Name: Pelin P. Batur, MD,	FACP				
Role: Clinical Guidelines Commit Performance Measuremen High Value Care Committee	nt Committee	☐ ACP Staff or Leadership Guest			
ACTIVE (Current)	Belongs to	Description including amount of value or income			
Employment	Self	Cleveland Clinic	\$100,001 or more	+	-
Employment	Household	Lubrizol Corporation	\$100,001 or more	+	-
Research & Consulting	Self	None		+	-
Roles	Household	None		+	-
Investment & Proprietary	Self	None		+	-
Interests	Household	None		+	-
Committees, Boards, & Workgroups/Panels	Self	I sit on national advisory committees for multiple medical organizations as a volunteer helping to set guidelines, or involved in their national meeting planning, review of educational curricula, etc. These include ASCCP, SGIM, ACOG, ACP and ARHP. With some lectures I do receive an honorarium, on behalf of the medical organization, not a pharmaceutical company.	\$1,001 – 5,000	+	_
	Household	None		+	-
Other Interests	Self	None		+	-
other affiliations, advocacy, etc.	Household	None		+	-
	eviewed and Non	usehold members published on any of the following non-peer-reviewed sources (e.g. newspaper op-ed Acute pain			
INACTIVE (Last 3 years)	Belongs to	For staff use: AD Description including amount of value or income	DD NEW RESE	Т	
	Self	None		+	-
Employment	Household	None		+	-
	Colf	Allergan advisory panel for a fibroid medication to be	¢1.001 F.000		

FDA approved soon. One time 2 yrs ago

\$1,001 - 5,000

Self

Household

None

Research & Consulting

Roles

INACTIVE (Last 3 years) *Belongs to* **Description including amount of value or income** Self **Investment & Proprietary** None + -Interests Household --+ -None Self Committees, Boards, & None + -Workgroups/Panels Household None --+ -Self None **Other Interests** + other affiliations, advocacy, etc. | Household None + -

DECLARATION I certify that to my knowledge	e and belief that I have disclosed my	y financial and non-financial interests above and
will promptly disclose any cha	nges.	
baturp@ccf.org	Digitally signed by baturp@ccf.org DN: cn=baturp@ccf.org Date: 2019.03.26 19:14:16 -04'00'	
Signature		Date
RELEVANT PUBLICATIONS	i.	
Copy and paste into box below	v or send as attachment.	

Name: Thomas G. Cooney, MD MACP

Role:					
	ttee	☐ ACP Staff or Leadership			
Performance Measuremen	nt Committee	Guest			
☐ High Value Care Committe	e				
ACTIVE (Current)	Belongs to	Description including amount of value or incom	e		
	Self	Oregon Health & Science University	\$10,001 – 50,000	+	-
Employment	Seij	Department of Veterans Affairs	\$10,001 - 50,000	+	-
	Household	None		+	-
Research & Consulting	Self	None		+	-
Roles	Household	None		+	-
Investment & Proprietary	Self	None		+	-
Interests	Household	None		+	-
Committees, Boards, &	Self	None		+	-
Workgroups/Panels	Household	None		+	-
		ACP: Leadership Day	\$0	+	-
Other Interests	Self	ACP: India Chapter meeting (DM guidelines)	\$0	+	-
other affiliations, advocacy, etc.		Oregon Medical Association: Firearms Taskforce	\$0	+	-
	Household	None		+	-
In the last 3 years, have yo	u or any ho	usehold members published on any of the follow	ing topic areas?		
Please include both peer-re	viewed and	non-peer-reviewed sources (e.g. newspaper op-e	d; blog)		
		Acute pain ☐Yes ☒ No			
	Non	invasive ventilation ☐Yes ☒ No			
	Point	of care ultrasound Yes No			
		For staff use:	DD NEW RESE	Т	
INACTIVE (Last 3 years)	Belongs to	Description including amount of value or incom	e		
	0.46	Oregon Health & Science University	\$10,001 – 50,000	+	-
Employment	Self	Department of Veterans Affairs	\$100,001 or more	+	-
	Household	None		+	-
Research & Consulting	Self	None		+	-
Roles	Household	None		+	-
Investment & Proprietary	Self	None		+	-
Interests	Household	None		+	-

Committees, Boards, &	Self	ACP: Chair-elect, and Chair, Board of Governors	\$50,001 – 100,000	+	_
Workgroups/Panels	Household	None		+	_
Other Interests	Self	None		+	-
other affiliations, advocacy, etc.	Household	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.

Thomas G. Cooney MD MACP Date: 2019.03.22 11:33:51 -07'00'	Mar 22, 2019
Signature	Date

RELEVANT PUBLICATIONS

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

Name: Carolyn J. Crandall,	MD, FACP	_			
Role: Clinical Guidelines Commi Performance Measuremen High Value Care Committee	nt Committee	☐ ACP Staff or Leadership ☐ Guest			
ACTIVE (Current)	Belongs to	Description including amount of value or income			
Employment	Self	University of California, Los Angeles	\$100,001 or more	+	-
Employment	Household	University of California, Los Angeles	\$100,001 or more	+	-
	Self	National Institutes of Health, osteoporosis, menopause, PI or Co-I	\$50,001 – 100,000	+	-
Research & Consulting Roles		National Institutes of Health, PI, brain cancer	\$100,001 or more	+	-
	Household	Miriam N. Sheldon G. Adelson Medical Research Foundation, PI, neural repair and brain cancer	\$100,001 or more	+	-
		California Institute for Regenerative Medicine, spinal cord injury, investigator	\$100,001 or more	+	-
Investment & Proprietary	Self	None		+	-
Interests	Household	None		+	
		North American Menopause society scientific program committee, Menopause Competency Exam Committee, Board of Trustees, menopause	\$1,001 – 5,000	+	-
Committees, Boards, & Workgroups/Panels	Self	International Society for Clinical Densitometry, Scientific Advisory Council	\$0	+	-
		American Society for Bone and Mineral Research Professional Practice Committee	\$0	+	-
	Household	None		+	-
	Colf	American Society for Bone and Mineral Research, lectures regarding osteoporosis	\$0	+	-
Other Interests other affiliations, advocacy, etc.	Self	North American Menopause Society, lectures regarding menopause and osteoporosis	\$0	+	-
other anniations, advocacy, etc.	Household	academic institutions and non-profit foundations, presenting numerous scientific seminars, autism, brain cancer, and neural repair	\$1,001 – 5,000	+	-
		usehold members published on any of the following non-peer-reviewed sources (e.g. newspaper op-ed			
		Acute pain ☐ Yes ☒ No			
		invasive ventilation ☐ Yes ☒ No			
	Point	of care ultrasound 🗌 Yes 🛛 No			

For staff use: ADD NEW RESET

Employment	Self	None		+	_
	Household	None		+	-
Research & Consulting	Self	None		+	_
Roles	Household	None		+	_
Investment & Proprietary	Self	None		+	_
Interests	Household	None		+	_
Committees, Boards, &	Self	None		+	_
Workgroups/Panels	Household	None		+	_
Other Interests	Self	None	\$0	+	_
other affiliations, advocacy, etc	Household	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.

Carolyn J. Crandall

Dis: cn=Carolyn J. Crandall, o, ou, email=ccrandall@mednet.ucla.edu, c=US

Date: 2019.03.22 11:33:23-07'00'

Date

Date

RELEVANT PUBLICATIONS

•	copy and paste into box below or send as attachment.

Name: Lauri Hicks, DO

Role: Clinical Guidelines Commit Performance Measuremer High Value Care Committe	nt Committee	☐ ACP Staff or Leadership ☐ Guest				
ACTIVE (Current)	Belongs to	Description including amount of value or income				
Empleyment	Self	Centers for Disease Control and Prevention	\$100,001	or more	+	-
Employment	Household	Spouse: GI Specialists of Georgia	\$100,001	or more	+	-
Research & Consulting	Self	None			+	-
Roles	Household	None			+	-
Investment & Proprietary	Self	None			+	-
Interests	Household	None			+	-
Committees, Boards, &	Self	Society for Healthcare Epidemiology of America, annual conference committee	\$0		+	-
Workgroups/Panels	Household	None			+	-
Other Interests other affiliations, advocacy, etc.	Self	I regularly speak and present at scientific conferences and meetings related to scientific work completed at CDC.	\$0		+	_
	Household	None			+	-
	viewed and	usehold members published on any of the following non-peer-reviewed sources (e.g. newspaper op-ed) Acute pain ☐ Yes ☒ No invasive ventilation ☐ Yes ☒ No cof care ultrasound ☐ Yes ☒ No		eas?		
		For staff use: AD	D NEW	RESET		
INACTIVE (Last 3 years)	Belongs to	Description including amount of value or income				
Employment	Self	None			+	_
Linployment	Household	None			+	-
Research & Consulting	Self	None			+	-
Roles	Household	None			+	-
Investment & Proprietary	Self	None			+	-
Interests	Household	None			+	-
Committees, Boards, &	Self	None			+	-
Workgroups/Panels	Household	None			+	-
						_

Other Interests	Self	None	 +	-	
other affiliations, advocacy, etc.	Household	None	 +	-	Ĭ

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.

Lauri Hicks -S5	Digitally signed by Lauri Hicks -S5 Date: 2019.03.22 14:50:23 -04'00'		
Signature		Date	

-

Name: Jennifer S. Lin, MD,	MCR, FACP					
Role: ⊠ Clinical Guidelines Commi ☐ Performance Measuremen		☐ ACP Staff or Leadership				
☐ High Value Care Committe						
ACTIVE (Current)	Belongs to	Description including amount of value or incom	e			
Empleyment	Self	Northwest Permanente			+	-
Employment	Household	None			+	-
Research & Consulting Roles	Self	Agency for Healthcare Research and Quality contract to support the United States Preventive Services Task Force. Ongoing topics: screening for cognitive impairment behavioral counseling to promote a healthful diet and physical activity for cardiovascular disease prevention in adults screening for pancreatic cancer screening for colorectal cancer prevention of opioid use disorder			+	_
	Household	None			+	-
Investment & Proprietary	Self	None			+	-
Interests	Household	None			+	-
Committees, Boards, & Workgroups/Panels	Self	Kaiser Permanente National Guideline Directors Committee (non-voting member; I don't work on any of the guidelines per se. My role is basically providing higher level input on methods or processes when appropriate)	\$0		+	_
	Household	None			+	-
Other Interests	Self	None			+	-
other affiliations, advocacy, etc.	Household	None			+	-
	eviewed and	usehold members published on any of the following non-peer-reviewed sources (e.g. newspaper op-example). Acute pain Yes No invasive ventilation Yes No Yes No		eas?		
		For staff use:	DD NEW	RESET		

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

	<u> </u>			
Self	None		+	_
Household	None		+	-
Self	Agency for Healthcare Research and Quality contract to support the United States Preventive Services Task Force. Previous topics: screening for thyroid cancer screening for colorectal cancer behavioral sexual risk-reduction counseling in primary care to prevent sexually transmitted infections screening for idiopathic scoliosis screening for prostate cancer screening for peripheral artery disease nontraditional cardiovascular disease risk assessment screening for syphilis in pregnant women		+	-
Household	None		+	-
Self	None		+	-
Household	None		+	-
Self	None		+	-
Household	None		+	-
Self	None		+	-
Household	None		+	-
	Household Self Household Self Household Self Household Self Household	Household None Agency for Healthcare Research and Quality contract to support the United States Preventive Services Task Force. Previous topics: screening for thyroid cancer screening for colorectal cancer behavioral sexual risk-reduction counseling in primary care to prevent sexually transmitted infections screening for idiopathic scoliosis screening for prostate cancer screening for peripheral artery disease nontraditional cardiovascular disease risk assessment screening for syphilis in pregnant women Household None Self None Household None Self None None None None	Agency for Healthcare Research and Quality contract to support the United States Preventive Services Task Force. Previous topics: screening for thyroid cancer screening for colorectal cancer behavioral sexual risk-reduction counseling in primary care to prevent sexually transmitted infections screening for idiopathic scoliosis screening for peripheral artery disease nontraditional cardiovascular disease risk assessment screening for syphilis in pregnant women Household None Self None Household None Self None Self None Household None Self None Household None Self None	Household None + Agency for Healthcare Research and Quality contract to support the United States Preventive Services Task Force. Previous topics: screening for thyroid cancer screening for colorectal cancer behavioral sexual risk-reduction counseling in primary care to prevent sexually transmitted infections screening for idiopathic scoliosis screening for peripheral artery disease nontraditional cardiovascular disease risk assessment screening for syphilis in pregnant women Household None + Self None + Household None + Self None + Household None + Self None + Household None + Self 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.

linjes	Digitally signed by linjes Date: 2019.03.25 15:08:52 -07'00'	3/25/2019
Signature		Date

RELEVANT PUBLICATIONS	
Copy and paste into box below or send as attachment.	

Name: Michael F. Maroto,	JD, MBA					
Role:						
	tee	☐ ACP Staff or Leadership				
Performance Measuremer						
☐ High Value Care Committe						
ACTIVE (Current)	Belongs to	Description including amount of value or incom	ne			
Fuendarius aut	Self	The Maroto Law Group, PC			+	-
Employment	Household	Advanced Analysts, Inc.			+	-
Research & Consulting	Self	None			+	-
Roles	Household	None			+	-
	Colf	IBM	\$10,001 -	50,000	+	-
Investment & Proprietary Interests	Self	Align Technology	\$10,001 -	50,000	+	-
interests	Household	None			+	-
Committees, Boards, &	Self	None			+	-
Workgroups/Panels	Household	None			+	-
Other Interests	Self	None			+	-
other affiliations, advocacy, etc.	Household	None			+	-
Please include both peer-re	Non	non-peer-reviewed sources (e.g. newspaper op-e Acute pain ☐ Yes ☒ No invasive ventilation ☐ Yes ☒ No	d; blog)			
	Point	t of care ultrasound Yes No				
		For staff use:	ADD NEW	RESET	•	
INACTIVE (Last 3 years)	Belongs to	Description including amount of value or incom	1e			
Encolormont	Self	None			+	-
Employment	Household	None			+	-
Research & Consulting	Self	None			+	-
Roles	Household	None			+	-
Investment & Proprietary	Self	Novartis AG	\$10,001 -	50,000	+	-
Interests	Household	None			+	-
Committees, Boards, &	Self	None			+	-
Workgroups/Panels	Household	None			+	-
Other Interests	Self	None			+	-
other affiliations, advocacy, etc.	Household	None			+	-

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.						
Michael Maroto, Esq.	Digitally signed by Michael Maroto, Esq. Date: 2019.03.22 14:25:13 -04'00'					
Signature	Date					
DELEVANT DUDUCATIONS						

RELEVANT PUBLICATIONS

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DECLARATION

_			
N	None		

Name: Reem A. Mustafa, N	ИD, MPH, Ph	nD			
Role: ⊠ Clinical Guidelines Commi	ttaa	☐ ACP Staff or Leadership			
Performance Measureme		-			
		e 🔝 Guest			
High Value Care Committe	ee				
ACTIVE (Current)	Belongs to	Description including amount of value or income	<u> </u>		-1
Employment	Self	University of Kansas Medical Center		+	-
Lilipioyillelit	Household	None		+	-
		Patient-centered outcomes in patients with Polycystic kidney disease: community engagement effort	\$1,001 – 5,000	+	-
Research & Consulting Roles	Self	American Society of Hematology: Venous Thromboembolism and Von Willebrand Disease	\$100,001 or more	e +	-
		American College of Rheumatology	\$100,001 or more	e +	-
	Household	None		+	-
Investment & Proprietary	Self	None		+	-
Interests	Household	None		+	-
		Canadian Society of Nephrology: Clinical Guideline Committee	\$0	+	-
	Colf	American Gastroenterology Association: Gastric intestinal metaplasia guidelines	\$0	+	-
Committees, Boards, & Workgroups/Panels	Self	Institute for Clinical and Economic Review, Midwest Comparative Effectiveness Public Advisory Council (vice chair)	\$1,001 – 5,000	+	_
		American Society of Hematology: Sickle Cell Disease	\$0	+	-
	Household	None		+	-
Other Interests	Self	None		+	-
other affiliations, advocacy, etc.	Household	None		+	-
In the last 3 years, have yo	u or any ho	usehold members published on any of the following	ng topic areas?		
Please include both peer-re	eviewed and	non-peer-reviewed sources (e.g. newspaper op-ed	; blog)		
		Acute pain ☐Yes ⊠ No			
	Non	invasive ventilation ☐Yes ☒ No			
		t of care ultrasound ☐Yes ☒ No			
	FUIII				
		For staff use:	DD NEW	RESET	

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

Employment	Self	None	 +	-
	Household	None	 +	-

		Patient-centered outcomes in patients with Polycystic kidney disease: community engagement effort	\$10,001 – 50,000	+	_
Research & Consulting	Self	American Congress of Obstetricians and Gynecologists	\$1,001 – 5,000	+	-
Roles		Renal Cyst Burden of Diagnosis	\$10,001 - 50,000	+	-
		American College of Pathology	\$1,001 – 5,000	+	-
	Household	None		+	-
Investment & Proprietary	Self	None		+	-
Interests	Household	None		+	-
Constitute Parada 0	Self	World Health Organization	\$0	+	-
Committees, Boards, & Workgroups/Panels	Seij	American Association of Sleep Medicine	\$1,001 – 5,000	+	-
	Household	None		+	-
Other Interests	Self	None		+	-
other affiliations, advocacy, etc.	Household	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.

