

**American College of Physicians  
Department of Clinical Policy  
Disclosure of Interests: Summary Report**

Name: George M Abraham, MD, MPH, FACP

Role:

- ☐ Clinical Guidelines Committee      ☐ ACP Staff or Leadership  
☐ Performance Measurement Committee      ☐ Guest  
☒ High Value Care Committee

<b>ACTIVE (Current)</b>	<b><i>Belongs to</i></b>	<b>Description including amount of value or income</b>			
<b>Employment</b>	<i>Self</i>	Partners in Internal Medicine, PC	--	+	-
	<i>Other</i>	Saint Vincent Hospital	--	+	-
<b>Research &amp; Consulting Support</b>	<i>Self</i>	Malpractice case review - standards of care for general internal medicine or infectious disease	\$10,001 – 50,000	+	-
	<i>Other</i>	None	--	+	-
<b>Investment &amp; Proprietary Interests</b>	<i>Self</i>	None	--	+	-
	<i>Other</i>	None	--	+	-
<b>Committees, Workgroups, &amp; Advisory Roles</b>	<i>Self</i>	ABIM Infectious Disease Board	\$1,001 – 5,000	+	-
	<i>Other</i>	None	--	+	-
<b>Other Interests</b>	<i>Self</i>	None	--	+	-
	<i>Other</i>	None	--	+	-

**In the last 3 years, have you or any close relations published on any of the following topic areas?**  
Please include both peer-reviewed and non-peer-reviewed sources (e.g. newspaper op-ed; blog)

Imaging modalities for evaluation of hematuria ☐ Yes ☒ No

For staff use: ADD NEW RESET

<b>INACTIVE (Last 3 years)</b>	<b><i>Belongs to</i></b>	<b>Description including amount of value or income</b>			
<b>Employment</b>	<i>Self</i>	None	--	+	-
	<i>Other</i>	None	--	+	-
<b>Research &amp; Consulting Support</b>	<i>Self</i>	None	--	+	-
	<i>Other</i>	None	--	+	-
<b>Investment &amp; Proprietary Interests</b>	<i>Self</i>	None	--	+	-
	<i>Other</i>	None	--	+	-
<b>Committees, Workgroups, &amp; Advisory Roles</b>	<i>Self</i>	Massachusetts Medical Society (member)	\$0	+	-
	<i>Other</i>	None	--	+	-
<b>Other Interests</b>	<i>Self</i>	None	--	+	-
	<i>Other</i>	None	--	+	-

## DECLARATION

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**I certify that to my knowledge and belief that I have disclosed my financial and non-financial interests above and I will promptly disclose any changes.**

George M. Abraham, MD, MPH, FACP

Digitally signed by George M. Abraham, MD, MPH, FACP  
Date: 2017.10.20 10:45:03 -04'00'

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Signature

Date

## RELEVANT PUBLICATIONS

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**Copy and paste into box below or send as attachment.**

**American College of Physicians  
Department of Clinical Policy  
Disclosure of Interests: Summary Report**

Name: Robert M. Centor, MD, MACP

Role:

- ☐ Clinical Guidelines Committee
 ☐ ACP Staff or Leadership  
☒ Performance Measurement Committee
 ☐ Guest  
☒ High Value Care Committee

<b>ACTIVE (Current)</b>		<b>Belongs to</b>	<b>Description including amount of value or income</b>		
<b>Employment</b>	<i>Self</i>	Birmingham VA Hospital	--	+	-
	<i>Other</i>	Valley Foundation	--	+	-
<b>Research &amp; Consulting Support</b>	<i>Self</i>	Diatherix, designing a clinical study of their new product for diagnosing bacterial infection in sore throats	\$0	+	-
	<i>Other</i>	None	--	+	-
<b>Investment &amp; Proprietary Interests</b>	<i>Self</i>	None	--	+	-
	<i>Other</i>	None	--	+	-
<b>Committees, Workgroups, &amp; Advisory Roles</b>	<i>Self</i>	MDCalc Advisory Board (member)	\$0	+	-
	<i>Other</i>	None	--	+	-
<b>Other Interests</b>	<i>Self</i>	None	--	+	-
	<i>Other</i>	None	--	+	-

**In the last 3 years, have you or any close relations published on any of the following topic areas?**  
Please include both peer-reviewed and non-peer-reviewed sources (e.g. newspaper op-ed; blog)

☐ Yes ☐ No

For staff use:

ADD NEW

RESET

**INACTIVE (Last 3 years)**

		<b>Belongs to</b>	<b>Description including amount of value or income</b>		
<b>Employment</b>	<i>Self</i>	University of Alabama at Birmingham	--	+	-
	<i>Other</i>	None	--	+	-
<b>Research &amp; Consulting Support</b>	<i>Self</i>	Provided expert opinion for malpractice case related to sore throats	\$1,001 – 5,000	+	-
		Diatherix, gave speech related to sore throats	Up to \$1,000	+	-
	<i>Other</i>	None	--	+	-
<b>Investment &amp; Proprietary Interests</b>	<i>Self</i>	None	--	+	-
	<i>Other</i>	None	--	+	-
<b>Committees, Workgroups, &amp; Advisory Roles</b>	<i>Self</i>		--	+	-
	<i>Other</i>	None	--	+	-
<b>Other Interests</b>	<i>Self</i>	None	--	+	-
	<i>Other</i>	None	--	+	-

## DECLARATION

I certify that to my knowledge and belief that I have disclosed my financial and non-financial interests above and I will promptly disclose any changes.

Robert M. Cento MD, MACP

11-15-17

Signature

Date

## RELEVANT PUBLICATIONS

Copy and paste into box below or send as attachment.

