead>
<tr>
<th>Ad sizes:</th>
<th>Non-bleed (Live area) sizes:</th>
<th>Trim sizes:</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Width x Height</td>
<td>Width x Height</td>
</tr>
<tr>
<td>King Spread</td>
<td>20.5” x 13.5”</td>
<td>21” x 14”</td>
</tr>
<tr>
<td>King Page</td>
<td>10” x 13.5”</td>
<td>10.5” x 14”</td>
</tr>
<tr>
<td>¾ Page (Vertical)</td>
<td>7.05” x 13.5”</td>
<td>7.55” x 14”</td>
</tr>
<tr>
<td>¾ Page (Horizontal)</td>
<td>10” x 10”</td>
<td>10.5” x 10.5”</td>
</tr>
<tr>
<td>Island ½ Page</td>
<td>7.13” x 10”</td>
<td>7.63” x 10.5”</td>
</tr>
<tr>
<td>Island Spread</td>
<td>14.6” x 10”</td>
<td>15.1” x 10.5”</td>
</tr>
<tr>
<td>½ Page (Vertical)</td>
<td>4.68” x 13.5”</td>
<td>5.18” x 14”</td>
</tr>
<tr>
<td>½ Page (Horizontal)</td>
<td>10” x 6.5”</td>
<td>10.5” x 7.0”</td>
</tr>
<tr>
<td>½ Page (Vertical Block)</td>
<td>4.68” x 6.25”</td>
<td>5.18” x 6.75”</td>
</tr>
<tr>
<td>½ Page (Horizontal Block)</td>
<td>7.13” x 4.75”</td>
<td>7.63” x 5.25”</td>
</tr>
<tr>
<td>¼ Page (Vertical Strip)</td>
<td>2.23” x 13.5”</td>
<td>2.73” x 14”</td>
</tr>
<tr>
<td>¼ Page (Horizontal Strip)</td>
<td>10” x 3”</td>
<td>10.5” x 3.5”</td>
</tr>
<tr>
<td>¼ Page (Vertical Block)</td>
<td>2.23” x 6.25”</td>
<td>2.73” x 6.75”</td>
</tr>
<tr>
<td>¼ Page (Horizontal Block)</td>
<td>4.68” x 2.84”</td>
<td>5.18” x 3.34”</td>
</tr>
</tbody>
</table>

a) Trim size of journal: 10.5” x 14”
b) To view thumbnails of ads specs, visit healio.com/adspecs
For spread ads, keep content (images/text) ¼” in on each side of the gutter
For bleed ads, add ¼” on all sides of trim size.

2. Type of Binding: Saddle-stitch or Perfect bound

3. Print Ad Requirements: For specifications, go to: healio.com/adspecs

Color Proofs: One proof made from supplied files and meeting SWOP specifications, must be provided with data file. Proof must be at 100% of the print size. Publisher accepts Kodak approvals, Matchprints, Chromalins, High-end Epson Quality or Iris Digital proofs.

If only color lasers are furnished, color match on press cannot be guaranteed.

Note: Spread ads should be sent as a one-page file.

Ad File Submission:Electronic files must be submitted as a high-resolution, print ready PDF. Minimum 300 dpi. Ads are accepted on CD/DVD, via email or uploaded to the Healio Strategic Solutions ftp site. Contact the sales administrator for ftp instructions.

4. Disposition of Ad Material: Ad materials will be held one year from date of last insertion and then destroyed unless notified otherwise in writing.

INSERT INFORMATION

1. Availability and Acceptance:
   a) Availability: Two- to eight-page inserts are available full run. Demographic and/or geographic inserts are limited to three per issue.
   b) Acceptance: A paper and insert sample must be submitted to the Publisher for approval.