Reem Mustafa	Digitally signed by Reem Mustafa DN: cn=Reem Mustafa, o, ou, email=ramustafa@gmail.com, c=US Date: 2019.03.26 11:49:57 -04'00'
Signature	Date

RELEVANT PUBLICATIONS

Copy and paste into box below or send as attachment.								

	•	bisciosare of interests. Summary Report			
Name: Jeffrey A. Tice, MD,	San Francis	co, CA			
Role:					
	ttee	☐ ACP Staff or Leadership			
Performance Measuremer	nt Committee	e 🔲 Guest			
☐ High Value Care Committe	ee				
ACTIVE (Current)	Belongs to	Description including amount of value or income	e		
	Self	University of California San Francisco	\$100,001 or more	+	-
Employment	Household	Irving Street Pet Hospital	\$10,001 - 50,000	+	-
		NIH NCI Grant - Breast Cancer Risk Assessment/BCSC P01	\$10,001 – 50,000	+	-
		PCORI Grant - RCT of risk based breast cancer screening versus annual screening	\$10,001 - 50,000	+	-
_	Self	Contract with ICER to perform evidence reviews and assist with cost analyses for new drugs and other medical innovations	\$100,001 or more	+	-
		UCSF CME talks on breast cancer, osteoporosis, and on vitamins/dietary supplements	\$1,001 – 5,000	+	-
	Household	None		+	-
Investment & Proprietary	Self	None		+	-
Interests	Household	None		+	-
		Member of the Evidence Based Task Force subcommittee for the Society of General Internal Medicine (SGIM)	\$0	+	-
Committees, Boards, & Workgroups/Panels	Self	NIH Workshop to Facilitate Cancer Systems Epidemiology Research	\$0	+	-
		None		+	-
	Household	None		+	-
Other Interests	Self	Fundraising bicycle ride (Waves to Wine) that raises money for the National MS Society	\$0	+	-
Clinical Guidelines Committee Performance Measurement Committee High Value Care Committee ACTIVE (Current) Employment Research & Consulting Roles Investment & Proprietary Interests Committees, Boards, & Self House Workgroups/Panels Other Interests Other Interests other affiliations, advocacy, etc. In the last 3 years, have you or ar Please include both peer-reviewed	Household	None		+	-
	'				<u> </u>
		usehold members published on any of the followi			
Please include both peer-re	eviewed and	non-peer-reviewed sources (e.g. newspaper op-ed	i; blog)		
		Acute pain ☐Yes ☒ No			
	Non	invasive ventilation			
	Point	t of care ultrasound □Yes 🖂 No			

For staff use:

ADD NEW

RESET

Employment	Self	None		+	-
	Household	Pet Camp	\$1,001 – 5,000	+	-
	поизеном	Colby College	\$1,001 – 5,000	+	-
Research & Consulting Roles	Self	Creighton University: Honoraria for Distinguished Speaker Lecturer	\$1,001 – 5,000	+	-
		Invited Speaker to the National Society for Genetic Couneling to speak on Polygenic Risk Scores and their use in breast cancer risk assessment	\$1,001 – 5,000	+	_
		SF Public Defenders Office, Expert Witness, Microscopy	\$1,001 – 5,000	+	-
	Household	None		+	-
Investment & Proprietary	Self	None		+	-
Interests	Household	None		+	-
Committees, Boards, &	Self	None		+	-
Workgroups/Panels	Household	None		+	-
Other Interests	Self	None		+	-
other affiliations, advocacy, etc.	Household	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.

vpn-10-48-9-23.ucsf.edu	Digitally signed by vpn-10-48-9-23.ucsf.edu DN: cn=vpn-10-48-9-23.ucsf.edu Date: 2019.03.22 11:32:01 -07'00'	3/22/2019
Signature		Date

RELEVANT PUBLICATIONS

opy and paste into box below of send as attachment.									

Name: Janice E. Tuffe	
Role:	
	☐ ACP Staff or Leadership
☐ Performance Measurement Committee	☐ Guest
☐ High Value Care Committee	

ACTIVE (Current)	Belongs to	Description including amount of value or income			-1
Employment	Self	Community Projects EMRGs,-ICEC, Measurement Panel projects and Presentations, Patient Partner participation at conferences, local non medical related project consultations	\$1,001 – 5,000	+	-
	Household	None		+	Ī
		Mathematica, NCQA, Brandeis Innovative Accelerator Project TEP 2016-2018 *Honorarium	Up to \$1,000	+	-
		PCORNET Clinical Data Research Networks PORTAL PROJECT Patient Partner *PEC Stipend/ Travel/HCSRN meeting April 2017-18	\$1,001 – 5,000	+	-
		National Quality Forum Adult Medicaid Core Competencies Measurement Applications Partnership development Travel/Meeting May 2018	\$1,001 – 5,000	+	-
		Yale Center for Outcomes Research and Evaluation (CORE)/ NPFP Measurement development panel *Stipend 2018	Up to \$1,000	+	-
		Academy Health Health Datapalooza Conference 2xs April 2016 & April 2018	\$1,001 – 5,000	+	-
		Patient & Family Centered Care (PFCC) Conference BIDMC Open Notes Panel Travel/*Honoraium March 2018	Up to \$1,000	+	-
Research & Consulting Roles	Self	Health Literacy Conference Health Literacy Annual Research Conference Travel /Conference/ *Stipend October 2016-2018	\$5,001 – 10,000	+	-
		Institute for Patient and Family Centered Care (IPFCC) Conference ACP CPPH and NAM stakeholders 2 presentation sessions /paper development Travel October 2018	Up to \$1,000	+	-
		Kaiser National Quality Conference \$ Travel / Conference June 2018	\$1,001 – 5,000	+	-
		National Health Information Technology Advisory Group *Stipend 2018-2019	Up to \$1,000	+	
		Cochrane Colloquium travel	Up to \$1,000	+	-
		Annual Research Meeting 18 registration	Up to \$1,000	+]-
		GRADE AUA workshop training travel 18 + Reg GRADE Denver workshop scholarship 19	\$1,001 – 5,000	+	-
		PCORI Annual Meeting 2015-2018 Travel and stipends	\$5,001 – 10,000	+	-

ACTIVE (Current)	Belongs to	Description including amount of value or income			
		National Center for Complex Care Conference 2018 *stipend	Up to \$1,000	+	-
	Household	None		+	-
Investment & Proprietary	Self	None		+	-
Interests	Household	None		+	-
		Patient Centered Outcome Research Institute Ambassador 2014-2019	\$0	+	-
		Healthy Washington Consumer Workgroup (member) 2012-2019	\$0	+	-
		Health Care Authority WA State, Title XIX Advisory Committee (member) 2016-2019	\$0	+	-
		Healthy Washington Low Income Populations 2014-2019	\$0	+	-
		Kaiser Washington Senior Caucus program committee 2015-2019	\$0	+	-
Committees, Boards, & Workgroups/Panels	Self	National Quality Forum Innovation Accelerator Program, Long-Term Services and Supports Technical Expert Panel (member) 2017 travel to meeting	\$0	+	_
		NOHLA Northwest Health Law Advocates (patient stakeholder) 2013-2019	\$0	+	-
		Health Care Authority, Notices Work Group Committee (member) 2015-2019	Up to \$1,000	+	-
		Patient and family Leadership Network National Academy of Medicine 2017-2018	\$0	+	-
		Adult Medicaid Measurement Applications Partnerships 2018 NQF	\$0	+	-
		King County Health Care for Homeless Governance Advisory Council and HCH Consumer Advisory Group 2018-2022	\$1,001 – 5,000	+	_
	Household	None		+	-
		Islamic Civic Engagement Project (policy & dissemination)	\$0	+	-
		Seattle University School of Theology and Ministry Ecumenical Interreligous Dialog Council Member 2016-2019	\$0	+	-
		Society for Participator Medicine *membership scholarship 2018-no time set	Up to \$1,000	+	-
		Washington CAN member 2012-2018	\$0	+	-
		Muslims for Evidence Based HealthCare 2017-2019	\$0	+	-
Other Interests other affiliations, advocacy, etc.	Self	Step Up Leadership Summit Snohomish County April 2018	Up to \$1,000	+	-
		National Health Council Quality training February 2018	Up to \$1,000	+	-
		UW CERTAIN Patient Advisory Network 2018	\$1,001 – 5,000	+	-
		G-I-N Network Member 12/2018-	\$0	+	-
		Choosing Wisely National PFAC	\$0	+	-

ACTIVE (Current)	Belongs to	Description including amount of value or income			
		Open Notes National Health Information technology HIT PFAC	Up to \$1,000	+	-
		Kaiser National PFAC	\$0	+	-
	Household	None		+	-
	•		u .		

In the last 3 years, have you or any household members published on any of the following topic areas? Please include both peer-reviewed and non-peer-reviewed sources (e.g. newspaper op-ed; blog)							
Acute pain ☐Yes ☒ No							
Noninvasive ventilation							
Point of care ultrasound ☐Yes ☒ No							

For staff use: ADD NEW RESET

INACTIVE (Last 3 years) Belongs to Description including amount of value or income | Self | None |

Employment	Self	None		+	-
	Household	None		+	-
		Kaiser Group Health Research Institutes' Learning to Integrate Neighborhoods with Clinical Care Project (patient co-investigator) 2015-17	\$5,001 – 10,000	+	-
		PFCCpartners, ACC, NYU Langonne Patient Priority Research of Integrated Care (prioritization project person co-designer) Travel and Meetings 2017	\$1,001 – 5,000	+	-
		National Academies of Medicine, Culture Change and Decision Making (patient advisor) Travel/meeting 2017	\$1,001 – 5,000	+	-
Research & Consulting Roles		Patient Centered Primary Care Collaborative Support and Alignment Network, Transforming Clinical Practice Initiative, Choosing Wisely Panel (presenter) Travel/ *Honorarium 2017	\$1,001 – 5,000	+	-
	Self	American Board of Internal Medicine-AcademyHealth Low Value Care Research prioritization development Travel /meeting 2017	\$1,001 – 5,000	+	-
		National Quality Forum, Innovation Accelerator Program, Long-Term Services and Supports endorsement recommendations Travel /TEP meeeting 2017	\$1,001 – 5,000	+	-
		IMM2017 ACP CPPH Patient Advisors feedback Travel/ *Stipend 2017	\$1,001 – 5,000	+	-
		PCORI Research Annual Meeting Ambassadors Travel/ Meetings/*stipend 2015-2017	\$5,001 – 10,000	+	-
		Consumers United Evidence /E-GAPPS Conferences attended twice Travel /Meeting 2015 & 2017	\$1,001 – 5,000	+	-
		UW CERTAIN INSPIRE Project 2017	Up to \$1,000	+	-
		Hassanah Consulting <3K per year plus above mentioned *Honoraiums / Stipends 2015-2017 #3xs	\$5,001 – 10,000	+	-
	Household	None		+	-

Investment & Proprietary Interests	Self	None		+	-
	Household	None		+	-
		Group Health Advisory Group Assembly (member) 2015	\$0	+	-
Committees Boards 0	Self	Group Health Medical Center Council (member) 2015	\$0	+	-
Committees, Boards, & Workgroups/Panels	Seij	Kaiser Permanente Senior Caucus (program committee/member) 2015-2017	\$0	+	-
		UW CERTAIN Patient Advisory Network 2017	\$0	+	-
	Household	None		+	-
Other Interests other affiliations, advocacy, etc.		Islamic Health Care presentation Virginia Mason	\$0	+	-
	Self	PCORI Tufte on Communicating Expectations (publication)	\$0	+	-
	Household	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.

	Joseph & Suffle.	Digitally signed by Janice Date: 2019.03.29 17:58:36 -07'00'		
Signature			Date	

RELEVANT PUBLICATIONS

Copy and paste into box below or send as attachment.

http://www.thepermanentejournal.org/issues/2018/volume-22-suppl-issue/43-the-permanente-journal/original-research-and-contributions/6890-evaluation-of-the-learning-to-integrate-neighborhoods-and-clinical-care-project-findings-from-implementing-a-new-lay-role-into-primary-care-teams-to-address-social-determinants-of-health.html

Robbins M, Tufte J, Hsu C. Learning to "Swim" with the Experts: Experiences of Two Patient Co-Investigators for a Project Funded by the Patient-Centered Outcomes Research Institute. The Permanente Journal. 2016;20(2):85-88. doi:10.7812/TPP/15-162. https://www.ncbi.nlm.nih.gov/pmc/articles/PMC4867832/

Connecting Primary Care Patients to Community Resources: Lessons Learned From the Development of a New Lay Primary Care Team Role https://digitalrepository.aurorahealthcare.org/jpcrr/vol3/iss3/117/

INITIATIVE TO SUPPORT PATIENT INVOLVEMENT IN RESEARCH (INSPIRE)

http://becertain.org/sites/default/files/INSPIRE%20Phase%20I%20Report%20Final%202016.09.30.pdf

https://annals.org/aim/fullarticle/2674121/hemoglobin-1c-targets-glycemic-control-pharmacologic-therapy-nonpregnant-adults-type

Name: John W. Williams Jr	
Role:	
	☐ ACP Staff or Leadership
☐ Performance Measurement Committee	☐ Guest
☐ High Value Care Committee	

ACTIVE (Current) Belongs to Description including amount of value or income

ACTIVE (Current)	Belongs to	Description including amount of value or income			
		Duke University	\$50,001 – 100,000	+	-
	Self	Durham VA Medical Center	\$100,001 or more	+	-
Employment	Jen	Oak Ridge Associated Universities: Center for Medicare and Medicaid Innovation	\$10,001 – 50,000	+	-
	Household	University of North Carolina-Chapel Hill	\$100,001 or more	+	-
		VA-Evidence Synthesis Program, Senior Science Advisor, Multiple evidence synthesis topics	\$50,001 – 100,000	+	-
		AHRQ, Evidence Based Practice Center, Associate Editor, Evidence synthesis topics	\$10,001 – 50,000	+	-
December 0 Constitution	Self	Patient Centered Outcomes Research Institute, Associate Editor, Comparative effectiveness research	\$10,001 – 50,000	+	-
Research & Consulting Roles		University of Washington: DSMB Member of Comparative effectiveness trial for people with PTSD or Bipolar disorder	\$1,001 – 5,000	+	-
		UpToDate, Author, Depression Screening Chapter	\$1,001 – 5,000	+	_
		VA HSR&D, Co-Investigator, Smoking Cessation Trial	\$0	+	-
	Household	NIH grant, Principal investigator, cancer research	\$10,001 - 50,000	+	_
		NIH, Co-Investigator, cancer research	\$1,001 – 5,000	+	-
Investment & Proprietary	Self	JWW Scientific, Sole proprietor, Medical Journal Editing and Research Methods Workshops	\$10,001 – 50,000	+	-
Interests	Household	None		+	-
	Colf	Healthwise, Science Advisory Board, Behavioral Health	\$1,001 – 5,000	+	-
Committees, Boards, & Workgroups/Panels	Self	VA, presenter, cyberseminars medical grand rounds	\$1,001 – 5,000	+	-
	Household	Association for Molecular Pathology, Alliance for Clinical Trials in Oncology, American Society of Clinical Oncology; Speaker and serves on committees; Cancer Research and molecular testing	\$1,001 – 5,000	+	-
Other Interests	Self	None		+	-
other affiliations, advocacy, etc.	Household	None		+	-

In the last 3 years, have you or any household members publish	ed on any of the following topic areas?
Please include both peer-reviewed and non-peer-reviewed sourc	es (e.g. newspaper op-ed; blog)
Acute pain Yes	⊠ No
Noninvasive ventilation Yes	⊠ No

	Point	t of care ultrasound □Yes ☒ No				
	POIIII					
		For staff use:	ADD NEW	RESET	•	
NACTIVE (Last 3 years)	Belongs to	Description including amount of value or incom	ne			
Employment	Self	None			+	-
	Household	None			+	-
	Self	NIH, CSTI Co-investigator, Research Education	\$5,001 – 10	0,000	+	-
Research & Consulting Roles	Household	ArcherDx, Speaker, Cancer testing	\$1,001 – 5,	000	+	-
Roles	Household	Promega, Speaker, Cancer testing	\$1,001 – 5,	000	+	-
	Colf	GE stock ownership	\$10,001 - 5	50,000	+	-
nvestment & Proprietary nterests	Self	Siemens stock ownership	\$10,001 - 5	50,000	+	-
nterests	Household	None			+	-
Committees, Boards, & Workgroups/Panels		VA QUERI for Team-based behavioral health, Executive Committee Member, Mental health	\$0		+	-
	Self	National Academies of Science, Engineering, and Medicine, Health effects of cannabis and cannabinoids; Committee member	\$0		+	-
	Household	None			+	-
	Self	None			+	-
Other Interests		Debbie's Dream Foundation, Speaker, Gastric cancer	\$1,001 – 5,	000	+	-
ther affiliations, advocacy, etc.	Household	None			+	-
		None			+	-
DECLARATION						
certify that to my knowled will promptly disclose any of	_	ief that I have disclosed my financial and non-fin	ancial intere	sts above	and	11
John W Williams Jr		Digitally signed by John W Williams Jr Date: 2019.03.23 07:25:30 -04'00' Mar 23, 20	019			
ignature		Date				
RELEVANT PUBLICATIO	NS					
Copy and paste into box be	elow or send	d as attachment.				