**American College of Physicians  
Department of Clinical Policy  
Disclosure of Interests: Summary Report**

Name: Douglas M. DeLong, MD, FACP

Role:

- ☐ Clinical Guidelines Committee      ☐ ACP Staff or Leadership  
☐ Performance Measurement Committee      ☐ Guest  
☒ High Value Care Committee

ACTIVE (Current)	Belongs to	Description including amount of value or income		
<b>Employment</b>	<i>Self</i>	Bassett Healthcare	\$100,001 or more	+ -
	<i>Other</i>	None	--	+ -
<b>Research &amp; Consulting Support</b>	<i>Self</i>	None	--	+ -
	<i>Other</i>	None	--	+ -
<b>Investment &amp; Proprietary Interests</b>	<i>Self</i>	None	--	+ -
	<i>Other</i>	None	--	+ -
<b>Committees, Workgroups, &amp; Advisory Roles</b>	<i>Self</i>	New York Medicaid Basic Benefit Review Committee (member)	--	+ -
	<i>Other</i>	None	--	+ -
<b>Other Interests</b>	<i>Self</i>	ACP Leadership day (participant)	--	+ -
		NYACP advocacy day (participant)	--	+ -
		Medical Society of the State of New York (member)	--	+ -
	<i>Other</i>	None	--	+ -

In the last 3 years, have you or any close relations published on any of the following topic areas?  
Please include both peer-reviewed and non-peer-reviewed sources (e.g. newspaper op-ed; blog)

Imaging modalities for evaluation of hematuria ☐ Yes ☒ No

For staff use: ADD NEW RESET

**INACTIVE (Last 3 years)** *Belongs to* Description including amount of value or income

<b>Employment</b>	<i>Self</i>	None	--	+ -
	<i>Other</i>	None	--	+ -
<b>Research &amp; Consulting Support</b>	<i>Self</i>	None	--	+ -
	<i>Other</i>	None	--	+ -
<b>Investment &amp; Proprietary Interests</b>	<i>Self</i>	None	--	+ -
	<i>Other</i>	None	--	+ -
<b>Committees, Workgroups, &amp; Advisory Roles</b>	<i>Self</i>	None	--	+ -
	<i>Other</i>	None	--	+ -
<b>Other Interests</b>	<i>Self</i>	None	--	+ -
	<i>Other</i>	None	--	+ -

## DECLARATION

I certify that to my knowledge and belief that I have disclosed my financial and non-financial interests above and I will promptly disclose any changes.

Signature



Date



## RELEVANT PUBLICATIONS

Copy and paste into box below or send as attachment.

**American College of Physicians**  
**Department of Clinical Policy**  
**Disclosure of Interests: Summary Report**

Name: Carrie Horwitch, MD, MPH, FACP

Role:

- ☒ Clinical Guidelines Committee      ☐ ACP Staff or Leadership  
☐ Performance Measurement Committee      ☐ Guest  
☒ High Value Care Committee

ACTIVE (Current)	Belongs to	Description including amount of value or income			
Employment	Self	Virginia Mason Medical Center	--	+	-
	Other	None	--	+	-
Research & Consulting Support	Self	Virginia Mason Medical Center (speaker's bureau)	\$100,001 or more	+	-
	Other	None	--	+	-
Investment & Proprietary Interests	Self	None	--	+	-
	Other	None	--	+	-
Committees, Workgroups, & Advisory Roles	Self	ACP, Board of Regents (member)	\$0	+	-
		ACP Clinical Guidelines Committee (member)	\$0	+	-
		Alliance for Academic Internal Medicine, Collaborative for Healing and Renewal in Medicine (CHARM) Committee (member)	\$0	+	-
		Virginia Mason Medical Center, CME committee (member)	\$0	+	-
		ACP High Value Care Task Force (member)	\$0	+	-
		ACP Services PAC (chair)	\$0	+	-
	Other	None	--	+	-
Other Interests	Self	None	--	+	-
	Other	None	--	+	-

**In the last 3 years, have you or any close relations published on any of the following topic areas?**  
Please include both peer-reviewed and non-peer-reviewed sources (e.g. newspaper op-ed; blog)

Imaging modalities for evaluation of hematuria    ☐ Yes    ☒ No

For staff use: ADD NEW RESET

INACTIVE (Last 3 years)		Belongs to	Description including amount of value or income			
Employment	Self	None	--	+	-	
	Other	None	--	+	-	
Research & Consulting Support	Self	Oakstone publishing	\$1,001 – 5,000	+	-	
	Other	None	--	+	-	
Investment & Proprietary Interests	Self	leMaitre	Up to \$1,000	+	-	
	Other	None	--	+	-	

INACTIVE (Last 3 years) *Belongs to* Description including amount of value or income

Committees, Workgroups, & Advisory Roles	Self	ACP Services, Treasurer	\$0	+	-
		Virginia Mason Medical Center, University of Washington Ethics Committee (member)	\$0	+	-
		ACP Ethics, Professionalism and Human Rights Committee (member)	\$0	+	-
	Other	None	--	+	-
Other Interests	Self	None	--	+	-
	Other	None	--	+	-

DECLARATION

I certify that to my knowledge and belief that I have disclosed my financial and non-financial interests above and I will promptly disclose any changes.

Carrie A. Horwitch

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Date: 2017.10.23 07:12:50 -07'00'

Signature \_\_\_\_\_ Date \_\_\_\_\_

RELEVANT PUBLICATIONS

Copy and paste into box below or send as attachment.