2. Insert Charges: Furnished inserts billed at the earned black-and-white-space rate. Commissionable.

3. Sizes and Specifications:

<table>
<thead>
<tr>
<th>No. of Pages</th>
<th>Paper Stock</th>
<th>Max Micrometer Reading</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Max</td>
<td>Min</td>
</tr>
<tr>
<td>2 page (one leaf)</td>
<td>80# coated text</td>
<td>70# coated text</td>
</tr>
<tr>
<td>4, 6, 8 page</td>
<td>70# coated text</td>
<td>60# coated text</td>
</tr>
</tbody>
</table>

a) Full size inserts: supplied untrimmed, printed, folded (except single leaf), and ready for binding. Varnished inserts are acceptable at the Publisher’s discretion.

b) A-size: Supply size: 8¾” x 11” pre-trimmed on head and face. ¾” foot and gutter grind.

4. Trimming: Trimming of oversized inserts will be charged at cost. Keep live matter ½” from trim edges and ¾” from gutter trim. Inserts are jogged to the foot. Book trims ½” at head face and foot.

5. BRCs:
   a) Pricing: Contact your Sales Representative for prices.
   b) BRC Specifications: 3½” x 5” minimum to 4½” x 6” maximum; perforated with ½” lip (from perforation) for binding. Add ¼” for foot trim. Cardstock minimum: 75# bulk or higher.

6. Quantity: Full run − 20,000. Exact quantity will be given upon Publisher’s approval of insert or call Publisher prior to closing date.

7. Shipping: Carton packing must have publication name, issue date, and insert quantity clearly marked. Inserts shipped in e-containers cannot be verified and Healio Strategic Solutions will not be responsible for shortages on press. Make sure all pieces are oriented the same way in the carton (all facing the same direction). Do not include slip sheets in between pieces or shrink wrap in bundles. Additional costs will be incurred if hand work is necessary to remove slip sheets and/or shrink wrapping.
## Editorial Calendar

<table>
<thead>
<tr>
<th>Issue</th>
<th>Ad Closing</th>
<th>Material Due</th>
<th>Featured Topics</th>
<th>Meeting Coverage</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td>National Lipid Association</td>
</tr>
<tr>
<td>February</td>
<td>1/6/2021</td>
<td>1/19/2021</td>
<td>Pituitary Update</td>
<td></td>
</tr>
<tr>
<td>March</td>
<td>2/5/2021</td>
<td>2/18/2021</td>
<td>Type 1 Diabetes</td>
<td></td>
</tr>
<tr>
<td>April</td>
<td>3/5/2021</td>
<td>3/19/2021</td>
<td>Women’s Health/Menopause</td>
<td>ENDO</td>
</tr>
<tr>
<td>May</td>
<td>4/5/2021</td>
<td>4/20/2021</td>
<td>Diabetes and Liver Disorders</td>
<td></td>
</tr>
<tr>
<td>June</td>
<td>5/6/2021</td>
<td>5/20/2021</td>
<td>Obesity</td>
<td>American College of Cardiology</td>
</tr>
<tr>
<td>August</td>
<td>7/7/2021</td>
<td>7/21/2021</td>
<td>Thyroid Disorders</td>
<td>American Diabetes Association</td>
</tr>
<tr>
<td>September</td>
<td>8/6/2021</td>
<td>8/20/2021</td>
<td>Men’s Health</td>
<td>Association of Diabetes Care and Education Specialists</td>
</tr>
<tr>
<td>October</td>
<td>9/7/2021</td>
<td>9/20/2021</td>
<td>Type 2 Diabetes Therapies</td>
<td>North American Menopause Society</td>
</tr>
<tr>
<td>November</td>
<td>10/6/2021</td>
<td>10/21/2021</td>
<td>Cardiometabolic and Renal Disorders</td>
<td>European Association for the Study of Diabetes</td>
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<tr>
<td></td>
<td></td>
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<td></td>
<td>American Thyroid Association</td>
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<td></td>
<td></td>
<td>American Society of Bone and Mineral Research</td>
</tr>
<tr>
<td>December</td>
<td>11/4/2021</td>
<td>11/19/2021</td>
<td>Osteoporosis Updates</td>
<td>Cardiometabolic Health Congress</td>
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<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td>Obesity Week</td>
</tr>
</tbody>
</table>

Note: Editorial content subject to change