Name: Timothy J. Wilt, MD	, MPH, MAC	CP			
Role: Clinical Guidelines Commit Performance Measuremen High Value Care Committee	nt Committee	☐ ACP Staff or Leadership ☐ Guest			
ACTIVE (Current)	Belongs to	Description including amount of value or income			
Employment	Self	University of Minnesota School of Medicine; Minneapolis VA Medical Center		+	-
	Household	VA Medical Center and the University of Minnesota		+	-
Research & Consulting Roles		Veteran's Administration: Adaptive sports, TBI (systematic reviews)	\$100,001 or more	+	-
		ACP: Low Testosterone	\$50,001 - 100,000	+	-
		AHRQ-EPC: Osteoporosis, Dementia Evidence reports	\$100,001 or more	+	-
	Self	VA: Prostate cancer Intervention Vs Observation Trial	\$100,001 or more	+	-
		AHRQ: Acute pain and caregiver	\$100,001 or more	+	-
		AHRQ: Acute pain evidence map	\$10,001 - 50,000	+	-
		AUA: treatments for BPH	\$100,001 or more	+	-
		NIH: Methodologic Support for Asthma Guideline	\$100,001 or more	+	-
	Household	Multiple grants on osteoporosis through VA Medical Center and the University of Minnesota	\$100,001 or more	+	-
Investment & Proprietary	Self	None		+	-
Interests	Household	None		+	-
	2.15	VA Preventive Medical Advisory Committee (member)	\$0	+	-
Committees, Boards, &	Self	Midwest CEPAC-ICER	\$0	+	-
Workgroups/Panels	Household	None		+	_
Other Interests	Self	None		+	-
other affiliations, advocacy, etc.	Household	None		+	-
	_	usehold members published on any of the followir non-peer-reviewed sources (e.g. newspaper op-ed			
		Acute pain ⊠Yes ☐ No			
	Non	invasive ventilation ⊠Yes ☐ No			
		of care ultrasound ☐Yes ☒ No			
		For staff use: AD	D NEW RESI	ĒΤ	

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

Employment	Self	None		+	-
Linployment	Household	None		+	-
		International Kidney Foundation; Living Kidney Donors (systematic review)	\$100,001 or more	+	-
		Agency for Healthcare Research and Quality; Insomnia and BPH (systematic review)	\$100,001 or more	+	-
Research & Consulting	Self	National Kidney Foundation; Hemodialysis Adequacy (systematic review)	\$100,001 or more	+	-
Roles		Veteran's Administration; Life expectancy calculators, Traumatic Blast Injury, ERAS, Pain Scale Scores	\$100,001 or more	+	-
		American Urological Association: Surgical Treatments for Benign Prostatic Hyperplasia: A systematic review for a clinical practice guideline	\$100,001 or more	+	
	Household	NIH for Testosterone Trial: PI Salary support	\$5,001 – 10,000	+	-
Investment & Proprietary	Self	None		+	-
Interests	Household	None		+	-
		NCQA overuse advisory panel for PSA testing (member)	\$0	+	-
Committees, Boards, & Workgroups/Panels	Self	Honoraria: Prostate cancer screening; High Value Care. Portland Providence Health Care System (Grand Rounds)	\$1,001 – 5,000	+	-
		NCQA advisory panel for CRC screening (member)	\$0	+	-
	Household	None		+	-
Other Interests	Self	None		+	-
other affiliations, advocacy, etc.	Household	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.

TIMOTHY J. WILT 445612

Digitally signed by TIMOTHY J. WILT 445612 Date: 2019.03.26 14:06:45 -05'00'

Signature Date

RELEVANT PUBLICATIONS

Copy and paste into box below or send as attachment.

AHRQ Acute pain evidence map. Submitted to AHRQ EPC program. We are negotiating a contract with ACP to conduct the evidence report related to "noninvasive ventilation"

Name: Devan Kansagara, N	/ID, MCR						
Role: Clinical Guidelines Commi Performance Measuremen High Value Care Committee ACTIVE (Current)	nt Committee ee	☐ ACP Staff or Leadership ☐ Guest Description including amou	int of value or in	come			
Empley many	Self	Portland VA Medical Center				+	-
Employment	Household	Rheumatologist in community	practice			+	-
		Evidence-based Synthesis Progr Source: Department of Veterar Service PI: Devan Kansagara, MD, MCR Period: 2009-present %Effort: 35	ns Affairs, HSR&D	\$10,001 -	50,000	+	-
Research & Consulting Roles	Self	Center of Innovation: Center to Involvement in Care (CIVIC) Source: VA Health Services Reso Development PI: Steven Dobscha, MD Period: 2013-(5 year project) %Effort: 5 (co-investigator)	·	\$5,001 – 1	0,000	+	-
	Household	None				+	-
Investment & Proprietary	Self	None				+	-
Interests	Household	None				+	-
Committees, Boards, &	Self	None				+	-
Workgroups/Panels	Household	None				+	-
Other Interests	Self	None				+	-
other affiliations, advocacy, etc.	Household	None				+	-
		usehold members published non-peer-reviewed sources (Pain management Yes	e.g. newspaper o		eas?		
			For staff use:	ADD NEW	RESET		

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

Employment	Self	None	 +	-	-
Linployment	Household	None	 +	-	•

					-
Research & Consulting Roles	Self	Patient-aligned Care Team Demonstration Laboratory PI: Devan Kansagara (12/12-present); David Hickam, MD, MPH (09/09-11/12) Source: Veterans Health Administration Period: 2009-2014 %Effort: 35 (as PI), 10 (as coinvestigator from 09/09 -12/12)	\$10,001 – 50,000	+	-
	Household	None		+	-
Investment & Proprietary	Self	None		+	-
Interests	Household	None		+	-
Committees, Boards, &	Self	None		+	-
Workgroups/Panels	Household	None		+	-
Other Interests	Self	None		+	-
other affiliations, advocacy, etc.	Household	None		+	-
		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.

Devan Kansagara	Date: 2019.03.12 10:45:02 -07'00'	Mar 12, 2019
Signature		Date

RELEVANT PUBLICATIONS

•	copy and paste into box below of send as attachment.					

Name: Nick Fitterman MD,	FACP, SFHN	Л					
Role: ⊠ Clinical Guidelines Commit ⊠ Performance Measuremen ☐ High Value Care Committee	nt Committee	☐ ACP Staff or Leadership ☐ Guest					
ACTIVE (Current)	Belongs to	Description including amount	of value or inco	ome			
Employment	Self	Northwell Health				+	-
	Household	Mount Sinai Health System				+	-
Research & Consulting	Self	None				+	-
Roles	Household	None				+	-
Investment & Proprietary	Self	None				+	-
Interests	Household	None				+	-
Committees, Boards, &	Self	none				+	-
Workgroups/Panels	Household	None				+	-
Other Interests	Self	ACP PAC donation				+	-
other affiliations, advocacy, etc.	Household	None				+	-
	viewed and	usehold members published or non-peer-reviewed sources (e. Acute pain Yes invasive ventilation Yes	g. newspaper op No		as?		
	Point	t of care ultrasound Yes	No				
			For staff use:	ADD NEW	RESET		
	ibuted tow	he attached word document. V ards the development of one o				e	
	ve you or ar	ny household members publish	ed on any of the	clinical topic a	reas cover	red	
by these measures?		non-peer-reviewed sources (e.					
□Yes ⊠ No							
INACTIVE (Last 3 years)	Belongs to	Description including amount	of value or inco	ome			

Self

Household

Employment

None

None

INACTIVE (Last 3 years) Belongs to Description including amount of value or income Performed expert chart review for a medical malpractice attorney on a case of missed diagnosis of \$1,001 - 5,000 Self **Research & Consulting** hip fracture (not treatment, no osteoporotic issues **Roles** entered into this assessment) Household None + Self **Investment & Proprietary** None + **Interests** Household None + Self American Board of Internal Medicine \$5,001 - 10,000 Committees, Boards, & + Workgroups/Panels Household None + Self None + Other Interests other affiliations, advocacy, etc. | Household 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. Digitally signed by nick fitterman DN: cn=nick fitterman, o=northwell health, ou, email=nfitterma@northwell.edu, c=US Date: 2019.03.22 16:08:09 -04'00' nick fitterman Signature Date

RELEVANT PUBLICATIONS

RELEVANT MEASURES

Copy and paste into box below or send as attachment.

List in box below or highlight in attached document.

Name: Sandeep Vijan MD,	MS					
Role:						
	ttee	☐ ACP Staff or Leadership				
□ Performance Measurement □ Performance Measurement	nt Committee	☐ Guest				
☐ High Value Care Committe	e					
ACTIVE (Current)	Belongs to	Description including amount of value or incom	e			
[mulaymant	Self	University of Michigan; Ann Arbor VA Health System			+	-
Employment	Household	University of Michigan Health System			+	-
Research & Consulting	Self	UM: Implementation of Evidence-Based Practice for Benign Paroxysmal Positional Vertigo	\$10,001 – 50	,000	+	-
Roles		UpToDate: Screening for hyperlipidemia	\$1,001 - 5,00	00	+	-
	Household	None			+	-
Investment & Proprietary	Self	None			+	-
Interests	Household	None			+	-
Committees, Boards, &	Self	Endocrine society: TEP for quality measures on hypoglycemia risk	\$0		+	-
Workgroups/Panels	Household	None			+	-
Other Interests	Self	None			+	-
$other\ affiliations,\ advocacy,\ etc.$	Household	None			+	-
		usehold members published on any of the following non-peer-reviewed sources (e.g. newspaper op-ed Acute pain Tyes No		; ?		
	Non	invasive ventilation ☐Yes ☒ No				
	Point	of care ultrasound □Yes ⊠ No				
		For staff use: A	DD NEW	RESET		
	ributed towa	he attached word document. Within the last 3 year ards the development of one of these measures o			е	
□Yes ⊠ No						
by these measures?		ny household members published on any of the clips of the		eas cover	red	
□Yes ⊠ No						
INACTIVE (Last 3 years)	Belongs to	Description including amount of value or incom	е			

Employment	Self	None		+	-
Employment	Household	None		+	-
		Systematic Design of Meaningful Presentations of Medical Test Data for Patients	\$5,001 – 10,000	+	-
Danageh & Canaghting	Self	VA: Technologically Enhanced Coaching (TEC): A Program for Improving Diabetes Outcomes	\$50,001 – 100,000	+	_
Research & Consulting Roles	зеп	UM: Implementation of Evidence-Based Practice for Benign Paroxysmal Positional Vertigo	\$10,001 – 50,000	+	-
		VA: Promoting Veteran-Centered Colorectal Cancer Screening	\$10,001 – 50,000	+	-
	Household	None		+	-
Investment & Proprietary	Self	None		+	-
Interests	Household	None		+	-
Committees, Boards, &	Self	National Diabetes Education Program Steering Committee (ACP representative)	\$0	+	-
Workgroups/Panels	Household	None		+	-
Other Interests	Self	None		+	-
other affiliations, advocacy, etc.	Household	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.

Sandeep Vijan	Digitally signed by Sandeep Vijan Date: 2019.04.05 14:22:22 -04'00'	4/5/2019
Signature		Date

RELEVANT PUBLICATIONS

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RELEVANT MEASURES

Ī	List in box below or highlight in attached document.							

Name: Cynthia J. Appley					
Role:					
Clinical Guidelines Commi	ttee	☐ ACP Staff or Leadership			
Performance Measureme	nt Committee	e 🔀 Guest			
☐ High Value Care Committe	ee				
ACTIVE (Current)	Belongs to	Description including amount of value or income	ò		
Employment	Self	Mercy One Siouxland Heart and Vascular	\$10,001 – 50,000	+	-
Limployment	Household	Appley Farms, Inc.	\$50,001 – 100,000	+	-
Research & Consulting	Self	None		+	-
Roles	Household	None		+	-
Investment & Proprietary	Self	None		+	-
Interests	Household	None		+	-
Committees, Boards, &	Self	None	The second secon	+	
Workgroups/Panels	Household	None		+	-
Other Interests	Self	None	COMPANIA (Alle MARKAMA) ANALONIA MARKAMA (Alle MARKAMA) ANALON	+	-
other affiliations, advocacy, etc.	Household	None	***	+	-
		usehold members published on any of the following non-peer-reviewed sources (e.g. newspaper op-ed Acute pain Yes 🔀 No			
	Non	invasive ventilation ☐Yes 🛛 No			
-	Point	of care ultrasound □Yes ⊠ No			
		For staff use: AD	DD NEW RESET	 Г	
INACTIVE (Last 3 years)	Belongs to	Description including amount of value or income	1		
Employment	Self	None		+	-
Linployment	Household	None	- And Annual Transcription of the Control of the Co	+	-
Research & Consulting	Self	None	AND THE PROPERTY OF THE PROPER	+	-
Roles	Household	None	CONTRACTOR	+	-
Investment & Proprietary	Self	None		+	-
Interests	Household	None		+	-
Committees, Boards, &	Self	None	TO PAPE CONTRACTOR CON	+	-
Workgroups/Panels	Household	None		+	-
Other Interests	Self	None		+	-
other affiliations, advocacy, etc.	Household	None		+	_

I certify that to my knowledge and belief that I have disclosed me will promptly disclose any changes.	ny financial and non-financial interests above and I
Signature Cyroley	413d19 Date
RELEVANT PUBLICATIONS	
Copy and paste into box below or send as attachment.	

DECLARATION

Name:	Larry Curley

Role:	
X Clinical Guidelines Committee	ACP Staff or Leadership
Performance Measurement Committee	X Guest
High Value Care Committee	

ACTIVE (Current)	Belongs to	Description including amount of va-	lue or income†
Frankersen	Self	National Indian Council on Aging	G
Employment	Household	None	
		None	
Research & Consulting	Self	None	
Roles		None	***
	Household	None	
Investment & Proprietary	Self	None	
Interests	Household	None	And the second s
	: C ~ I f	None	
Committees, Boards, &	Self	None	
Workgroups/Panels	Household	None	
	riouserioia	None	
Other Interests	Self	None	
Other interests	Household	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)

Acute pain	Yes	Х	No
Noninvasive ventilation		X	
Point of care ultrasound		X	

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

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

a) \$0

- e) \$10,001 to 50,000
- b) Up to \$1000 f) \$50,001 to 100,000 c) \$1,001 to 5,000 g) \$\ge\$100,001

- d) \$5,001 to 10,000

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	Self	The Navajo Nation	
	Household	None	in the second se
Research & Consulting Roles	Self	None	
	Household	None	
Investment & Proprietary Interests	Self	None	
	Household	None	
Committees, Boards, & Workgroups/Panels	Self	None	177
	Household	None	
Other Interests	Self	None	-
	Household	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

4/30/19 Date

RELEVANT PUBLICATIONS

Copy and paste below or send as attachment.

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

a) \$0

e) \$10,001 to 50,000

b) Up to \$1000

f) \$50,001 to 100,000

c) \$1,001 to 5,000

g) ≥\$100,001

d) \$5,001 to 10,000

ole:			
Role:			
☐ Clinical Guidelines Committee	☐ ACP Staff or Leadership		
$\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ $	⊠ Guest		
☐ High Value Care Committee			

ACTIVE (Current) Belongs to Description including amount of value or income

ACTIVE (Current)	belongs to	Description including amount of value or income			
Employment	Self	None		+	-
	Household	None		+	-
Roles	Self	DOD, CDMRP's Lung Cancer Research Program (LCRP) as a Reviewer (< \$2k/yr)	\$1,001 – 5,000	+	-
		University of Michigan as an IRB member and as a reviewer for their MICHR (Research Institute) (\$8,100 in 2018)	\$5,001 – 10,000	+	_
		PCORI (Patient Centered Outcomes Research Institute) Ambassador Program as an ambassador	\$0	+	-
		Emmes Corporation - the oversite and administration contractor for NCI's CIRB programs. I'm a board member on NCI's Late Phase Emphasis Board, and an alternate on their Early Phase Emphasis Board. (\$9,600 in 2018)	\$5,001 – 10,000	+	_
		Oregon Health System - I am a patient advocate on their Meta-LARK ACP project. (< \$2,000 in 2018)	\$1,001 – 5,000	+	-
		Peer Medical / Doctor Footprint - I am a consultant to a start up medical repository provider. The product is still in pre-release mode, and my role is to provide a patient perspective to the effort. (Probably < \$10,000 in 2019 - nothing in 2018.)	\$5,001 – 10,000	+	-
	Household	None		+	-
Investment & Proprietary	Self	None		+	-
Interests	Household	None		+	-

			1		
Committees, Boards, & Workgroups/Panels		University of Michigan, Mott Children's Hospital: Mott Executive Committee member; Pediatric Ethics Committee member; Continuum of Care Committee member; Dad's Council member; IRB member.	\$0	+	-
	Self	St. Joseph Mercy Health System (Trinity Health), Ann Arbor, MI: Patient Experience Advisory Council chair; Cancer Council member; Pain Management Council member.	\$0	+	-
		NCI-VA Navigate Program Oversight Executive Board Member. My role is as the patient advocate on the executive committee overseeing this joint agency effort to create mechanics to launch NCI cancer research at a select group of VA hospitals, with a goal of being able to replicate the effort at VA hospitals nationally.	\$0	+	_
	Household	None		+	-
Other Interests other affiliations, advocacy, etc.	Self	Lung Cancer Research Foundation - I work with this non-profit to help select research projects to be funded.	\$0	+	-
		The Lung Cancer Alliance (Lobbied for lung cancer research funding in DC)	\$0	+	-
	Household	None		+	-
	viewed and Non	usehold members published on any of the following non-peer-reviewed sources (e.g. newspaper op-ed) Acute pain			
		For staff use:	DD NEW RESE	Т	
INACTIVE (Last 3 years)	Belongs to	Description including amount of value or income			1
Employment	Self	None		+	-
ı j	Household	None		+	-
Research & Consulting	Self	None		+	-
Roles	Household	None		+	-

+ -

+

+

+

+ -

--

Self

Self

Self

Household

Household

Investment & Proprietary

Committees, Boards, &

other affiliations, advocacy, etc. Household

Workgroups/Panels

Other Interests

Interests

None

None

None

None

None

None

Belongs to Description including amount of value or income

ACTIVE (Current)

I certify that to my knowledge and will promptly disclose any change	-	cial and non-financial interests above and I
James Pantelas	Digitally signed by James Pantelas Date: 2019.04.05 14:44:32 -04'00'	5 APR 2019
Signature		Date
RELEVANT PUBLICATIONS		
Copy and paste into box below or	send as attachment.	