**American College of Physicians  
Department of Clinical Policy  
Disclosure of Interests: Summary Report**

Name: Linda L. Humphrey, MD, MPH, MACP

Role:

- ☒ Clinical Guidelines Committee
 ☐ ACP Staff or Leadership  
☐ Performance Measurement Committee
 ☐ Guest  
☒ High Value Care Committee

ACTIVE (Current)		Belongs to	Description including amount of value or income		
Employment	Self		Portland VA Medical Center	--	+ -
	Other		Spouse: Cardiologist at Legacy Health System	--	+ -
Research & Consulting Support	Self		University of Texas grant on harms of breast cancer screening in older women	\$1,001 – 5,000	+ -
			PCORI peer review (I am an associate editor, so many topics)	\$10,001 – 50,000	+ -
	Other		None	--	+ -
Investment & Proprietary Interests	Self		None	--	+ -
	Other		None	--	+ -
Committees, Workgroups, & Advisory Roles	Self		VA Preventive Medicine Advisory Committee (member)	\$0	+ -
			Women's Preventive Services Initiative Committee (member)	\$0	+ -
	Other		None	--	+ -
Other Interests	Self		None	--	+ -
	Other		None	--	+ -

**In the last 3 years, have you or any close relations published on any of the following topic areas?**

Please include both peer-reviewed and non-peer-reviewed sources (e.g. newspaper op-ed; blog)

Imaging modalities for evaluation of hematuria ☐ Yes ☒ No

For staff use:

ADD NEW

RESET

**INACTIVE (Last 3 years)** *Belongs to* Description including amount of value or income

Employment	Self		None	--	+ -
	Other		None	--	+ -
Research & Consulting Support	Self		US Preventive Services Task Force grant on lung and breast cancer screening	\$1,001 – 5,000	+ -
			Agency for Healthcare Research and Quality grant on lung and breast cancer screening	\$10,001 – 50,000	+ -
	Other		None	--	+ -
Investment & Proprietary Interests	Self		Gilead Sciences 10 shares	Up to \$1,000	+ -
	Other		None	--	+ -

**INACTIVE (Last 3 years) *Belongs to* Description including amount of value or income**

<b>Committees, Workgroups, &amp; Advisory Roles</b>	<i>Self</i>	None	--	+	-
	<i>Other</i>	None	--	+	-
<b>Other Interests</b>	<i>Self</i>	None	--	+	-
	<i>Other</i>	None	--	+	-

**DECLARATION**

I certify that to my knowledge and belief that I have disclosed my financial and non-financial interests above and I will promptly disclose any changes.

Signature

Date

11-2-17

**RELEVANT PUBLICATIONS**

Copy and paste into box below or send as attachment.

**American College of Physicians  
Department of Clinical Policy  
Disclosure of Interests: Summary Report**

Name: Heather E. Gantzer, MD, FACP

Role:

☐ Clinical Guidelines Committee

☐ ACP Staff or Leadership

☐ Performance Measurement Committee

☐ Guest

☒ High Value Care Committee

<b>ACTIVE (Current)</b>	<b>Belongs to</b>	<b>Description including amount of value or income†</b>	
<b>Employment</b>	<i>Self</i>	Park Nicollet Clinic and Methodist Hospital, St. Louis Park Minnesota	--
	<i>Other</i>	Daughter: Technical writer/document control at Vention (medical device company)	--
		Daughter: Biomedical engineer at Vention (medical device company)	--
<b>Research &amp; Consulting Support</b>	<i>Self</i>	None	--
	<i>Other</i>	None	--
<b>Investment &amp; Proprietary Interests</b>	<i>Self</i>	None	--
	<i>Other</i>	Merck stock (mother Mary Russell Muchmore; my late father was a chemical engineer for Merck in the 1950s till 1965); value not known to me	--
<b>Committees, Workgroups, &amp; Advisory Roles</b>	<i>Self</i>	I have received reimbursement from ACP for travel expenses, but no honoraria or other compensation. I was MN ACP Governor 2011 to 2015, and have been on the SCP BOR since 2015, and multiple ACP committees.	Up to \$1,000
	<i>Other</i>	None	--
<b>Other Interests</b>	<i>Self</i>	ACP Services member more than 3 years, attend Leadership Day each year	\$0
		Minnesota Medical Association member more than three years, attend Day at the Capitol (in St. Paul) each year	\$0
	<i>Other</i>	None	--

†To report amount of value or income, use these ranges:

- |                      |                        |
|----------------------|------------------------|
| a) \$0               | d) \$10,001 to 50,000  |
| b) ≤\$5,000          | e) \$50,001 to 100,000 |
| c) \$5,001 to 10,000 | f) ≥\$100,001          |

**In the last 3 years, have you or any close relations published on any of the following topic areas?**  
Please include both peer-reviewed and non-peer-reviewed sources (e.g. newspaper op-ed; blog)

Imaging modalities for evaluation of hematuria \_\_\_\_\_ Yes \_\_\_\_\_ X \_\_\_\_\_ No

**IF YES**, please copy and paste relevant references into space provided below or you may send as a separate attachment.

INACTIVE (Last 3 years)	Belongs to	Description including amount of value or income†	
Employment	<i>Self</i>	None	--
	<i>Other</i>	None	--
Research & Consulting Support	<i>Self</i>	None	--
	<i>Other</i>	None	--
Investment & Proprietary Interests	<i>Self</i>	None	--
	<i>Other</i>	None	--
Committees, Workgroups, & Advisory Roles	<i>Self</i>	None	--
	<i>Other</i>	None	--
Other Interests	<i>Self</i>	None	--
	<i>Other</i>	None	--

## DECLARATION

**I certify that to my knowledge and belief that I have disclosed my financial and non-financial interests above and I will promptly disclose any changes.**

Heather E. Gantzer

11-12-2017

Signature

Date

## RELEVANT PUBLICATIONS

**Copy and paste below or send as attachment.**

†To report amount of value or income, use these ranges:

- |                      |                        |
|----------------------|------------------------|
| a) \$0               | d) \$10,001 to 50,000  |
| b) ≤\$5,000          | e) \$50,001 to 100,000 |
| c) \$5,001 to 10,000 | f) ≥\$100,001          |

**American College of Physicians  
Department of Clinical Policy  
Disclosure of Interests: Summary Report**

Name: Janet A. Jokela, MD, MPH, FIDSA, FACP

Role:

- ☐ Clinical Guidelines Committee
 ☐ ACP Staff or Leadership  
☐ Performance Measurement Committee
 ☐ Guest  
☒ High Value Care Committee

ACTIVE (Current)		Belongs to	Description including amount of value or income			
Employment	Self		University of Illinois College of Medicine; VA Illiana Healthcare System, Danville, IL	\$100,001 or more	+	-
	Other		Spouse: University of Illinois at Urbana-Champaign	\$100,001 or more	+	-
Research & Consulting Support	Self		None	--	+	-
	Other		Spouse: National Science Foundation, Broader Impact initiative; Air Force Office of Scientific Research, real-time decision making under uncertainty, until 02/2018;	\$100,001 or more	+	-
Investment & Proprietary Interests	Self		None	--	+	-
	Other		None	--	+	-
Committees, Workgroups, & Advisory Roles	Self		Association of American Medical Colleges, Entrustable Professional Activities Core Working Group, University of Illinois College of Medicine Team (member); Committee on Certification (COCERT, member), American Board of Medical Specialties; Champaign County Audubon Board member	\$0	+	-
	Other		None	--	+	-
Other Interests	Self		None	--	+	-
	Other		None	--	+	-

In the last 3 years, have you or any close relations published on any of the following topic areas?

Please include both peer-reviewed and non-peer-reviewed sources (e.g. newspaper op-ed; blog)

Imaging modalities for evaluation of hematuria ☐ Yes ☒ No

For staff use:

ADD NEW

RESET

INACTIVE (Last 3 years)		Belongs to	Description including amount of value or income			
Employment	Self		None	--	+	-
	Other		None	--	+	-
Research & Consulting Support	Self		None	--	+	-
	Other		Spouse: Law firm, expert witness (issue pertaining to pharmaceuticals--I do not know anything further about this due to confidentiality constraints)	\$10,001 – 50,000	+	-
			Spouse: National Science Foundation, pediatric vaccine research, until August 2017	\$100,001 or more	+	-

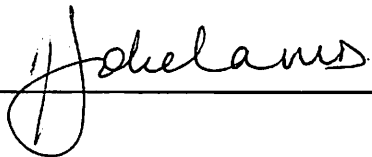
**INACTIVE (Last 3 years) Belongs to Description including amount of value or income**

<b>Investment &amp; Proprietary Interests</b>	<i>Self</i>	None	--	+	-
	<i>Other</i>	None	--	+	-
<b>Committees, Workgroups, &amp; Advisory Roles</b>	<i>Self</i>	None	--	+	-
	<i>Other</i>	Spouse: National Academy of Medicine, standing committee for the CDC Strategic National Stockpile (member)	--	+	-
<b>Other Interests</b>	<i>Self</i>	None	--	+	-
	<i>Other</i>		--	+	-

**DECLARATION**

I certify that to my knowledge and belief that I have disclosed my financial and non-financial interests above and I will promptly disclose any changes.

Signature



10/23/2017

Date

**RELEVANT PUBLICATIONS**

Copy and paste into box below or send as attachment.

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**American College of Physicians  
Department of Clinical Policy  
Disclosure of Interests: Summary Report**

Name: Joseph Ming Wah Li, MD, SFHM, FACP

Role:

- ☐ Clinical Guidelines Committee
 ☐ ACP Staff or Leadership  
☐ Performance Measurement Committee
 ☐ Guest  
☒ High Value Care Committee

<b>ACTIVE (Current)</b>	<b>Belongs to</b>	<b>Description including amount of value or income</b>			
<b>Employment</b>	<i>Self</i>	Harvard Medical Faculty Physicians at Beth Israel Deaconess Medical Center	--	+	-
	<i>Other</i>	None	--	+	-
<b>Research &amp; Consulting Support</b>	<i>Self</i>	None	--	+	-
	<i>Other</i>	None	--	+	-
<b>Investment &amp; Proprietary Interests</b>	<i>Self</i>	None	--	+	-
	<i>Other</i>	None	--	+	-
<b>Committees, Workgroups, &amp; Advisory Roles</b>	<i>Self</i>	Advisory Board, Elsevier Clinical Key	\$1,001 – 5,000	+	-
		Neuroendocrine Tumor Research Foundation Board of Directors	\$0	+	-
		Editorial board member - Journal of Hospital Medicine	\$0	+	-
	<i>Other</i>	None	--	+	-
<b>Other Interests</b>	<i>Self</i>	None	--	+	-
	<i>Other</i>	None	--	+	-

**In the last 3 years, have you or any close relations published on any of the following topic areas?**  
Please include both peer-reviewed and non-peer-reviewed sources (e.g. newspaper op-ed; blog)

Imaging modalities for evaluation of hematuria ☐ Yes ☐ No

For staff use: ADD NEW RESET

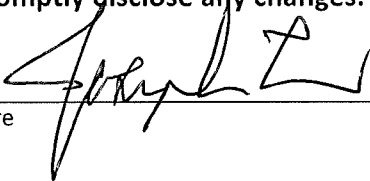
<b>INACTIVE (Last 3 years)</b>	<b>Belongs to</b>	<b>Description including amount of value or income</b>			
<b>Employment</b>	<i>Self</i>	None	--	+	-
	<i>Other</i>	None	--	+	-
<b>Research &amp; Consulting Support</b>	<i>Self</i>	None	--	+	-
	<i>Other</i>	None	--	+	-
<b>Investment &amp; Proprietary Interests</b>	<i>Self</i>	None	--	+	-
	<i>Other</i>	None	--	+	-

