

## Code of Conduct Acknowledgment

By signing the acknowledgment box below, I attest that I have received the BID-Milton Code of Conduct. I acknowledge that I have read and will abide by the BID-Milton Code of Conduct. I agree to comply by all pertinent laws, regulations, and BID-Milton policies and procedures. I will report any real or potential compliance-related concerns to my manager, chief, the Compliance Officer at (617) 313-1287 or to the Confidential and Anonymous Compliance Helpline at 1-888-753-6533 or:

By writing the Confidential and Anonymous Compliance Helpline via website at:  
<https://secure.ethicspoint.com/domain/media/en/gui/38883/index.html> or  
Beth Israel Deaconess Hospital – Milton, Office of Compliance  
199 Reedsdale Road  
Milton MA 02186

X \_\_\_\_\_ Date: \_\_\_\_/\_\_\_\_/\_\_\_\_  
Signature Print Name

**Employee Instructions:** Please review and sign this *Acknowledgments and Agreement Form* along with the *Confidentiality Policy and Statement*. **Human Resources Instructions:** Please retain this form in the personnel file.