DECLARATION

Name: Melissa (Missy) Smi	th				
Role: Clinical Guidelines Commi Performance Measuremen High Value Care Committee	nt Committee	☐ ACP Staff or Leadership E ☑ Guest			
ACTIVE (Current)	Belongs to	Description including amount of value or income	:		
C	Self	Traverse Bay Area Intermediate School District	\$10,001 – 50,000	+	
Employment	Household	Britten Studios	\$100,001 or more	+	-
Research & Consulting	Self	None	MPD with the standard field the color was been designed and experience and color was been about the color of the standard and the color of the color of the standard and the color of the	+	-
Roles	Household	None		+	-
Investment & Proprietary	Self	None		+	
Interests	Household	None		+	-
Committees, Boards, &	Self	The University of Michigan Mott Children's Hospital Congenital Heart Center	•	+	-
Workgroups/Panels	Household	None		+	-
Other Interests	Self	None		+	-
other affiliations, advocacy, etc.	Household	None		+	-
	eviewed and	usehold members published on any of the following non-peer-reviewed sources (e.g. newspaper op-ed Acute pain Yes No Invasive ventilation Yes No		G.	
INACTIVE (Last 3 years)	Relonas to	For staff use: AD Description including amount of value or income	D NEW RESE	T	AUGUST SE MANA
	Self	None		+	_
Employment	Household	None		+	_
Research & Consulting	Self	None		+	-
Roles	Household	None	од вашительного и то велова я я дом лик яченоваю « яко пимова» може може може и може може може може може може п	+	_
Investment & Proprietary	Self	Gun Safe Mom	\$0	+	
Interests	Household	None		+	_
Committees, Boards, &	Self	None		+	-
Workgroups/Panels	Household	None		+	-
Other Interests	Self	None		+	-
other affiliations, advocacy, etc.	Household	None		+	-

DECLARATION	
I certify that to my knowledge and belief that I have disclosed my financial and non-financial intere	sts above and I
will promptly disclose any changes.	
Signature 64/38/19 Date	
RELEVANT PUBLICATIONS	
Copy and paste into box below or send as attachment.	

Name: Douglas M. DeLong	, MD, FACP			
Role:				
Clinical Guidelines Commi	ttee			
Performance Measureme	nt Committee	Guest		
☐ High Value Care Committe	ee			
ACTIVE (Current)	Belongs to	Description including amount of value or incom	e	
Employment	Self	Bassett Healthcare		+ -
	Household	None		+ -
Research & Consulting	Self	None		+ -
Roles	Household	None		+ -
Investment & Proprietary	Self	None		+ -
Interests	Household	None		+ -
Committees, Boards, &	Self	New York Medicaid Basic Benefit Review Committee (member)	\$0	+ -
workgroups/Paneis	Household	None		+ -
THE CONTRACT OF THE CONTRACT O	ACTIVITIES OF THE PROPERTY OF	ACP Leadership day (participant)	\$0	+ -
Other Interests	Self	NYACP advocacy day (participant)	\$0	+ -
other affiliations, advocacy, etc.		Medical Society of the State of New York (member)	\$0	+ -
	Household	None		+ -
	eviewed and Non	usehold members published on any of the follow non-peer-reviewed sources (e.g. newspaper op-e Acute pain Yes No Invasive ventilation Yes No of care ultrasound Yes No		s?
		For staff use: A	DD NEW	RESET
household members conti (measure on the same top Yes No Within the last 3 years, has by these measures?	ributed towa ic)? ve you or an	ne attached word document. Within the last 3 yeards the development of one of these measures on the development of one of these measures on the classical process of the classical process. The development of the classical process of the classical	or a competing	g measure
INACTIVE (Last 3 years)	Belongs to	Description including amount of value or incom	e	

F	Self	None		+	-
Employment	Household	None		+	-
Research & Consulting	Self	None		+	-
Roles	Household	None		+	
nvestment & Proprietary	Self	None		+	
nterests	Household	None		+	
Committees, Boards, &	Self	None		+	
Workgroups/Panels	Household	None	=	+	
Other Interests	Self	None		+	
other affiliations, advocacy, etc.	Household	None		+	
DECLARATION I certify that to my knowle will promptly disclose any Signature	dge and bel	ief that I have disclosed my financial and not			d

RELEVANT MEASURES

List in box below or highlight in attached document.

Name: Robert M. McLean,	MD, FACP				
Role:					
Clinical Guidelines Commi	ttee				
Performance Measuremen	nt Committee	e 🔲 Guest			
☐ High Value Care Committe	ee				
ACTIVE (Current)	Belongs to	Description including amount of value or income	2		
FI	Self	Northeast Medical Group	\$100,001 or more	+	-
Employment	Household	None		+	-
Research & Consulting	Self	None		+	-
Roles	Household	None		+	-
Investment & Proprietary	Self	None		+	_
Interests	Household	None		+	
Committees, Boards, &	Self	State of Connecticut Healthcare Innovation Steering Committee	\$0	+	
Workgroups/Panels	Household	None		+	-
Other Interests	Self	None	ment Academic resistance con a compression de la compression della	+	-
other affiliations, advocacy, etc.	Household	None		+	-
	eviewed and Non	usehold members published on any of the following non-peer-reviewed sources (e.g. newspaper operation			
		For staff use: A	DD NEW RES	ET	
household members conti (measure on the same top	ributed tow	he attached word document. Within the last 3 year ards the development of one of these measures o			
☐Yes No			AND SHARE SH		
by these measures?		y household members published on any of the cli non-peer-reviewed sources (e.g. newspaper op-ed		rered	
□Yes No	10000				
INACTIVE (Last 3 years)	Belonas to	Description including amount of value or incom-	e		
	Self	None		+	-
Employment	Household	None		+	-

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

Research & Consulting	Self	None		+	-
Roles	Household	None		+	-
Investment & Proprietary	Self	None		+	-
Interests	Household	None	postanteaca o carac um enterno de er da casaca o coccaren em de eferrir fronte en el coccaren em de estar el casaca de estar el	+	-
	м менен по под под под под под под под под под	ACP PAC, Chair	\$0	+	-
		Committee on Rheumatologic Care of American College of Rheumatology	\$0	+	-
Committees Decade 0	Colf	Advisory Committee to Health Insurance Exchange of Connecticut	\$0	+	-
Committees, Boards, & Workgroups/Panels	Self	ABIM Rheumatology Board	\$1,001 – 5,000	+	-
Trongroups, runers		Board of Directors of Northeast Medical Group of Yale New Haven Health Systems	\$0	+	-
		Quality of Care Committee - American College of Rheumatology	\$0	+	-
	Household	None		+	-
Other Interests	Self	None		+	-
other affiliations, advocacy, etc.	Household	None		+	-

DECLARATION
I certify that to my knowledge and belief that I have disclosed my financial and non-financial interests above and I
Signature Date
RELEVANT PUBLICATIONS
Copy and paste into box below or send as attachment.
RELEVANT MEASURES
List in box below or highlight in attached document.

Name: Wayne H. Bylsma, P	hD				
Role:	ttaa	✓ ACD Staff or Loadership			
Clinical Guidelines Commit		□ ACP Staff or Leadership			
Performance Measuremer		e 📋 Guest			
High Value Care Committe	e				
ACTIVE (Current)	Belongs to	Description including amount of value or income			
Employment	Self	American College of Physicians		+	-
Employment	Household	Ewing Cole		+	-
Research & Consulting	Self	None		+	-
Roles	Household	None		+	-
Investment & Proprietary	Self	None		+	-
Interests	Household	None		+	-
Committees, Boards, &	Self	None		+	-
Workgroups/Panels	Household	None		+	-
Other Interests	Self	None		+	-
other affiliations, advocacy, etc.	Household	None		+	-
	eviewed and Non	usehold members published on any of the following non-peer-reviewed sources (e.g. newspaper op-ed Acute pain Yes No			
		For staff use: AD	DD NEW RESE	Т	
		he attached word document. Have you or any house of one of these measures or a competing measure		me	
□Yes □ No					
		published on any of the clinical topic areas covered non-peer-reviewed sources (e.g. newspaper op-ed		?	
□Yes □ No					
INACTIVE (Last 3 years)	Belonas to	Description including amount of value or income			
	Self	None		+	-
Employment	Household	None		+	_

Research & Consulting	Self	None			+	
Roles	Household	None			+	
nvestment & Proprietary	Self	None			+	Ī
nterests	Household	None			+	Ī
Committees, Boards, &	Self	None			+	Ï
Workgroups/Panels	Household	None			+	Ï
Other Interests	Self	None			+	Ī
other affiliations, advocacy, etc.	Household	None			+	Ī
certify that to my knowle will promptly disclose any	•	lief that I have disclosed my financial an	d non-finaı	ncial interests above	e an	d
certify that to my knowle will promptly disclose any	•	Digitally signed by Wayne H. Bylsma Div. cn=Wayne H. Bylsma, o=ACP, ou=Executive Office, email=wbylsma@acponline.org, c=US Date: 2019.03.28 14:13:54-0400°	od non-fina 03.28.2019	ncial interests above	e an	d
certify that to my knowled will promptly disclose any Wayne H. Bylsma	•	Digitally signed by Wayne H. Bylsma DN: cn=Wayne H. Bylsma, o=ACP, ou=Executive Office, email=wbylsma@acponline.org, c=US		ncial interests above	e an	d
DECLARATION I certify that to my knowled will promptly disclose any Wayne H. Bylsma Signature RELEVANT PUBLICATIO	changes.	Digitally signed by Wayne H. Bylsma DN: cn=Wayne H. Bylsma, o=ACP, ou=Executive Office, email=wbylsma@acponline.org, c=US	03.28.2019	ncial interests above	e an	d
certify that to my knowled will promptly disclose any wayne H. Bylsma Gignature	ons	Digitally signed by Wayne H. Bylsma DN: cn=Wayne H. Bylsma, o=ACP, ou=Executive Office, email=wbylsma@acponline.org, c=US Date: 2019.03.28 14:13:54 -04'00'	03.28.2019	ncial interests above	e an	d
certify that to my knowled will promptly disclose any wayne H. Bylsma Gignature	ons	Digitally signed by Wayne H. Bylsma DN: cn=Wayne H. Bylsma, o=ACP, ou=Executive Office, email=wbylsma@acponline.org, c=US Date: 2019.03.28 14:13:54 -04'00'	03.28.2019	ncial interests above	e an	d
certify that to my knowled will promptly disclose any elements with the work of the work o	ons	Digitally signed by Wayne H. Bylsma DN: cn=Wayne H. Bylsma, o=ACP, ou=Executive Office, email=wbylsma@acponline.org, c=US Date: 2019.03.28 14:13:54 -04'00'	03.28.2019	ncial interests above	e an	- -
certify that to my knowled will promptly disclose any Wayne H. Bylsma Signature	ons	Digitally signed by Wayne H. Bylsma DN: cn=Wayne H. Bylsma, o=ACP, ou=Executive Office, email=wbylsma@acponline.org, c=US Date: 2019.03.28 14:13:54 -04'00'	03.28.2019	ncial interests above	e an	

Name: Kate Carroll, MPH							
Role:							
☐ Clinical Guidelines Commit	ttee						
Performance Measuremer							
☐ High Value Care Committe		Guest					
riigii valae care committe							
ACTIVE (Current)	Belongs to	Description including am	ount of value or incom	e			
	Self	American College of Physicia	ns			+	-
Employment	Household	The Beasley Firm (personal in malpractice)	njury and medical			+	-
Decearsh & Consulting	Self	None				+	-
Research & Consulting	Household	None				+	-
Investment & Proprietary	Self	None				+	-
Interests	Household	None			Ī	+	-
Committees, Workgroups,	Self	None				+	-
& Advisory Roles	Household	None				+	-
Other Interests	Self	None				+	-
other affiliations, advocacy, etc.	Household	None				+	_
In the last 3 years, have yo Please include both peer-re					ıs?		
		Acute pain Yes	⊠ No				
	Non	invasive ventilation Yes	⊠ No				
	Point	of care ultrasound \(\subseteq Yes	⊠ No				
			For staff use: A	DD NEW	RESET		
Please review the list of mocontributed towards the dotopic)?			•			ne	
□Yes ⊠ No							
Have you or any household Please include both peer-re	-	•		•	easures?		
□Yes ⊠ No							
INACTIVE (Last 3 years)	Belongs to	Description including am	ount of value or incom	е			
	Self	None				+	-

Employment

Household None

INACTIVE (Last 3 years)	Belongs to	Description including amount of value or	income		
Research & Consulting	Self	None		+	-
Roles	Household	None		+	-
Investment & Proprietary	Self	None		+	-
Interests	Household	None		+	Ī
Committees, Workgroups,	Self	None		+	-
& Advisory Roles	Household	None		+	-
Other Interests	Self	None		+	-
other affiliations, advocacy, etc.	Household	None		+	-
DECLARATION I certify that to my knowle will promptly disclose any	•	ief that I have disclosed my financial and n	on-financial interests	s above an	d
I certify that to my knowle	•	ief that I have disclosed my financial and n Digitally signed by Kate Carroll DN: cn=Kate Carroll, o, ou, email=kcarroll@acponline.org, c=US Date: 2019.03.28 11:33:35 -04'00'	on-financial interests	s above an	d
I certify that to my knowle will promptly disclose any	•	Digitally signed by Kate Carroll DN: cn=Kate Carroll, o, ou, email=kcarroll@acponline.org, c=US		s above an	d
I certify that to my knowle will promptly disclose any Kate Carroll	changes.	Digitally signed by Kate Carroll DN: cn=Kate Carroll, o, ou, email=kcarroll@acponline.org, c=US Date: 2019.03.28 11:33:35 -04'00'		s above an	d
I certify that to my knowle will promptly disclose any Kate Carroll Signature	changes.	Digitally signed by Kate Carroll DN: cn=Kate Carroll, o, ou, email=kcarroll@acponline.org, c=US Date: 2019.03.28 11:33:35 -04'00'		s above an	d
I certify that to my knowled will promptly disclose any Kate Carroll Signature RELEVANT PUBLICATION	changes.	Digitally signed by Kate Carroll DN: cn=Kate Carroll, o, ou, email=kcarroll@acponline.org, c=US Date: 2019.03.28 11:33:35 -04'00'		s above an	d
I certify that to my knowled will promptly disclose any Kate Carroll Signature RELEVANT PUBLICATION	changes.	Digitally signed by Kate Carroll DN: cn=Kate Carroll, o, ou, email=kcarroll@acponline.org, c=US Date: 2019.03.28 11:33:35 -04'00'		s above an	d
I certify that to my knowled will promptly disclose any Kate Carroll Signature RELEVANT PUBLICATION	changes.	Digitally signed by Kate Carroll DN: cn=Kate Carroll, o, ou, email=kcarroll@acponline.org, c=US Date: 2019.03.28 11:33:35 -04'00'		s above an	d

Name: Sarah Dinwiddie, RN	I, MSN				
Role:					
☐ Clinical Guidelines Commit	ttee	□ ACP Staff or Leadership			
Performance Measuremer	nt Committee	 □ Guest			
☐ High Value Care Committe	e	_			
ACTIVE (Current)	Belongs to	Description including amount of value or income	1		
Employment	Self	American College of Physicians	\$50,001 – 100,000	+	-
Employment	Household	Town Sports International	\$50,001 – 100,000	+	-
Research & Consulting	Self	None		+	-
	Household	None		+	-
Investment & Proprietary Interests	Self	None		+	-
	Household	None		+	-
Committees, Workgroups,	Self	None		+	-
& Advisory Roles	Household	None		+	-
Other Interests	Self	American Nurses Association	\$0	+	-
	Household	None		+	-
	viewed and Non	usehold members published on any of the followir non-peer-reviewed sources (e.g. newspaper op-ed Acute pain ☐ Yes ☒ No invasive ventilation ☐ Yes ☒ No tof care ultrasound ☐ Yes ☒ No			
		For staff use: AD	D NEW RESET	Γ	
		he attached word document. Have you or any house of one of these measures or a competing measure		me	
□Yes ⊠ No					
		published on any of the clinical topic areas covered			
·	viewed and	non-peer-reviewed sources (e.g. newspaper op-ed	; blog)		
□Yes ⊠ No					
INACTIVE (Last 3 years)	Belongs to	Description including amount of value or income			
Employment	Self	Drexel University		+	-
Employment -	Household	None		+	-