**INACTIVE (Last 3 years) *Belongs to* Description including amount of value or income**

<b>Committees, Workgroups, &amp; Advisory Roles</b>	<i>Self</i>	Editor, Hospital Medicine Clinics	--	+	-
		Member, ABIM Hospital Medicine MOC Test Writing Committee	--	+	-
		Boston Chapter leadership, Society of Hospital Medicine	--	+	-
	<i>Other</i>	None	--	+	-
<b>Other Interests</b>	<i>Self</i>	None	--	+	-
	<i>Other</i>	None	--	+	-

**DECLARATION**

I certify that to my knowledge and belief that I have disclosed my financial and non-financial interests above and I will promptly disclose any changes.

  
Signature

10/18/17  
Date

**RELEVANT PUBLICATIONS**

Copy and paste into box below or send as attachment.



**American College of Physicians  
Department of Clinical Policy  
Disclosure of Interests: Summary Report**

Name: Robert H. Lohr, MD, FACP

Role:

- ☐ Clinical Guidelines Committee  
☐ Performance Measurement Committee  
☒ High Value Care Committee  
☐ ACP Staff or Leadership  
☐ Guest

ACTIVE (Current)	Belongs to	Description including amount of value or income†
<b>Employment</b>	<i>Self</i>	Mayo Clinic --
	<i>Other</i>	None --
<b>Research &amp; Consulting Support</b>	<i>Self</i>	None --
	<i>Other</i>	None --
<b>Investment &amp; Proprietary Interests</b>	<i>Self</i>	None --
	<i>Other</i>	None --
<b>Committees, Workgroups, &amp; Advisory Roles</b>	<i>Self</i>	ACP Board of Regents – expenses only, no direct compensation Up to \$1,000
		ACP Volunteerism Committee, member \$0
		ACP Financial Planning and Audit Committee, Chair \$0
		ACP Compensation Committee, Chair \$0
		ACP, Treasurer \$50,001 – 100,000
	<i>Other</i>	None --
<b>Other Interests</b>	<i>Self</i>	None --
	<i>Other</i>	None --

**In the last 3 years, have you or any close relations published on any of the following topic areas?**

Please include both peer-reviewed and non-peer-reviewed sources (e.g. newspaper op-ed; blog)

Imaging modalities for evaluation of hematuria                      Yes   X   No

**IF YES**, please copy and paste relevant references into space provided below or you may send as a separate attachment.

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- |                      |                        |
|----------------------|------------------------|
| a) \$0               | d) \$10,001 to 50,000  |
| b) ≤\$5,000          | e) \$50,001 to 100,000 |
| c) \$5,001 to 10,000 | f) ≥\$100,001          |

<b>INACTIVE (Last 3 years)</b>	<b>Belongs to</b>	<b>Description including amount of value or income†</b>	
<b>Employment</b>	<i>Self</i>	None	--
	<i>Other</i>	None	--
<b>Research &amp; Consulting Support</b>	<i>Self</i>	Research Grants, Department of Medicine, Mayo Clinic	\$5,001 – 10,000
	<i>Other</i>	None	--
<b>Investment &amp; Proprietary Interests</b>	<i>Self</i>	None	--
	<i>Other</i>	None	--
<b>Committees, Workgroups, &amp; Advisory Roles</b>	<i>Self</i>	ACP Governance; Health and Public Policy Committees	\$0
	<i>Other</i>	None	--
<b>Other Interests</b>	<i>Self</i>	None	--
	<i>Other</i>	None	--

**DECLARATION**

I certify that to my knowledge and belief that I have disclosed my financial and non-financial interests above and I will promptly disclose any changes.

*Robert W. Cohen, MD*

Signature

*10/31/2017*

Date

**RELEVANT PUBLICATIONS**

Copy and paste below or send as attachment.

†To report amount of value or income, use these ranges:

- |                      |                        |
|----------------------|------------------------|
| a) \$0               | d) \$10,001 to 50,000  |
| b) ≤\$5,000          | e) \$50,001 to 100,000 |
| c) \$5,001 to 10,000 | f) ≥\$100,001          |

**American College of Physicians  
Department of Clinical Policy  
Disclosure of Interests: Summary Report**

Name: Ana Maria Lopez, MD, MPH, FACP

Role:

- ☐ Clinical Guidelines Committee      ☐ ACP Staff or Leadership  
☐ Performance Measurement Committee      ☐ Guest  
☒ High Value Care Committee