Research & Consulting	Self	None		+
oles	Household	None		+
nvestment & Proprietary	Self	None		+
nterests	Household	None		+
Committees, Workgroups,	Self	National Quality Forum, Interoperability Committee (member)		+
& Advisory Roles	Household	None		+
Other Interests	Self	None		+
other affiliations, advocacy, etc.	Household	None		+
certify that to my knowle will promptly disclose any	_	lief that I have disclosed my financial and non-fina	ncial interests above	and
certify that to my knowle will promptly disclose any	_	Digitally signed by Sarah Dinwiddie Disc. consarah Dinwiddie, on-American College of Physicians, ou, email=sdinwiddie@acponline.org, c=US Apr 15, 201		and
certify that to my knowle will promptly disclose any Sarah Dinwiddie	_	Digitally signed by Sarah Dinwiddie DN: cn=Sarah Dinwiddie, o=American College of Physicians, ou, email=sdinwiddie@acponline.org, c=US Apr 15, 201		and
certify that to my knowle will promptly disclose any Sarah Dinwiddie	changes.	Digitally signed by Sarah Dinwiddie DN: cn-Sarah Dinwiddie, o-American College of Physicians, ou, email=sdinwiddie@acponline.org, c=US Apr 15, 201 Date: 2019.04.15 11:21:49-04'00'		and
certify that to my knowle will promptly disclose any Sarah Dinwiddie	ons	Digitally signed by Sarah Dinwiddie DN: cn=Sarah Dinwiddie, o=American College of Physicians, ou, email=sdinwiddie@acponline.org, c=US Date: 2019.04.15 11:21:49 -04'00' Date Date		and
certify that to my knowle will promptly disclose any Sarah Dinwiddie	ons	Digitally signed by Sarah Dinwiddie DN: cn=Sarah Dinwiddie, o=American College of Physicians, ou, email=sdinwiddie@acponline.org, c=US Date: 2019.04.15 11:21:49 -04'00' Date Date		and
DECLARATION I certify that to my knowle will promptly disclose any Sarah Dinwiddie Signature RELEVANT PUBLICATIO Copy and paste into box be	ons	Digitally signed by Sarah Dinwiddie DN: cn=Sarah Dinwiddie, o=American College of Physicians, ou, email=sdinwiddie@acponline.org, c=US Date: 2019.04.15 11:21:49 -04'00' Date Date		and
certify that to my knowle will promptly disclose any Sarah Dinwiddie	ons	Digitally signed by Sarah Dinwiddie DN: cn=Sarah Dinwiddie, o=American College of Physicians, ou, email=sdinwiddie@acponline.org, c=US Date: 2019.04.15 11:21:49 -04'00' Date Date		and

Name: Steve Majewski		<u> </u>			
Role:					
Clinical Guidelines Commi	ittaa				
Performance Measureme					
High Value Care Committee		duest			
mgn value care committe	cc				
ACTIVE (Current)	Belongs to	Description including amount of value or incom	ie		
	Self	American College of Physicians		+	-
Employment	Household	None		+	-
Research & Consulting	Self	None		+	-
Roles	Household	None	_	+	-
Investment & Proprietary	Self	None		+	-
Interests	Household	None		+	-
Committees, Boards, &	Self	None	700	+	-
Workgroups/Panels	Household	None		+	-
Other Interests	Self	None		+	-
other affiliations, advocacy, etc.	Household	None		+	-
		Acute pain Yes No invasive ventilation Yes No t of care ultrasound Yes			
	POIN	t of care ditrasoundYes No			
INACTIVE (Last 3 years)	Relonas to	For staff use: A	ADD NEW RESE	T	
	Self	None		+	-
Employment	Household	None		+	-
Research & Consulting	Self	None	-+	+	-
Roles	Household	None		+	-
Investment & Proprietary	Self	None		+	-
Interests	Household	None	250	+	-
Committees, Boards, &	Self	None		+	-
Workgroups/Panels	Household	None		+	-
Other Interests	Self	None		+	_
	Household	None		+	_

DECLARATION		
I certify that to my knowledge and belief that I have disclose will promptly disclose any changes.	sed my financial and non-financial interests above a	nd I
Signature Way	4/5/19 Date	
RELEVANT PUBLICATIONS		
Copy and paste into box below or send as attachment.		

Name: Darilyn V. Moyer, N	1D, FACP				
Role: Clinical Guidelines Commic Performance Measuremen High Value Care Committee	nt Committee				
ACTIVE (Current)	Belongs to	Description including amount of value or incor	ne		
Employment	Self	American College of Physicians		+	_
Limployment	Household	Inspira Health		+	-
Passarch & Consulting	Self	None		+	-
Research & Consulting	Household	None		+	-
Investment & Proprietary	Self	None		+	-
Interests	Household	None		+	-
		Council of Medical Subspecialty Societies Board of Directors	\$0	+	-
		Subspecialty Society CEO Council	\$0	+	-
Committees, Workgroups,	Self	Vice Chair, Patient-Centered Primary Care Collaborative	\$0	+	-
& Advisory Roles		Evidence-based Benefit Design/National Business Group on Health	\$0	+	-
		AMA Delegation	\$0	+	-
	Household	None		+	-
Other Interests	Self	American College of Physicians PAC	\$0	+	-
other affiliations, advocacy, etc.	Household	None		+	-
	eviewed and	usehold members published on any of the follow non-peer-reviewed sources (e.g. newspaper op-		P	
		invasive ventilation ☐Yes ☒ No			
	Point	of care ultrasound Yes No			
		For staff use:	ADD NEW	RESET	
contributed towards the d topic)?		he attached word document. Have you or any he of one of these measures or a competing meas			
□Yes ⊠ No					
		published on any of the clinical topic areas cover non-peer-reviewed sources (e.g. newspaper op-		asures?	

□Yes ⊠ No						
INACTIVE (Last 3 years)	Belongs to	Description including amount of value	e or income	2		
Fundament	Self	Temple University			+	-
Employment	Household	Penn Jersey Pulmonary Associates			+	-
Research & Consulting	Self	None			+	-
Roles	Household	None			+	-
Investment & Proprietary	Self	None			+	-
Interests	Household	None			+	-
Committees, Workgroups, & Advisory Roles	Colf	American College of Physicians, Board of R (chair and chair-elect)	Regents	\$100,001 or more	+	-
	Seij	Alliance for Academic Internal Medicine AcCommittee	dvocacy	\$0	+	-
	Household	None			+	-
Other Interests	Self	None			+	-
$other\ affiliations,\ advocacy,\ etc.$	Household	None			+	-
will promptly disclose any	_	ief that I have disclosed my financial ar				
Darilyn Moyer		DN: cn=Darilyn Moyer, o=American College of Physicians, ou=Executive Office, email=dmoyer@acponline org, c=US Date: 2019.04.08 09:47:02 -04'00'	April 8, 201	9		
Signature			Date			
RELEVANT PUBLICATIO	NS					
Copy and paste into box be	elow or send	d as attachment.				
RELEVANT MEASURES						
List in box below or highlig	ht in attach	ed document.				

Name: Amir Qaseem, MD, PhD, MHA, FACP					
□ ACP Staff or Leadership					
☐ Guest					

ACTIVE (Current) Belongs to Description including amount of value or income

Telf Household Telf Household Telf	American College of Physicians None Editor (Evidence-based Medicine), DynaMed None	 \$1,001 – 5,000	+ +	-
elf Household	Editor (Evidence-based Medicine), DynaMed	 \$1,001 – 5,000		-
lousehold	, , ,	\$1,001 – 5,000	+	
	None			-
Self			+	-
	None		+	-
lousehold	None		+	-
	Guidelines International Network's Board of Trustees (member)	\$0	+	-
	Measures Application Partnership Coordinating Committee (member)	\$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	+	-
Self	PCPI Board of Directors (member)	\$0	+	-
	National Quality Forum Physician Advisory Committee (member)	\$0	+	-
	PCPI Measures Advisory Committee (chair)	\$0	+	-
	CDC ACIP Methodology Committee (member)	\$0	+	-
	Women's Preventive Services Initiative: ACOG/HRSA (Advisory Committee member)	\$0	+	-
	National Quality Forum Prevention and Population Health Committee (co-chair)	\$0	+	-
	AHRQ EPC Reviewer	\$0	+	-
lousehold	None		+	-
Self	None		+	-
Household	None		+	-
H	ousehold ousehold	Guidelines International Network's Board of Trustees (member) Measures Application Partnership Coordinating Committee (member) DynaMed Board of Executives (member) MedBiquitous Board of Directors (member) GRADE Working Group (member) Reporting Items for Guidelines in Health Systems (RIGHT) Working Group (member) PCPI Board of Directors (member) National Quality Forum Physician Advisory Committee (member) PCPI Measures Advisory Committee (chair) CDC ACIP Methodology Committee (member) Women's Preventive Services Initiative: ACOG/HRSA (Advisory Committee member) National Quality Forum Prevention and Population Health Committee (co-chair) AHRQ EPC Reviewer	Guidelines International Network's Board of Trustees (member) Measures Application Partnership Coordinating Committee (member) DynaMed Board of Executives (member) MedBiquitous Board of Directors (member) GRADE Working Group (member) Reporting Items for Guidelines in Health Systems (RIGHT) Working Group (member) PCPI Board of Directors (member) National Quality Forum Physician Advisory Committee (member) PCPI Measures Advisory Committee (chair) CDC ACIP Methodology Committee (member) Women's Preventive Services Initiative: ACOG/HRSA (Advisory Committee member) National Quality Forum Prevention and Population Health Committee (co-chair) AHRQ EPC Reviewer Sousehold None	Guidelines International Network's Board of Trustees (member) Measures Application Partnership Coordinating Committee (member) DynaMed Board of Executives (member) MedBiquitous Board of Directors (member) GRADE Working Group (member) Reporting Items for Guidelines in Health Systems (RIGHT) Working Group (member) PCPI Board of Directors (member) National Quality Forum Physician Advisory Committee (member) PCPI Measures Advisory Committee (chair) CDC ACIP Methodology Committee (member) Nomen's Preventive Services Initiative: ACOG/HRSA (Advisory Committee member) National Quality Forum Prevention and Population Health Committee (co-chair) AHRQ EPC Reviewer **Outschold** None **Outschold** None **Outschold** **Outscho

In the last 3 years, have you or any household members publish Please include both peer-reviewed and non-peer-reviewed source	,
Acute pain Yes	⊠ No
Noninvasive ventilation Yes	⊠ No

	Poin	t of care ultrasoundyes _\times _No				
		For staff use:	ADD NEW	RESET		
		he attached word document. Have you or any hat of one of these measures or a competing meas			ne	
	d mombors	nublished on any of the clinical tenic areas save	rad by thaca	maacurac?		
		<pre>published on any of the clinical topic areas cove I non-peer-reviewed sources (e.g. newspaper op-</pre>		measures		
☐Yes ⊠ No			, , ,			
	Belongs to	Description including amount of value or inco	ne			
Employment	Self	None			+	-
. ,	Household	None			+	-
Research & Consulting	Self	None			+	-
Roles	Household	None			+	-
	Self	None			+	-
	Household	None			+	-
	Self	National Quality Forum's Health and Well Being Standing Committee (Chair)	\$0		+	-
Committees Workgroups		National Quality Forum's Incubator Partnership and Collaboration Committee (Member)	\$0		+	-
Committees, Workgroups, & Advisory Roles		World Health Organization Special Advisor (Complex Health Interventions)	\$0		+	-
		CMS Next Generation Performance Measures Experipanel (member)	^t \$0		+	-
	Household	None			+	-
Other Interests	Self	None			+	-
other affiliations, advocacy, etc.	Household	None			+	-
DECLARATION I certify that to my knowle will promptly disclose any	_	Digitally signed by Amir Qaseem Date: 2019.05.03 10:12:47 -04'00'		sts above a	nd	T
Signature		Date				

RELEVANT PUBLICATIONS

Copy and paste into box below or send as attachment.

RELEVANT MEASURES			
List in box below or highlight in atta	iched document.		

Name: <u>Jeffrey Shafiroff, Ph</u>	D						
Role: Clinical Guidelines Commit Performance Measuremer High Value Care Committe	nt Committee						
ACTIVE (Current)	Belongs to	Description including amou	nt of value or incon	ne			
Employment	Self	American College of Physicians				+	-
	Household	None				+	-
Research & Consulting	Self	None				+	-
	Household	None				+	-
Investment & Proprietary	Self	None				+	-
Interests	Household	None				+	-
Committees, Workgroups,	Self	None				+	-
& Advisory Roles	Household	None				+	-
Other Interests	Self	None				+	-
other affiliations, advocacy, etc.	Household	None				+	-
	eviewed and Non	invasive ventilation Yes	e.g. newspaper op-e] No] No		as?		
	POIIII] No				
			For staff use:	ADD NEW	RESET		
contributed towards the detopic)? ☐ Yes ☐ No Have you or any household Please include both peer-re ☐ Yes ☐ No	evelopment d members peviewed and	ne attached word document. of one of these measures or published on any of the clinical non-peer-reviewed sources (expenses on the clinical non-peer-reviewed sources).	a competing measual topic areas coveres.g. newspaper op-e	red by these med; blog)	on the san		
Terret (Last 5 years)	Delongs to	Haves Inc	The value of fileon			+	

Kaiser Permanente Medical Group

--

Self

Household

None

Employment

Research & Consulting	Self	None				+
Roles	Household	None				+
nvestment & Proprietary	Self	None				+
nterests	Household	None				+
Committees, Workgroups,	Self	None				+
& Advisory Roles	Household	None				+
Other Interests	Self	None				+
other affiliations, advocacy, etc.	Household	None				+
certify that to my knowle	_	ief that I have disclosed my financial ar	ıd non-finaı	ncial interests	s above a	nd
certify that to my knowle will promptly disclose any	_	ief that I have disclosed my financial ar Digitally signed by Jeff2 Shafiroff DN: cn-Jeff2 Shafiroff, o-American College of Physicians, ou, email=jshafiroff@acponline.org, c=US Date: 2013.02.26 12:26:24-04500	nd non-finai March 28 20		s above a	nd
l certify that to my knowled will promptly disclose any Jeff2 Shafiroff	_	Digitally signed by Jeff2 Shafiroff DN: cn=Jeff2 Shafiroff, ==American College of Physicians, ou, email=jshafiroff@acponline.org, c=US			s above a	nd
I certify that to my knowled will promptly disclose any Jeff2 Shafiroff Signature	changes.	Digitally signed by Jeff2 Shafiroff DN: cn=Jeff2 Shafiroff, ==American College of Physicians, ou, email=jshafiroff@acponline.org, c=US	March 28 20		s above a	nd
certify that to my knowled will promptly disclose any Jeff2 Shafiroff Signature	changes.	Digitally signed by Jeff2 Shafiroff DN: cn=Jeff2 Shafiroff, o=American College of Physicians, ou, email=jshafiroff@acponline.org, c=US Date: 2019.03.28 12:26:24-0400'	March 28 20		s above a	nd
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Jeff2 Shafiroff Signature RELEVANT PUBLICATIO	changes.	Digitally signed by Jeff2 Shafiroff DN: cn=Jeff2 Shafiroff, o=American College of Physicians, ou, email=jshafiroff@acponline.org, c=US Date: 2019.03.28 12:26:24-0400'	March 28 20		s above a	nd
DECLARATION I certify that to my knowled will promptly disclose any defect of the second seco	changes.	Digitally signed by Jeff2 Shafiroff DN: cn=Jeff2 Shafiroff, o=American College of Physicians, ou, email=jshafiroff@acponline.org, c=US Date: 2019.03.28 12:26:24-0400'	March 28 20		s above a	nc

Name: Patricia Siemion, MS	S				
Role:					
Clinical Guidelines Commit	ttoo	□ ACP Staff or Leadership			
Performance Measuremer		e 🔝 Guest			
High Value Care Committe	ee				
ACTIVE (Current)	Belongs to	Description including amount of value or income			
	Self	American College of Physicians	\$50,001 – 100,000	+	_
Employment	Household	International Association of Bridge, Structural, Ornamental and Reinforcing Iron Workers (Local 401)	\$50,001 – 100,000	+	-
Decearsh & Consulting	Self	None		+	-
Research & Consulting	Household	None		+	-
Investment & Proprietary	Self	None		+	-
Interests	Household	None		+	-
Committees, Workgroups,	Self	None		+	-
& Advisory Roles	Household	None		+	-
Other Interests	Self	None		+	-
other affiliations, advocacy, etc.	Household	None		+	_
		usehold members published on any of the following			
Please include both peer-re	eviewed and	non-peer-reviewed sources (e.g. newspaper op-ed	; blog)		
		Acute pain ☐Yes ☒ No			
	Non	invasive ventilation			
	Point	of care ultrasound			
		For staff use: AD	DD NEW RESI	ET	
		he attached word document. Have you or any hou			
topic)?	evelopment	of one of these measures or a competing measure	e (measure on the sa	ame	
□Yes ⊠ No					
	_	published on any of the clinical topic areas covered non-peer-reviewed sources (e.g. newspaper op-ed		?	
	.vicwca ana	Tion peer reviewed sources (e.g. newspaper op ed	, 51067		
□Yes ⊠ No					
INACTIVE (Last 3 years)	Belongs to	Description including amount of value or income	2		
Fuels and	Self	None		+	-