<b>ACTIVE (Current)</b>		<b>Belongs to</b>	<b>Description including amount of value or income</b>		
<b>Employment</b>	<i>Self</i>		University of Utah, Huntsman Cancer Institute	\$100,001 or more	+ -
	<i>Other</i>		None	--	+ -
<b>Research &amp; Consulting Support</b>	<i>Self</i>		NIH/NCATS University of Utah Center for Clinical and Translational Science (CCTS)	\$100,001 or more	+ -
			NIH/NCATS University of Utah Center for Clinical and Translational Sciences (CCTS) Supplement to promote diversity in health related research, supports the mentorship and growth of Dr. Candace Show	\$100,001 or more	+ -
			NIH/NCI Cancer Center Support Grant: Geographical Management of Cancer Health Disparities Program (GMAP)	\$100,001 or more	+ -
			NIH/NCI Cancer Center Support Grant: Community Outreach Capacity through Community Health Educator (CHE)	\$100,001 or more	+ -
			NIH/NIMHD Salud Juntos!: A Promotora-Led Home-Based Cancer Care Support Solution	\$100,001 or more	+ -
			NIH/NCI PathMaker Summer Research Program for URM high school/ undergraduate students (CURE)	\$100,001 or more	+ -
			Arizona Health Opportunities Pathways to Excellence (AZ-HOPE) – HCOP U.S. DHHS – HRSA	\$100,001 or more	+ -
	<i>Other</i>		None	--	+ -
<b>Investment &amp; Proprietary Interests</b>	<i>Self</i>		None	--	+ -
	<i>Other</i>		None	--	+ -
<b>Committees, Workgroups, &amp; Advisory Roles</b>	<i>Self</i>		Bryn Mawr College executive board (member; only reimbursed for expenses)	Up to \$1,000	+ -
	<i>Other</i>		None	--	+ -
<b>Other Interests</b>	<i>Self</i>		American Society of Clinical Oncology (member)	\$0	+ -
			PCORI (member)	\$0	+ -
			National Hispanic Medical Association (member)	\$0	+ -
			Hispanic Serving Health Profession Schools (member)	\$0	+ -
	<i>Other</i>		None	--	+ -

**In the last 3 years, have you or any close relations published on any of the following topic areas?**  
Please include both peer-reviewed and non-peer-reviewed sources (e.g. newspaper op-ed; blog)

Imaging modalities for evaluation of hematuria    ☐ Yes    ☒ No

For staff use:

ADD NEW


RESET

**INACTIVE (Last 3 years) *Belongs to* Description including amount of value or income**

<b>Employment</b>	<i>Self</i>	University of Arizona	--	+	-
	<i>Other</i>	None	--	+	-
<b>Research &amp; Consulting Support</b>	<i>Self</i>	Arizona Center of Excellence (AZ-COE) Health Resources and Services Administration	\$100,001 or more	+	-
		Phase 1 Dose Finding Trial of Letrozole in Postmenopausal Women at High Risk for Breast Cancer, NCI, National Institutes of Health	\$100,001 or more	+	-
		ACS	\$100,001 or more	+	-
		Hope Foundation	\$50,001 – 100,000	+	-
		Southern Arizona Susan G. Komen Foundation	\$10,001 – 50,000	+	-
	<i>Other</i>	None	--	+	-
<b>Investment &amp; Proprietary Interests</b>	<i>Self</i>	None	--	+	-
	<i>Other</i>	None	--	+	-
<b>Committees, Workgroups, &amp; Advisory Roles</b>	<i>Self</i>	Pima County Medical Society (member)	\$0	+	-
	<i>Other</i>	None	--	+	-
<b>Other Interests</b>	<i>Self</i>	None	--	+	-
	<i>Other</i>	None	--	+	-

**DECLARATION**

I certify that to my knowledge and belief that I have disclosed my financial and non-financial interests above and I will promptly disclose any changes.

  
Signature

10.19.17  
Date

**RELEVANT PUBLICATIONS**

Copy and paste into box below or send as attachment.

**American College of Physicians  
Department of Clinical Policy  
Disclosure of Interests: Summary Report**

Name: Robert M. McLean, MD, FACP

Role:

- ☒ Clinical Guidelines Committee
 ☐ ACP Staff or Leadership  
☐ Performance Measurement Committee
 ☐ Guest  
☒ High Value Care Committee

<b>ACTIVE (Current)</b>		<b>Belongs to</b>	<b>Description including amount of value or income</b>			
<b>Employment</b>	<i>Self</i>		Northeast Medical Group	\$100,001 or more	+	-
	<i>Other</i>		None	--	+	-
<b>Research &amp; Consulting Support</b>	<i>Self</i>		None	--	+	-
	<i>Other</i>		None	--	+	-
<b>Investment &amp; Proprietary Interests</b>	<i>Self</i>		None	--	+	-
	<i>Other</i>		None	--	+	-
<b>Committees, Workgroups, &amp; Advisory Roles</b>	<i>Self</i>		ABIM Rheumatology Board	\$1,001 – 5,000	+	-
			State of Connecticut Healthcare Innovation Steering Committee	\$0	+	-
			Board of Directors of Northeast Medical Group of Yale New Haven Health Systems	\$0	+	-
			Quality of Care Committee - American College of Rheumatology	\$0	+	-
	<i>Other</i>		None	--	+	-
<b>Other Interests</b>	<i>Self</i>		None	--	+	-
	<i>Other</i>		None	--	+	-

**In the last 3 years, have you or any close relations published on any of the following topic areas?**  
Please include both peer-reviewed and non-peer-reviewed sources (e.g. newspaper op-ed; blog)

Imaging modalities for evaluation of hematuria ☐ Yes ☒ No

For staff use:

**INACTIVE (Last 3 years)** **Belongs to** **Description including amount of value or income**

<b>Employment</b>	<i>Self</i>	None	--	+	-
	<i>Other</i>	None	--	+	-
<b>Research &amp; Consulting Support</b>	<i>Self</i>	Speaker's Bureau, Takeda Pharmaceuticals (gout medical education)	\$1,001 – 5,000	+	-
	<i>Other</i>	None	--	+	-
<b>Investment &amp; Proprietary Interests</b>	<i>Self</i>	None	--	+	-
	<i>Other</i>	None	--	+	-

**INACTIVE (Last 3 years) *Belongs to* Description including amount of value or income**

<b>Committees, Workgroups, &amp; Advisory Roles</b>	<i>Self</i>	ACP PAC, Chair	\$0	+	-
		Committee on Rheumatologic Care of American College of Rheumatology	\$0	+	-
		Advisory Committee to Health Insurance Exchange of Connecticut	\$0	+	-
	<i>Other</i>	None	--	+	-
<b>Other Interests</b>	<i>Self</i>	None	--	+	-
	<i>Other</i>	None	--	+	-

**DECLARATION**

I certify that to my knowledge and belief that I have disclosed my financial and non-financial interests above and I will promptly disclose any changes.

Signature

Date

10/24/17

**RELEVANT PUBLICATIONS**

Copy and paste into box below or send as attachment.

American College of Physicians  
Department of Clinical Policy  
Disclosure of Interests: Summary Report

Name: Kate Carroll, MPH

Role:

- ☐ Clinical Guidelines Committee
- ☒ ACP Staff or Leadership
- ☐ Performance Measurement Committee
- ☐ Guest
- ☐ High Value Care Committee

ACTIVE (Current)	Belongs to	Description including amount of value or income			
Employment	Self	American College of Physicians	--	+	-
	Other	Partner: The Beasley Firm (personal injury and medical malpractice)	--	+	-
Research & Consulting Support	Self	None	--	+	-
	Other	None	--	+	-
Investment & Proprietary Interests	Self	None	--	+	-
	Other	None	--	+	-
Committees, Workgroups, & Advisory Roles	Self	None	--	+	-
	Other	None	--	+	-
Other Interests	Self	None	--	+	-
	Other	None	--	+	-

In the last 3 years, have you or any close relations published on any of the following topic areas?  
Please include both peer-reviewed and non-peer-reviewed sources (e.g. newspaper op-ed; blog)

Imaging modalities for evaluation of hematuria

☐ Yes ☒ No

For staff use:

ADD NEW

RESET

INACTIVE (Last 3 years)	Belongs to	Description including amount of value or income			
Employment	Self	None	--	+	-
	Other	None	--	+	-
Research & Consulting Support	Self	None	--	+	-
	Other	None	--	+	-
Investment & Proprietary Interests	Self	None	--	+	-
	Other	None	--	+	-
Committees, Workgroups, & Advisory Roles	Self	None	--	+	-
	Other	None	--	+	-
Other Interests	Self	None	--	+	-
	Other	None	--	+	-

## DECLARATION

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**I certify that to my knowledge and belief that I have disclosed my financial and non-financial interests above and I will promptly disclose any changes.**

Kate Carroll

 Digitally signed by Kate Carroll  
DN: cn=Kate Carroll, o, ou, email=kcarroll@acponline.org, c=US  
Date: 2017.11.03 12:01:48 -04'00'

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Signature

Date

## RELEVANT PUBLICATIONS

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**Copy and paste into box below or send as attachment.**



**American College of Physicians  
Department of Clinical Policy  
Disclosure of Interests: Summary Report**

Name: Amir Qaseem, MD, PhD, MHA, FACP

Role:

- ☐ Clinical Guidelines Committee
 ☒ ACP Staff or Leadership  
☐ Performance Measurement Committee
 ☐ Guest  
☐ High Value Care Committee

ACTIVE (Current)		Belongs to	Description including amount of value or income		
Employment	Self	American College of Physicians	--	+	-
	Other	None	--	+	-
Research & Consulting Support	Self	Editor (Evidence-based Medicine), DynaMed	\$1,001 – 5,000	+	-
	Other	None	--	+	-
Investment & Proprietary Interests	Self	None	--	+	-
	Other	None	--	+	-
Committees, Workgroups, & Advisory Roles	Self	Guidelines International Network's Board of Trustees (Member)	\$0	+	-
		Measures Application Partnership (Member)	\$0	+	-
		National Quality Forum's Health and Well Being Standing Committee (Chair)	\$0	+	-
		DynaMed Board of Executives (Member)	\$0	+	-
		MedBiquitous Board of Directors (Member)	\$0	+	-
		GRADE Working Group (Member)	\$0	+	-
		Reporting Items for Guidelines in Health Systems (RIGHT) Working Group (Member)	\$0	+	-
		American Medical Association PCPIF Board of Directors (Member)	\$0	+	-
		National Quality Forum Physician Advisory Committee (Member)	\$0	+	-
		PCPIF Measures Advisory Committee (Chair)	\$0	+	-
		CDC ACIP Methodology Committee (Member)	\$0	+	-
		WHO Special Advisor (Complex Health Interventions)	\$0	+	-
		National Quality Forum's Incubator Partnership and Collaboration Committee (Member)	\$0	+	-
		CMS Next Generation Performance Measures Expert Panel (Member)	\$0	+	-
Other Interests	Other	None	--	+	-
	Other	None	--	+	-

**In the last 3 years, have you or any close relations published on any of the following topic areas?**  
Please include both peer-reviewed and non-peer-reviewed sources (e.g. newspaper op-ed; blog)

Imaging modalities for evaluation of hematuria ☐ Yes ☐ No

For staff use:

ADD NEW

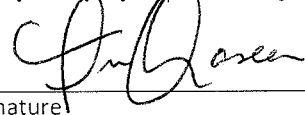
RESET

**INACTIVE (Last 3 years) Belongs to Description including amount of value or income**

Employment	Self	None	--	+	-
	Other	None	--	+	-
Research & Consulting Support	Self	None	--	+	-
	Other	None	--	+	-
Investment & Proprietary Interests	Self	None	--	+	-
	Other	None	--	+	-
Committees, Workgroups, & Advisory Roles	Self	Guidelines International Network (Immediate Past Chair)	\$0	+	-
		National Quality Forum's Adult Immunizations Steering Committee on Prioritizing Performance Measure Gaps (Chair)	\$0	+	-
		National Quality Forum's Advisory Committee on Adult Immunization (Member)	\$0	+	-
		Guidelines International Network (Chair)	\$0	+	-
		National Quality Forum's Steering Committee for National Voluntary Standards for Population Health (Member)	\$0	+	-
		Evidence-based Recommendations and Grading Work Group of the Centers for Disease Control Advisory Committee on Immunization Practices (Member)	\$0	+	-
	Other	None	--	+	-
Other Interests	Self	None	--	+	-
	Other	None	--	+	-

**DECLARATION**

I certify that to my knowledge and belief that I have disclosed my financial and non-financial interests above and I will promptly disclose any changes.