Employment

Household None

Danasalı O Camanılı'ı	Self	None				
Research & Consulting		None			+	ŀ
Roles	Household	None			+	
nvestment & Proprietary	Self	None			+	
nterests	Household	None			+	
Committees, Workgroups,	Self	None			+	
& Advisory Roles	Household	None			+	
Other Interests	Self	None			+	
other affiliations, advocacy, etc.	Household	None			+	
I certify that to my knowled will promptly disclose any	_	ief that I have disclosed my financial an	d non-finar	ncial interests above	and	1
I certify that to my knowled	_	ief that I have disclosed my financial an Digitally signed by Trish Siemion DN: cn=Trish Siemion, o=ACP, ou=Clinical Policy, email=tsiemion@acponline.org, c=US Date: 2019.03.28 11:48:35-04'00'	d non-finar 3/28/2019	ncial interests above	and	1
I certify that to my knowled will promptly disclose any o	_	Digitally signed by Trish Siemion DN: cn=Trish Siemion, o=ACP, ou=Clinical Policy, email=tsiemion@acponline.org, c=US		ncial interests above	and	Ī
will promptly disclose any	changes.	Digitally signed by Trish Siemion DN: cn=Trish Siemion, o=ACP, ou=Clinical Policy, email=tsiemion@acponline.org, c=US	3/28/2019	ncial interests above	and	Ī.
Trish Siemion Signature RELEVANT PUBLICATIO	changes.	Digitally signed by Trish Siemion DN: cn=Trish Siemion, o=ACP, ou=Clinical Policy, email=tsiemion@acponline.org, c=US Date: 2019.03.28 11:48:35 -04'00'	3/28/2019	ncial interests above	and	1
Trish Siemion Signature RELEVANT PUBLICATIO	changes.	Digitally signed by Trish Siemion DN: cn=Trish Siemion, o=ACP, ou=Clinical Policy, email=tsiemion@acponline.org, c=US Date: 2019.03.28 11:48:35 -04'00'	3/28/2019	ncial interests above	and	<u> </u>
I certify that to my knowled will promptly disclose any o Trish Siemion Signature	changes.	Digitally signed by Trish Siemion DN: cn=Trish Siemion, o=ACP, ou=Clinical Policy, email=tsiemion@acponline.org, c=US Date: 2019.03.28 11:48:35 -04'00'	3/28/2019	ncial interests above	and	
Trish Siemion Signature RELEVANT PUBLICATIO	changes.	Digitally signed by Trish Siemion DN: cn=Trish Siemion, o=ACP, ou=Clinical Policy, email=tsiemion@acponline.org, c=US Date: 2019.03.28 11:48:35 -04'00'	3/28/2019	ncial interests above	and	
I certify that to my knowled will promptly disclose any of the Trish Siemion Signature RELEVANT PUBLICATIO	changes.	Digitally signed by Trish Siemion DN: cn=Trish Siemion, o=ACP, ou=Clinical Policy, email=tsiemion@acponline.org, c=US Date: 2019.03.28 11:48:35 -04'00'	3/28/2019	ncial interests above	and	

Name: Melissa Starkey, Phi)				
Role:					
Clinical Guidelines Commit	ttee	□ ACP Staff or Leadership			
Performance Measuremer		·			
☐ High Value Care Committe					
ACTIVE (Current)	Belongs to	Description including amount of value or income	}		
	Self	American College of Physicians	\$50,001 – 100,000	+	-
Employment	Household	Teva Pharmaceuticals	\$100,001 or more	+	_
	Self	None		+	-
Research & Consulting	Household	None		+	-
Investment & Proprietary	Self	None		+	-
Interests	Household	None		+	-
Committees, Workgroups,	Self	Council of Medical Specialty Societies, Clinical Practice Guidelines Component Group (vice chair)	\$0	+	-
& Advisory Roles	Household	None		+	-
Other Interests	Self	None		+	-
other affiliations, advocacy, etc.	Household	None		+	-
	viewed and	usehold members published on any of the followir non-peer-reviewed sources (e.g. newspaper op-ed Acute pain ☐ Yes ☒ No invasive ventilation ☐ Yes ☒ No			
		For staff use: AD	DD NEW RESE	ΞT	
Please review the list of me	assuras in t	ne attached word document. Have you or any hou	isahold mamhars		
		of one of these measures or a competing measure		ame	
□Yes □ No					
		oublished on any of the clinical topic areas covered non-peer-reviewed sources (e.g. newspaper op-ed		?	
□Yes □ No					
INACTIVE (Last 3 years)	Belongs to	Description including amount of value or income	!		
Employment	Self	None		+	-
mployment -					

+ -

Household

None

Research & Consulting	Self	None				+
Roles	Household	None			<u> </u>	+
nyostmont ? Dronriotory	Self	None				+
nvestment & Proprietary nterests	Household	None				
	Housenoid	113113	chin			+
Committees, Workgroups, & Advisory Roles	Self	Guidelines International Network Member Committee member	snip	\$0		+
& Advisory Roles	Household	None				+
Other Interests	Self	None				+
other affiliations, advocacy, etc.	Household	None				+
certify that to my knowled	_	ief that I have disclosed my financial an	d non-fina	ancial intere	ests above a	ınd
DECLARATION I certify that to my knowled will promptly disclose any of Melissa Starkey, Ph	changes.	Digitally signed by Melissa Starkey, PhD DN: cn=Melissa Starkey, PhD, o=American College of Physicians, ou, email=mstarkey@acponline.org,	d non-fina Mar 28, 20		ests above a	ınd
I certify that to my knowled will promptly disclose any	changes.	Digitally signed by Melissa Starkey, PhD DN: cn=Melissa Starkey, PhD, o=American College of Physicians, ou, email=mstarkey@acponline.org,			ests above a	ınc
I certify that to my knowled will promptly disclose any of Melissa Starkey, Ph	changes.	Digitally signed by Melissa Starkey, PhD DN: cn=Melissa Starkey, PhD, o=American College of Physicians, ou, email=mstarkey@acponline.org,	Mar 28, 20		ests above a	inc
certify that to my knowled will promptly disclose any of Melissa Starkey, Phasignature RELEVANT PUBLICATIO	changes. ID NS	Digitally signed by Melissa Starkey, PhD Dix. cn=Melissa Starkey, PhD, 0=American College of Physicians, ou, email=mstarkey@acponline.org, c=US Date: 2019.03.28 11:50:38 -04'00'	Mar 28, 20		ests above a	inc
Melissa Starkey, Phasignature	changes. ID NS	Digitally signed by Melissa Starkey, PhD Dix. cn=Melissa Starkey, PhD, 0=American College of Physicians, ou, email=mstarkey@acponline.org, c=US Date: 2019.03.28 11:50:38 -04'00'	Mar 28, 20		ests above a	ind
I certify that to my knowled will promptly disclose any of Melissa Starkey, Ph Signature	changes. ID NS	Digitally signed by Melissa Starkey, PhD Dix. cn=Melissa Starkey, PhD, 0=American College of Physicians, ou, email=mstarkey@acponline.org, c=US Date: 2019.03.28 11:50:38 -04'00'	Mar 28, 20		ests above a	inc
Melissa Starkey, Phasignature	changes. ID NS	Digitally signed by Melissa Starkey, PhD Dix. cn=Melissa Starkey, PhD, 0=American College of Physicians, ou, email=mstarkey@acponline.org, c=US Date: 2019.03.28 11:50:38 -04'00'	Mar 28, 20		ests above a	inc

Name: Farah Sultan, MD, M	1S			
Role:				
☐ Clinical Guidelines Commit	tee			
Performance Measuremer				
☐ High Value Care Committe		ducst		
riigii value care committe				
ACTIVE (Current)	Belongs to	Description including amount of value or income		
Employment	Self	American College of Physicians \$50,001 – 100,000	+	-
Employment	Household	None	+	-
Possarch & Consulting	Self	Sigma Health Consulting, LLC \$5,001 – 10,000	+	-
Research & Consulting	Household	None	+	-
Investment & Proprietary	Self	None	+	-
Interests	Household	None	+	-
Committees, Workgroups,	Self	None	+	-
& Advisory Roles	Household	None	+	-
Other Interests	Self	None	+	-
other affiliations, advocacy, etc.	Household	None	+	-
		usehold members published on any of the following topic areas? non-peer-reviewed sources (e.g. newspaper op-ed; blog)		
		Acute pain ☐Yes ☒ No		
	Non	invasive ventilation		
	Point	t of care ultrasound Yes No		
		For staff use: ADD NEW RESE	•	
		he attached word document. Have you or any household members tof one of these measures or a competing measure (measure on the sa	me	
□Yes ⊠ No				
		published on any of the clinical topic areas covered by these measures? I non-peer-reviewed sources (e.g. newspaper op-ed; blog)		
□Yes ⊠ No				
INACTIVE (Last 3 years)	Relonas to	Description including amount of value or income		

Fox Chase Cancer Center

University of Pennsylvania

Peripheral Vascular Institute Of Philadelphia

\$10,001 - 50,000

\$10,001 - 50,000

Self

Household

Employment

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

		Christiana Care Hospital	\$10,001 - 50,000	+	_
Research & Consulting	Self	None		+	-
Roles	Household	None		+	_
Investment & Proprietary	Self	None		+	-
Interests	Household	None		+	-
Committees, Workgroups,	Self	None		+	-
& Advisory Roles	Household	None		+	_
Other Interests	Self	None		+	-
other affiliations, advocacy, etc.	Household	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.				
Farah Sultan	Digitally signed by Farah Sultan Date: 2019.05.01 10:55:29 -04'00'	5/1/2019		
Signature		Date		
RELEVANT PUBLICATION	NS			
Copy and paste into box bel	ow or send as attachment.			
RELEVANT MEASURES				
List in how holow or highligh	t in attached document			

List in box below or highlight in attached document.						

American College of Physicians Disclosure of Interests

Please respond to the following prompts and then fill in additional detail via the summary table starting on page 4.

1. EMPLOYMENT Use the summary table to report any employment that you or any household members have held during the last 3 years in Row 1 (for self) and Row 6 (for household members). 2. RESEARCH AND CONSULTING SUPPORT Within the last 3 years, have you or any household members. . . 2a....received research support for a topic related to health or healthcare? x Yes No E.g., grants, contracts, sponsorships, and other research support 2b....participated on a speaker's bureau, received honoraria, or consulted or x Yes No advised for a topic related to health or healthcare? 2c. . . . provided expert opinion or testimony related to health or healthcare as Yes x No part of regulatory, legislative, or judicial process? ALL YES RESPONSES, 2a-2c Use the summary table to report details in Row 2 (for self) and Row 7 (for household members). 3. INVESTMENT AND PROPRIETARY INTERESTS Within the last 3 years, have you or any household members. . . 3a. . . . held any investments related to health or healthcare? Yes X_No E.g., stocks, bonds, stock options, or other securities. Please include trusts or holding companies. You may exclude broadly diversified investments such as mutual or pension funds. 3b....held any commercial business interests related to health or healthcare? X No Yes E.g., board membership, proprietorship, joint ventures, controlling interest 3c. . . . held any patents, trademarks, or copyrights related to health or Yes X No healthcare? Please include pending. ALL YES RESPONSES, 3a-3c

Use the summary table to report details in Row 3 (for self) and Row 8 (for household members).

4. INTELLECTUAL INTERESTS

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American College of Physicians Disclosure of Interests

wi	thin the last 3 years, have you or any household members		
	4a participated in workgroups, panels, or committees through other medical societies or healthcare organizations?	X_Yes	No
	4bparticipated in any advocacy or lobbying activities related to health or healthcare, including any roles or relationships with disease advocacy organizations?	Yes	X_No
	4c spoken publicly on topics related to health or healthcare?	X_Yes	No
5.	OTHER INTERESTS Is there any other aspect of your background or present interests not addressed above that might be perceived as affecting your objectivity or independence?	_Yes	X_No

ALL YES RESPONSES, 4a-4c

Use the summary table to report details in Row 4 (for self) and Row 9 (for household members).

ALL YES RESPONSES, 5

Use the summary table to report details in Row 5 (for self) and Row 10 (for household members).

American College of Physicians Disclosure of Interests

NAME: CARLOS A. CUELLO

		ACTIVE (Current)	INACTIVE (Last 3 years)
	Category	Organization, role, and amount received*	Organization, role, and amount received*
		Reporting for sel	f
1	Employment	 Department of Pediatrics. McMaster University. Researcher. Tecnologico de Monterrey School of Medicine, Mexico. Professor of Health Quality Improvement. 	•
2	Research & Consulting Support	 Co-investigator/Researcher on the PICU Liber8 study. \$70,000 cad/yr. from Grant HAHSO AMOSO. 	•
3	Investment & Proprietary Interests	•	•
4	Committees, Workgroups, & Advisory Roles	Expert consultant for the development of a clinical practice guideline for the American College of Rheumatology, guideline on Juvenile Idiopathic Arthritis. (≤\$5,000).	 a) Through McMaster University I received support for conducting research on methods innovation (\$5,001 to 10,000) b) Through McMaster University I was consultant for the development of a clinical practice guideline for the American Society of Hematology (\$5,001 to 10,000). c) Through McMaster University I was expert consultant for the development of three clinical practice guidelines on Allergy Prevention (≤\$5,000) from the World Allergy Organization.
5	Other interests	•	•
		Reporting for household i	members
6	Employment	•	•
7	Research & Consulting Support	•	
8	Investment & Proprietary Interests	•	•
9	Intellectual Interests	•	•
10	Other interests	•	•

RANGES FOR REPORTING AMOUNT RECEIVED

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American College of Physicians Disclosure of Interests

d) \$0

e) ≤\$5,000

f) \$5,001 to 10,000

g) \$10,001 to 50,000

h) \$50,001 to 100,000

i) ≥\$100,001

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.

February 13, 2019

Signature

Date

Exhibit C Disclosure of Conflict of Interest Form

BASIC INFORMATION		PARTY TO THE RESERVE OF THE PARTY OF THE PAR		
Full Name	Jennifer Marie Y	ost		
Please report all emp	loyment position	ns you have held during the last 3 years:		
Status	Employer		Annual Income Range	
Active (current)	Villanova Unive	ersity	\$50,001 to 100,000	X
Inactive (last 3 yrs)	McMaster Univ	ersity	\$50,001 to 100,000	X
Please report all emn	lovment nosition	ns your household members have held during th	Click to add new ro	W
☐ I have no emp		t for household members.		
		no beneated a section		
received researc	ch support for a to	ny household members opic related to health or healthcare? hips, and other research support	⊠Yes □	No
related to health o provided expert legislative, or judic	r healthcare? opinion or testin ial process?	nu, received honoraria, or consulted or advised fo	egulatory, Yes 🖂	No No
		s, please provide additional details in the space p	T	
Status Active (current)	Reporting for Myself	Details (organization, role, topic area) Canadian Institutes for Health Research; Co- Principal Investigator; Transition Interventions for Adults undergoing Cardiac and Vascular Surgery	Amount of Income \$0	x
Inactive (last 3 yrs)	Myself	Canadian Institutes for Health Research; Co- Principal Investigator; Patient Engagement in Research	\$0	x
Inactive (last 3 yrs)	Myself	Canadian Institutes for Health Research; Co- Principal Investigator; Transition Interventions for Adults undergoing Cardiac and Vascular Surgery	\$0	x
Inactive (last 3 yrs)	Myself	Population Health Research Institute, McMaster University; Co-Principal Investigator; Patient Engagement in Research	\$0	X
Inactive (last 3 yrs)	Myself	School of Nursing, McMaster University; Co- Investigator; Knowledge User Engagement in Research	\$0	X
Inactive (last 3 yrs)	Myself	Canadian Institutes for Health Research; Co- Principal Investigator; Knowledge Translation in Cancer Prevention	\$0	x
			Click to add new r	ow

Status	Reporting for	Details (organization, role, topic area)	Amount of Income	
Inactive (last 3 yrs)	Myself	Grand Challenges Canada; Co-Investigator; Maternal-Child Health Outcomes in Haiti	\$0	X
Inactive (last 3 yrs)	Myself	University of Bologna; Taught course in the Master of EBP and Methodology of Clinical and Therapeutic Research Program; Systematic Review Methods	\$5,001 to 10,000	x
1.			Click to add new	row

INIVESTMENTS AND	PROPRIETARY INT	COLCIA				
INVESTMENTS AND	PROPRIETARY INT	EKESIS				
Within the last 3 ye	ears, have you or ar	y household members				
e.g., stocks, b	onds, stock options,	ealth or healthcare? or other securities. Please include trusts or holding adly diversified investments such as mutual or pens		Yes	⊠No	0
		erests related to health or healthcare? orship, joint ventures, controlling interest		Yes	⊠N	0
held any pater Please include	CONTROL OF THE TAXABLE PROPERTY OF THE PROPERT	copyrights related to health or healthcare?		Yes	⊠N	0
INTELLECTUAL AND	OTHER INTERESTS			10		
Within the last 3 ye	ears, have you or ar	ny household members				
participated ir healthcare organ		s, or committees through other medical societies of	or	⊠Yes	□ No	0
		bbying activities related to health or healthcare, in se advocacy organizations?	cluding	Yes	⊠N	0
spoken publicly on topics related to health or healthcare?			⊠Yes	□ N	0	
APP 19 1971		ground or present interests not addressed above objectivity or independence?	that	∐Yes	⊠N	0
For a	any "Yes" responses	, please provide additional details in the space pro	ovided b	elow.		
Status	Reporting for	Details (organization, role, topic area)	Amount	of Incom	e	
Active (current)	Myself	Sigma Theta Tau International; President-Elect, Alpha Nu Chapter; Nursing Scholarship	\$0			X
Active (current)	Myself	Evidence Synthesis International; Secretariat Member; Production and Use of Systematic Reviews [Note: Salary support to Villanova University provided by Western Norway University of Applied Sciences; No additional income received]	\$0		4	X
			Click	to add n	ew rov	V