Signature

11/3/17

Date

**RELEVANT PUBLICATIONS**

Copy and paste into box below or send as attachment.

**American College of Physicians  
Department of Clinical Policy  
Disclosure of Interests: Summary Report**

Name: Patricia Siemion, MS

Role:

- ☐ Clinical Guidelines Committee
 ☒ ACP Staff or Leadership  
☐ Performance Measurement Committee
 ☐ Guest  
☐ High Value Care Committee

<b>ACTIVE (Current)</b>	<b><i>Belongs to</i></b>	<b>Description including amount of value or income</b>			
<b>Employment</b>	<i>Self</i>	American College of Physicians	\$50,001 – 100,000	+	-
	<i>Other</i>	Spouse: International Association of Bridge, Structural, Ornamental and Reinforcing Iron Workers (Local 401)	\$50,001 – 100,000	+	-
<b>Research &amp; Consulting Support</b>	<i>Self</i>	None	--	+	-
	<i>Other</i>	None	--	+	-
<b>Investment &amp; Proprietary Interests</b>	<i>Self</i>	None	--	+	-
	<i>Other</i>	None	--	+	-
<b>Committees, Workgroups, &amp; Advisory Roles</b>	<i>Self</i>	None	--	+	-
	<i>Other</i>	None	--	+	-
<b>Other Interests</b>	<i>Self</i>	None	--	+	-
	<i>Other</i>	None	--	+	-

**In the last 3 years, have you or any close relations published on any of the following topic areas?**  
Please include both peer-reviewed and non-peer-reviewed sources (e.g. newspaper op-ed; blog)

Imaging modalities for evaluation of hematuria ☐ Yes ☒ No

For staff use: ADD NEW RESET

<b>INACTIVE (Last 3 years)</b>	<b><i>Belongs to</i></b>	<b>Description including amount of value or income</b>			
<b>Employment</b>	<i>Self</i>	None	--	+	-
	<i>Other</i>	None	--	+	-
<b>Research &amp; Consulting Support</b>	<i>Self</i>	None	--	+	-
	<i>Other</i>	None	--	+	-
<b>Investment &amp; Proprietary Interests</b>	<i>Self</i>	None	--	+	-
	<i>Other</i>	None	--	+	-
<b>Committees, Workgroups, &amp; Advisory Roles</b>	<i>Self</i>	None	--	+	-
	<i>Other</i>	None	--	+	-
<b>Other Interests</b>	<i>Self</i>	None	--	+	-
	<i>Other</i>	None	--	+	-

## DECLARATION

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**I certify that to my knowledge and belief that I have disclosed my financial and non-financial interests above and I will promptly disclose any changes.**

Trish Siemion

 Digitally signed by Trish Siemion  
DN: cn=Trish Siemion, o=American College of Physicians, ou=Clinical Policy,  
email=tsiemion@acponline.org, c=US  
Date: 2017.11.03 14:21:05 -0400

Nov 3, 2017

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Signature

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Date

## RELEVANT PUBLICATIONS

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**Copy and paste into box below or send as attachment.**

**American College of Physicians  
Department of Clinical Policy  
Disclosure of Interests: Summary Report**

Name: Melissa Starkey, PhD

Role:

- ☐ Clinical Guidelines Committee
 ☒ ACP Staff or Leadership  
☐ Performance Measurement Committee
 ☐ Guest  
☐ High Value Care Committee

ACTIVE (Current)	Belongs to	Description including amount of value or income			
Employment	Self	American College of Physicians	\$50,001 – 100,000	+	-
	Other	Partner: Teva Pharmaceuticals	\$100,001 or more	+	-
Research & Consulting Support	Self	None	--	+	-
	Other	None	--	+	-
Investment & Proprietary Interests	Self	None	--	+	-
	Other	None	--	+	-
Committees, Workgroups, & Advisory Roles	Self	CMSS Clinical Practice Guidelines Component Group Member	\$0	+	-
	Other	None	--	+	-
Other Interests	Self	None	--	+	-
	Other	None	--	+	-

**In the last 3 years, have you or any close relations published on any of the following topic areas?**  
 Please include both peer-reviewed and non-peer-reviewed sources (e.g. newspaper op-ed; blog)

Imaging modalities for evaluation of hematuria ☐ Yes ☒ No

For staff use: ADD NEW RESET


INACTIVE (Last 3 years)	Belongs to	Description including amount of value or income			
Employment	Self	None	--	+	-
	Other	None	--	+	-
Research & Consulting Support	Self	None	--	+	-
	Other	None	--	+	-
Investment & Proprietary Interests	Self	None	--	+	-
	Other	None	--	+	-
Committees, Workgroups, & Advisory Roles	Self	GIN Membership Committee	\$0	+	-
	Other	None	--	+	-
Other Interests	Self	None	--	+	-
	Other	None	--	+	-

## DECLARATION

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**I certify that to my knowledge and belief that I have disclosed my financial and non-financial interests above and I will promptly disclose any changes.**

Melissa Starkey

 Digitally signed by Melissa Starkey  
DN: cn=Melissa Starkey, o=ACP, ou, email=mstarkey@acponline.org, c=US  
Date: 2017.11.07 09:10:29 -05'00'

Nov 7, 2017

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Signature

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Date

## RELEVANT PUBLICATIONS

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**Copy and paste into box below or send as attachment.**

NA
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