Status	Reporting for	Details (organization, role, topic area)	Amount of Income	
Active (current)	Myself	Evidence-Based Research Network; Steering Committee Member; Evidence-Based Research/Research Redundancy	\$0	×
Active (current)	Myself	Centre for Evidence-Based Implementation, Hamilton Health Sciences Centre; Advisory Committee Member; Implementation Science in Healthcare	\$0	×
Inactive (last 3 yrs)	Myself	Cochrane; Author; Effective Practice and Organisation of Care	\$0	X
Inactive (last 3 yrs)	Myself	Australian Clnical Trials Network; Presenter; Evidence-Based Research/Research Redundancy	\$0	X
Inactive (last 3 yrs)	Myself	National Health and Medical Research Council; Presenter; Evidence-Based Research/Research Redundancy	\$0	×
Inactive (last 3 yrs)	Myself	Helene Fuld Health Trust National Summit; Presenter; Evidence-Based Practice in Nursing	\$0	Х
Inactive (last 3 yrs)	Myself	Global Evidence Summit; Presenter; Evidence-Based Research/Research Redundancy	\$0	×
Inactive (last 3 yrs)	Select	The Ontario Public Health Association; Presenter; Evidence-Informed Decision Making in Public Health	\$0	>
			Click to add new r	ow

DECLARATION

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

Signature Date

Status	Employer		Annual Income Range	
Active (current)	Minneapolis VA	A Health Care System	≥\$100,001	X
Inactive (last 3 yrs)		linnesota - Division Pulmonary, Allergy, Critical Care, icine (Fellowship)	\$50,001 to 100,000	X
			Click to add new ro)W
		ns your household members have held during the tor household members.	last 3 years:	
Status	Relation	Employer	Annual Income Range	
Active (current)	spouse	General Dynamics	≥\$100,001	>
Inactive (last 3 yrs)	spouse	Alliant Techsystems	≥\$100,001	>
. , , ,	'	,	Click to add new ro	
			CHER LO GGG HEVV I	
			Chek to dad new re	
SEARCH AND CONS	ULTING		Chek to dad new re	
		ny household members	Chek to dad new re	
thin the last 3 year	s, have you or an	ny household members opic related to health or healthcare? nips, and other research support		No
thin the last 3 year received research e.g., grants, con	s, have you or and support for a to tracts, sponsorshing speaker's burea	opic related to health or healthcare?	∑Yes ☐	
ithin the last 3 yearreceived research e.g., grants, consparticipated on a	s, have you or and support for a to tracts, sponsorshing speaker's bureathealthcare?	opic related to health or healthcare? nips, and other research support	∑Yes ☐ a topic ☐Yes ∑	No
ithin the last 3 year received research e.g., grants, com participated on a related to health or provided expert of egislative, or judicia	s, have you or and support for a to tracts, sponsorshing speaker's bureathealthcare? opinion or testimal process?	opic related to health or healthcare? nips, and other research support u, received honoraria, or consulted or advised for		No
ithin the last 3 year received research e.g., grants, com participated on a related to health or provided expert of egislative, or judicia	s, have you or and support for a to tracts, sponsorshing speaker's bureathealthcare? opinion or testimal process?	opic related to health or healthcare? nips, and other research support u, received honoraria, or consulted or advised for nony related to health or healthcare as part of a re		No
ithin the last 3 year received research e.g., grants, com participated on a related to health or provided expert of egislative, or judicia	s, have you or and support for a to tracts, sponsorships speaker's burean healthcare? opinion or testimal process? "Yes"responses	opic related to health or healthcare? nips, and other research support u, received honoraria, or consulted or advised for nony related to health or healthcare as part of a re-	Yes ☐ a topic ☐ Yes ☐ egulatory, ☐ Yes ☐ rovided below. Amount of Income \$50,001 to 100,000	No
ithin the last 3 year. received research e.g., grants, consequences participated on a related to health or a consequence or judicial stress. For any atus	s, have you or and support for a to tracts, sponsorships speaker's burean healthcare? opinion or testimal process? "Yes"responses Reporting for	opic related to health or healthcare? nips, and other research support ou, received honoraria, or consulted or advised for hony related to health or healthcare as part of a research support output provide additional details in the space provid	Yes ☐ a topic ☐ Yes ☐ egulatory, ☐ Yes ☐ rovided below. Amount of Income \$50,001 to 100,000	No No
ithin the last 3 year. received research e.g., grants, consequences participated on a related to health or a consequence or judicial stress. For any atus	s, have you or and support for a to tracts, sponsorships speaker's burean healthcare? opinion or testimal process? "Yes"responses Reporting for	opic related to health or healthcare? nips, and other research support ou, received honoraria, or consulted or advised for hony related to health or healthcare as part of a research support output provide additional details in the space provid	a topic Yes Segulatory, Yes Manunt of Income \$50,001 to 100,000	No No
ithin the last 3 year. received research e.g., grants, consequences participated on a related to health or a consequence or judicial stress. For any atus	s, have you or and support for a to tracts, sponsorships speaker's burean healthcare? opinion or testimal process? "Yes"responses Reporting for Myself	opic related to health or healthcare? nips, and other research support ou, received honoraria, or consulted or advised for nony related to health or healthcare as part of a research support output provide additional details in the space provi	a topic Yes Segulatory, Yes Manunt of Income \$50,001 to 100,000	No No

BASIC INFORMATION

Within the last 3 years	, have you or an	y household members				
•		erests related to health or healthcare? orship, joint ventures, controlling interest		Yes	N	0
held any patents, trademarks, or copyrights related to health or healthcare? Please include pending.					N	0
INTELLECTUAL AND O	THER INTERESTS					
Within the last 3 years	, have you or an	y household members				
participated in workgroups, panels, or committees through other medical societies or healthcare organizations?					N	0
participated in any advocacy or lobbying activities related to health or healthcare, including any roles or relationships with disease advocacy organizations?					N	0
spoken publicly on topics related to health or healthcare?					N	0
	•	ground or present interests not addressed ab bjectivity or independence?	ove that	Yes	N	0
For any	"Yes"responses,	please provide additional details in the space	e provided b	elow.		
Status	Reporting for	Details (organization, role, topic area)	Amount	of Incom	е	
Active (current)	Myself	Poster presentations on my thesis, "The Relationship Between Oral Health and COPD Exacerbations."	\$0			X
			Click	to add ne	ew rou	V
DECLARATION						
I certify that to my knowill promptly disclose	_	ief that I have disclosed my financial and inte	llectual inter	ests abov	e and	ı
Arianne Baldon	nero	Digitally signed by Arianne Baldomero Date: 2019.04.09 10:21:18 -05'00'	4-9-2019			
Signature			Date			

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

Name: Nancy Greer

Role:	tee	☐ ACP Staff or Leadership					
		<u> </u>					
Performance Measuremer		∆ Guest					
☐ High Value Care Committe	e						
ACTIVE (Current)	Belongs to	Description including amount of value or income					
Employment	Self	Minneapolis VA Health Care System	\$50,001 – 100,000	+	-		
Linployment	Household	None		+	-		
Research & Consulting	Self	None		+	-		
Roles	Household	None		+	-		
Investment & Proprietary Interests	Self	None		+	-		
	Household	None		+	-		
Committees, Boards, & Workgroups/Panels	Self	None		+	-		
	Household	None		+	-		
Other Interests	Self	None		+	-		
other affiliations, advocacy, etc.	Household	None		+	-		
	,		•				
		usehold members published on any of the followin	~ ·				
·		non-peer-reviewed sources (e.g. newspaper op-ed;	blog)				
n/a - only calling		ssion on nonivasive					
	ventilatio	on evidence review					
		For staff use: AD	D NEW RESE	г			
		Tot stay use.	D INLOV				
INIACTIVE (Lost 2							
INACTIVE (Last 3 years)		Description including amount of value or income					
Employment	Self	None		+	_		
	Household	None		+	_		
Research & Consulting	Self	None		+	-		
Roles	Household	None		+	-		
Investment & Proprietary	Self	None		+	-		
nterests	Household	None		+	-		

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

Committees, Boards, & Workgroups/Panels		National Kidney Foundation - member of Evidence Review Team for update of guideline on vascular access	\$0	+	-
	Self	American Urological Association - member of Evidence Review Team for update of guideline on surgical interventions for BPH	\$0	+	_
		American College of Physicians - member of Evidence Review Team for guideline on testosterone treatment in men	\$0	+	_
	Household	None		+	-
Other Interests other affiliations, advocacy, etc.	Self	None		+	-
	Household	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.

Nancy L. Greer 338254	Digitally signed by Nancy L. Greer 338254 Date: 2019.04.08 10:16:35 -05'00'	
Signature		Date

RELEVANT PUBLICATIONS

(Copy and paste into box below or send as attachment.						
Г							

Full Name	Ken M. Kunisaki			
Please report all emp	lovment position	s you have held during the last 3 years:		
Status	Employer		Annual Income Range	,
Active (current)		A Health Care System	≥\$100,001	X
· · · · · · · · · · · · · · · · · · ·		·	Click to add new ro	ow .
		s your household members have held during the	last 3 years:	
l have no empl	oyment to repor	t for household members.	I	
Status	Relation	Employer	Annual Income Range)
Active (current)	Spouse	East Valley Animal Clinic	\$50,001 to 100,000	X
Inactive (last 3 yrs)	Child	McDonald's Corporation	≤\$5000	X
			Click to add new ro	ow .
RESEARCH AND CONS	SULTING			
Within the last 3 year	s, have you or ar	ny household members		
received researc	h support for a to	opic related to health or healthcare? nips, and other research support	∑ Yes ☐	No
	speaker's burea	u, received honoraria, or consulted or advised for a	a topic 🔀 Yes 🗌	No
provided expert legislative, or judicia	•	nony related to health or healthcare as part of a reg	gulatory, 🗌 Yes 🔀	No
For any	"Yes"responses	, please provide additional details in the space pro	ovided below.	
Status	Reporting for	Details (organization, role, topic area)	Amount of Income	
Active (current)	Myself	NIH and DoD grants to my institution	≥\$100,001	X
Inactive (last 3 yrs)	Myself	Consulting; GlaxoSmithKline May 2018	\$5,001 to 10,000	X
			Click to add new ro)W
INVESTMENTS AND P	ROPRIETARY INT	ERESTS		
Within the last 3 year	s, have you or ar	ny household members		
e.g., stocks, bon	ds, stock options,	ealth or healthcare? , or other securities. Please include trusts or holding adly diversified investments such as mutual or pens	g	No
•		erests related to health or healthcare? torship, joint ventures, controlling interest	☐Yes ⊠	No

BASIC INFORMATION

held any patents, Please include pe		copyrights related to health or healthcare?		Yes	No
INTELLECTUAL AND O	THER INTERESTS				
Within the last 3 years	s, have you or an	y household members			
participated in workgroups, panels, or committees through other medical societies or healthcare organizations?					No
participated in any advocacy or lobbying activities related to health or healthcare, including any roles or relationships with disease advocacy organizations?				Yes	No
spoken publicly o	n topics related t	to health or healthcare?		Yes	No
might be perceived as	affecting your o	ground or present interests not addressed above bjectivity or independence?		Yes	No
For any	"Yes"responses,	please provide additional details in the space pr	ovided be	elow.	
Status	Reporting for	Details (organization, role, topic area)	Amount	of Incom	e
Active (current)	Myself	Active in American Thoracic Society leadership	\$0		X
			Click	to add ne	ew row
DECLARATION					
I certify that to my knowill promptly disclose	•	ief that I have disclosed my financial and intellec	tual inter	ests abov	e and I
KEN KIINICAKI MILI MIS		Digitally signed by Ken Kunisaki, MD, MS Date: 2019.04.10 12:38:51 -05'00'	Apr 10, 201	19	
Signature			Date		

Full Name	Anne Catherine	Melzer				
Please report all e	mployment position	ns you have held during the last 3 years:		I		
Status	Employer			Annual Income	Range	_
Active (current)	Department of	Veterans Affairs		≥\$100,001		X
				Click to add	new ro	W
Please report all e	mployment position	ns your household members have held dur	ing the I	ast 3 years:		
I have no e	mployment to repor	t for household members.				
Status	Relation	Employer		Annual Income	Range	
Active (current)	Husband	Regions Hospital		\$50,001 to 100,0	000	X
		,		Click to add	new ro	w
RESEARCH AND CO	ONSULTING					
Within the last 3 y	rears, have you or a	ny household members				
received rese	arch support for a to	opic related to health or healthcare? nips, and other research support		∑ Ye:	s N	No
participated o	•	u, received honoraria, or consulted or advi	sed for a	topic Ye	s 🔀 N	10
provided explegislative, or jud		nony related to health or healthcare as part	of a reg	ulatory, Ye	s 🖂 N	10
For	any "Yes"responses	s, please provide additional details in the s	pace pro	vided below.		
Status	Reporting for	Details (organization, role, topic area)	-	Amount of Inco	те	
Active (current)	Myself	NIH grant, coinvestigator		≤\$5000		X
				Click to add	new ro	W
INVESTMENTS AN	D PROPRIETARY IN	TERESTS				
Within the last 3 v	rears, have you or a	ny household members				
held any inve e.g., stocks, i	stments related to h bonds, stock options	nealth or healthcare? s, or other securities. Please include trusts of adly diversified investments such as mutual	_		s 🔀 N	10
•		erests related to health or healthcare? torship, joint ventures, controlling interest		Yes	s 🔀 N	10
held any pate Please includ		copyrights related to health or healthcare?		Ye	s 🔀 N	10

BASIC INFORMATION

INTELLECTUAL AND O	THER INTERESTS				
Within the last 3 years	, have you or ar	ny household members			
\dots participated in workgroups, panels, or committees through other medical societies or healthcare organizations?					No
participated in any advocacy or lobbying activities related to health or healthcare, including any roles or relationships with disease advocacy organizations?				Yes	⊠No
spoken publicly o	spoken publicly on topics related to health or healthcare?				
	-	ground or present interests not addressed above objectivity or independence?	that	Yes	No
For any	"Yes"responses	, please provide additional details in the space p	rovided l	below.	
Status	Reporting for	Details (organization, role, topic area)	Amour	nt of Incom	е
Active (current)	Myself	American Thoracic Society, Program Committee	\$0		X
			Clic	k to add ne	w row
DECLARATION					
I certify that to my knowill promptly disclose	_	lief that I have disclosed my financial and intelled	tual inte	erests abov	e and I
Anne C. Melzer	603747	Digitally signed by Anne C. Melzer 603747 Date: 2019.04.10 11:54:35 -05'00'			
Signature			Date		

BASIC INFORMATION				
Full Name	John Mark Flack		_	
Please report all empl	oyment position	s you have held during the last 3 years:		
Status	Employer		Annual Income Range	
Active (current)	Southern Illinoi	s University	≥\$100,001	X
	,		Click to add new row	
Diagon was all a soul			ath a last 2	
		s your household members have held during	the last 3 years:	
I have no empl	oyment to report	for household members.		
Status	Relation	Employer	Annual Income Range	
Inactive (last 3 yrs)	Wife	Seyburn Khan Law firm	≥\$100,001	X
Active (current)	Wife	Capital City Deal Lawyers (self-employed)	≥\$100,001	X
			Click to add new row	
RESEARCH AND CONS	SULTING			
Within the last 2 year	s have you or ar	y household members		
-	•			
	• •	pic related to health or healthcare? ips, and other research support	∑ Yes)
e.g., grants, con	tructs, sportsorsir	ips, and other research support		
participated on a related to health or	•	u, received honoraria, or consulted or advised	d for a topic Yes No)
provided expert	opinion or testim	ony related to health or healthcare as part of	a regulatory, Yes No)
legislative, or judicia	al process?			
For any	"Yes"responses	please provide additional details in the spa	ce provided below.	
Status	Reporting for	Details (organization, role, topic area)	Amount of Income	
Active (current)	Myself	Vascular Dynamics (research grant)	\$10,001 to \$50,000	X
Active (current)	Myself	ReCor Medical (research grant)	\$10,001 to \$50,000	X
Active (current)	Myself	Idorsia (research grant)	\$10,001 to \$50,000	Х
Active (current)	Myself	Quantam Genomics (research grant)		X
Active (current)	Myself	Back Beat Hypertension (consultant)		X
Active (current)	Myself	Nu-Sirt (consultant)		X
Inactive (last 3 yrs)	Myself	Allegran (consultant)		X
Active (current)	Myself	Sanofi (consultant on Mock FDA panel)		X
,	-	, ,	Click to add new row	

INVESTMENTS AND PROPRIETARY INTERESTS

within the last 5 ye	ars, mave you or ar	ly ilouseiloid illellibers			
e.g., stocks, bo	onds, stock options,	ealth or healthcare? , or other securities. Please include trusts or hold adly diversified investments such as mutual or pe	_	⊠Yes	□No
•		erests related to health or healthcare? corship, joint ventures, controlling interest		Yes	⊠No
held any paten Please include		copyrights related to health or healthcare?		Yes	No
For a	ny "Yes"responses	, please provide additional details in the space	provid	led below.	
Status	Reporting for	Details (organization, role, topic area)	An	nount of Income	е
Active (current)	Myself	Regeneron (stock)	\$1	0,001 to \$50,000	0 X
				Click to add ne	ew row
INTELLECTUAL AND	OTHER INTERESTS				
Mithin the lest 2		an harrachald mambara			
-	•	ny household members			
participated in healthcare organi		ls, or committees through other medical societie	es or	∑Yes	No
	•	obbying activities related to health or healthcare se advocacy organizations?	, inclu	ding Yes	No
spoken publicly	y on topics related	to health or healthcare?		∑Yes	No
-	•	ground or present interests not addressed about bjectivity or independence?	ve tha	t Yes	No
For a	ny "Yes"responses	, please provide additional details in the space	provid	led below.	
Status	Reporting for	Details (organization, role, topic area)	An	nount of Incom	e
Inactive (last 3 yrs)	Myself	AHA Resistant Hypertension Scientific Statement	\$0		X
Inactive (last 3 yrs)	Myself	Duke Resistant Hypertension Think Tank	\$0		X
	1			Click to add ne	ew row
DECLARATION					
I certify that to my l will promptly disclo	_	lief that I have disclosed my financial and intell	ectual	interests abov	e and I
John Mark Fla	ick	Digitally signed by John Mark Flack Date: 2019.04.18 11:03:29 -05'00'	4/18	3/2019	
Signature			Date		

BASIC INFORMATION	ON			
Full Name	Gerald Gartlehne	er		
Please report all en	nployment position	s you have held during the last 3 years:		
Status	Employer		Annual Income Range	
Active (current)	Danube Univers	sity Krems	≥\$100,001	X
Active (current)	RTI Internation	al	\$10,001 to \$50,000	X
	-		Click to add new ro	w
•		s your household members have held during the t for household members.	last 3 years:	
Status	Relation	Employer	Annual Income Range	
Active (current)	wife	Specht&Partner Law Firm	\$50,001 to 100,000	X
		_ ·	Click to add new ro	W
RESEARCH AND CO	NSULTING			
e.g., grants, cparticipated of related to healthprovided expe	ontracts, sponsorsh n a speaker's burea or healthcare? rt opinion or testim icial process? ny "Yes"responses	opic related to health or healthcare? oips, and other research support u, received honoraria, or consulted or advised for a ony related to health or healthcare as part of a reg please provide additional details in the space pr	a topic Yes Yes Ngulatory, Yes Ngulatory, Ovided below.	
Active (current)	Reporting for Myself	Details (organization, role, topic area) Agency for Healthcare Research and Quality	Amount of Income ≥\$100,001	X
Active (current)	Myself	WHO	\$10,001 to \$50,000	X
Active (current)	Myself	Umbrella Organization of Austrian Health Insurances		X
	iviyacii	Official Organization of Austrian Fleath insurances	Click to add new ro	
			CHER to dad Hew To	VV
INVESTMENTS AND	PROPRIETARY INT	ERESTS		
held any inves e.g., stocks, b	tments related to h onds, stock options,	ny household members ealth or healthcare? , or other securities. Please include trusts or holding adly diversified investments such as mutual or pen	~	۷o

Within the last 3 year	s, have you or ar	ny household members			
held any commercial business interests related to health or healthcare? e.g., board membership, proprietorship, joint ventures, controlling interest					No
held any patents, trademarks, or copyrights related to health or healthcare? Please include pending.					No
INTELLECTUAL AND O	THER INTERESTS				
Within the last 3 year	s, have you or ar	ny household members			
participated in workgroups, panels, or committees through other medical societies or healthcare organizations?					No
participated in any advocacy or lobbying activities related to health or healthcare, including any roles or relationships with disease advocacy organizations?					No
spoken publicly on topics related to health or healthcare?					No
Is there any other asp might be perceived as	Yes	No			
For any	"Yes"responses	, please provide additional details in the sp	ace provided b	elow.	
Status	Reporting for	Details (organization, role, topic area)	Amoun	t of Incom	е
Inactive (last 3 yrs)	Myself	Guideline panels	≤\$5000		X
Active (current)	Myself	Academic presentations	≤\$5000		X
			Click	c to add ne	ew row
DECLARATION					
I certify that to my kn will promptly disclose	•	lief that I have disclosed my financial and in	tellectual inte	rests abov	e and I
Gerald Gartleh	ner	Digital unterschrieben von Gerald Gartlehner Datum: 2018.11.14 16:05:40 +01'00'	11/14/201	8	
Signature			Date		

American College of Physicians Department of Clinical Policy Disclosure of Interests (DOI) Form

Instructions

Review of Disclosures of Interests

This is a disclosure of interests (DOI) worksheet for the Department of Clinical Policy within the American College of Physicians. All participants in committee meetings and works development must complete this form upon start of work or committee term. This requirement applies to:

- All ACP staff participating in meetings or calls
- All members of any department panel or committee
- Contracted authors or consultants
- Any other individual participating in committee meetings/conferences calls or developing work for the Department of Clinical Policy

Managing Conflicts of Interest

Answering "Yes" to a question on this form does not automatically disqualify an individual from participation. Potential conflicts are graded by staff according to department policy and participation is managed according to level of conflict.

What should I report?

We require disclosure:

- On behalf of self AND household members
- Of financial interests (received direct payments) related to health or healthcare
- Of intellectual interests (no direct payments received) related to health or healthcare
- From the last 3 years

If in doubt, err on the side of full disclosure.

Acknowledgement and Transparency

To maintain transparency, all signed disclosures will be publicly available on ACP's website and a link to the disclosures will be included in each published work.

Full Name	Melanie D. Bird,	PhD			
Please report all em	ployment position	s you have held during the last 3 years:			
Status	Employer		Annual Income Range		
Active (current)	American Acade	emy of Family Physicians	\$50,001 to 100,000		
			Click to add new row	W	
		s your household members have held during the	last 3 years:		
I have no em	ployment to report	t for household members.	I		
Status	Relation	Employer	Annual Income Range		
Active (current)	spouse	American Academy of Family Physicians	\$50,001 to 100,000	X	
			Click to add new row	N	
RESEARCH AND COM	NSULTING				
received resear e.g., grants, coparticipated on related to health oprovided exper	rch support for a to ontracts, sponsorsh a speaker's bureau or healthcare? It opinion or testim cial process?	ppic related to health or healthcare? ips, and other research support u, received honoraria, or consulted or advised for a ony related to health or healthcare as part of a reg	a topic Yes No		
Status	Reporting for	Details (organization, role, topic area)	Amount of Income		
Active (current)	Myself	Project ManagerCDC Grant awarded to AAFP to Increase Awareness of Risky Alcohol Use and Implementation of Alcohol SBI	\$5,001 to 10,000	X	
Active (current)	Myself	Project ManagerQuest Diagnostics Grant to AAFP to Provide Resources for Family Physicians to Increase STI Screening Rates	\$5,001 to 10,000	X	
Active (current)	Myself	Project StaffSAMHSA/AAAP Grant to AAFP to serve as a partner to Support the Opioid Response Network (formerly STR-TA)	≤\$5000	X	
			Click to add new rov	N	

INVESTMENTS AND PROPRIETARY INTERESTS

BASIC INFORMATION

Within the last 3 years	s, have you or an	y household members				
held any investments related to health or healthcare? e.g., stocks, bonds, stock options, or other securities. Please include trusts or holding companies. You may exclude broadly diversified investments such as mutual or pension funds.					⊠ N	0
held any commercial business interests related to health or healthcare? e.g., board membership, proprietorship, joint ventures, controlling interest					N	0
held any patents, trademarks, or copyrights related to health or healthcare? Please include pending.					N	0
INTELLECTUAL AND O	THER INTERESTS					
Within the last 3 years	s, have you or an	y household members				
participated in workgroups, panels, or committees through other medical societies or healthcare organizations?				⊠Yes	N	0
participated in any advocacy or lobbying activities related to health or healthcare, including any roles or relationships with disease advocacy organizations?				Yes	N	0
spoken publicly on topics related to health or healthcare?				Yes	N	0
	-	ground or present interests not addressed above bjectivity or independence?	that	Yes	N	0
For any	"Yes"responses,	please provide additional details in the space p	rovided b	elow.		
Status	Reporting for	Details (organization, role, topic area)	Amount	of Incom	е	
Active (current)	Myself	Council of Medical Specialty Societies Guideline Component Group	\$0	\$0		X
			Click	to add ne	ew rou	/
DECLARATION						
I certify that to my knowill promptly disclose	•	ief that I have disclosed my financial and intelled	ctual inter	ests abov	re and	I
Melanie D. Bird		Digitally signed by Melanie D. Bird Date: 2019.04.05 13:17:40 -05'00'	Apr 5, 2019	9		
Signature			Date			

Full Name	Jason W. Busse			
Places report all am	unloyment nesition	s you have held during the last 3 years:		
	1	s you have held during the last 5 years.	1 .	
Status	Employer		Annual Income Range	
Active (current)	McMaster Univ	ersity	≥\$100,001	X
			Click to add new rov	N
Please renort all em	nlovment position	s your household members have held during the	last 3 vears:	
		for household members.	idot o yeuro.	
Status	Relation	Employer	Annual Income Range	
Active (current)	Wife	Self-employed (lawyer)	≥\$100,001	X
			Click to add new rov	N
RESEARCH AND COI	NSULTING			
Within the last 3 ve	ars have you or ar	ny household members		
-	•			
		ppic related to health or healthcare?	∑ Yes	lo
e.g., grants, co	Jiitructs, sponsorsii	ips, and other research support		
participated or related to health	•	u, received honoraria, or consulted or advised for a	a topic Yes N	lo
provided exper	rt opinion or testim	ony related to health or healthcare as part of a reg	gulatory, 🖂 Yes 🗌 N	lo
legislative, or judi	cial process?			
For a	ny "Yes"responses,	, please provide additional details in the space pro	ovided below.	
Status	Reporting for	Details (organization, role, topic area)	Amount of Income	
	. 33	I have received multiple goverment grants to		
Active (current)	Myself	support systematic reviews, guidelines,	≥\$100,001	X
		observational studies, and clinical trials.		
		I was the (unpaid) co-chair for Health Quality	40	
Select	Myself	Ontario Standards for the use of opioids in both chronic and acute pain.	\$0	X
		I was an invited exert witness called by the House of		
Select	Myself	Commons Standing Comittee on Veterans Affairs	\$0	Х
	,	regarding evidence for medicinal cannabis.		
			Click to add new rov	v

INVESTMENTS AND PROPRIETARY INTERESTS

BASIC INFORMATION

Within the last 3 year	s, have you or an	y household members				
held any investments related to health or healthcare? e.g., stocks, bonds, stock options, or other securities. Please include trusts or holding companies. You may exclude broadly diversified investments such as mutual or pension funds.					⊠ N	lo
held any commercial business interests related to health or healthcare? e.g., board membership, proprietorship, joint ventures, controlling interest					N	lo
held any patents, trademarks, or copyrights related to health or healthcare? Please include pending.					N	lo
NTELLECTUAL AND O	THER INTERESTS					
Within the last 3 year	s, have you or an	y household members				
participated in workgroups, panels, or committees through other medical societies or healthcare organizations?					N	lo
participated in any advocacy or lobbying activities related to health or healthcare, including any roles or relationships with disease advocacy organizations?					N	lo
spoken publicly on topics related to health or healthcare?				∑Yes	N	lo
	-	ground or present interests not addressed above t bjectivity or independence?	hat	Yes	N	0
For any	"Yes"responses,	please provide additional details in the space pro	vided be	elow.		
Status	Reporting for	Details (organization, role, topic area)	Amount	of Incom	е	
Active (current)	Myself	I am an invited member of an opioid task force organized by the Canadian Pain Society, and a member of the pan-canadian opioid advisory board led by the Canadian College of Family Physcians	\$0			X
Active (current)	Myself	I have given multiple television, radio, print interviews, and conference presentations on the topics of opioids and cannabis - typically regarding their role in the management of chronic pain.	\$0			X
			Click	to add ne	w rou	ν
DECLARATION						
certify that to my kn	•	ief that I have disclosed my financial and intellect	ual inter	ests abov	e and	I

Jason W. Busse

Digitally signed by Jason W. Busse Date: 2019.04.16 13:49:26 -04'00'

Apr 16, 2019

Signature Date

Please respond to the following prompts and then fill in additional detail via the summary table starting on page 4.

1. EMPLOYMENT Use the summary table to report any employment that you or any members have held during the last 3 years in Row 1 (for self) and Row 6 (for househouse).		s).
2. RESEARCH AND CONSULTING SUPPORT Within the last 3 years, have you or any household members		
2a. received research support for a topic related to health or healthcare? <i>E.g., grants, contracts, sponsorships, and other research support</i>	Yes	X_No
2b. participated on a speaker's bureau, received honoraria, or consulted or advised for a topic related to health or healthcare?	X_Yes	No
2c. provided expert opinion or testimony related to health or healthcare as part of regulatory, legislative, or judicial process?	Yes	X_No
ALL YES RESPONSES, 2a-2c Use the summary table to report details in Row 2 (for self) and Row 7 (for house	hold memb	ers).
3. INVESTMENT AND PROPRIETARY INTERESTS Within the last 3 years, have you or any household members		
3a. held any investments related to health or healthcare? E.g., stocks, bonds, stock options, or other securities. Please include trusts or holding companies. You may exclude broadly diversified investments such as mutual or pension funds.	Yes	X_No
3b. held any commercial business interests related to health or healthcare? <i>E.g., board membership, proprietorship, joint ventures, controlling interest</i>	Yes	X_No

ALL YES RESPONSES, 3a-3c

Yes

X_No

3c. . . .held any patents, trademarks, or copyrights related to health or

Use the summary table to report details in Row 3 (for self) and Row 8 (for household members).

4. INTELLECTUAL INTERESTS

healthcare?

Please include pending.

Wi	4a participated in workgroups, panels, or committees through other medical societies or healthcare organizations?	X_Yes	No
	4b. participated in any advocacy or lobbying activities related to health or healthcare, including any roles or relationships with disease advocacy organizations?	Yes	X_No
	4c spoken publicly on topics related to health or healthcare?	X_Yes	No
5.	OTHER INTERESTS Is there any other aspect of your background or present interests not addressed above that might be perceived as affecting your objectivity or independence?	Yes	X_No

ALL YES RESPONSES, 4a-4c

Use the summary table to report details in Row 4 (for self) and Row 9 (for household members).

ALL YES RESPONSES, 5

Use the summary table to report details in Row 5 (for self) and Row 10 (for household members).

NAME: Kenneth Lin

		ACTIVE (Current)	INACTIVE (Last 3 years)
	Category	Organization, role, and amount received*	Organization, role, and amount received*
		Reporting for sel	
1	Employment	Medstar Georgetown University Hospital	•
2	Research & Consulting Support	 Deputy Editor of American Family Physician journal published by American Academy of Family Physicians (\$10,001 to 50,000) Associate Editor for Essential Evidence Plus, published by Wiley-Blackwell (\$10,001 to 50,000) Author of chapter on Screening for Testicular Cancer for UpToDate (<\$5,000) 	 Consultant for workplace wellness activities for Business Health Services (Baltimore, MD) (<\$5,000)
3	Intellectual Interests	 Have written and given public lectures on cancer screening, hypertension, diabetes, Choosing Wisely, overdiagnosis 	•
4	Committees, Workgroups, & Advisory Roles	 American Academy of Family Physicians Science Advisory Panel (2017-present) AAO-HNS Epistaxis Guideline panel (2018-present) CDC Advisory Committee on Breast Cancer in Young Women (appointed March 2019) 	 AAFP Atrial Fibrillation Guideline panel member (2016-17) AAO-HNS Cerumen Impaction panel member (2016-17)
5	Other interests	 Expert commentator for Medscape Family Medicine (<\$5,000) 	
		Reporting for household	members
6	Employment	Modern Mobile Medicine	•
7	Research & Consulting Support	 Fertility Awareness / Natural Family Planning (\$10,001 to 50,000) 	•
8	Investment & Proprietary Interests	•	•
9	Intellectual Interests	 Paid lectures on Direct Primary Care model (<\$5,000) 	•
10	Other interests	•	•

RANGES FOR REPORTING AMOUNT RECEIVED

- a) \$0
- b) ≤\$5,000

- c) \$5,001 to 10,000 d) \$10,001 to 50,000

e) \$50,001 to 100,000

f) ≥\$100,001

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

ruii Name <u>L</u>	Javid T. O'Gurek				
Please report all emplo	yment positions	you have held during the last 3 years:			
Status	Employer		Annual I	ncome Ro	anae
Active (current)		ol of Medicine at Temple University	≥\$100,00		X
		•		to add ne	100000
Please report all emple	nyment nositions	your household members have held during the l	ast 3 yea	rc.	
			ast 5 yea	13.	
I nave no emplo	syment to report	for household members.			
RESEARCH AND CONS	ULTING				
Within the last 3 years	, have you or any	y household members			
received research	support for a tor	oic related to health or healthcare?		⊠ Yes	□No
	5.5	ps, and other research support		N 163	
participated on a related to health or		, received honoraria, or consulted or advised for a	topic	Yes	⊠ No
related to fleatiff of f	nealthcare:				
		ony related to health or healthcare as part of a reg	ulatory,	Yes	⊠No
legislative, or judicia	I process?				
For any	"Yes"responses,	please provide additional details in the space pro	ovided be	low.	
Status	Reporting for	Details (organization, role, topic area)	Amount	of Incom	е
Active (current)	Myself	Pennsylvania PacMAT grant	≤\$5000		X
			Click	to add ne	ew row
INVESTMENTS AND PR	ROPRIETARY INTE	RESTS			
Within the last 3 years	s have you or any	y household members			
2. The state of th					
held any investm		ealth or nealthcare? or other securities. Please include trusts or holding	7	Yes	⊠ No
1870 Miles		udly diversified investments such as mutual or pens			
funds.					
held any commer	rcial business inte	rests related to health or healthcare?		Yes	⊠No
		orship, joint ventures, controlling interest			
held any natents	trademarks or o	opyrights related to health or healthcare?		□Vas	NI.
Please include p		opposition to the attitude in the attitude is:		Yes	⊠ No
	-			•3	

BASIC INFORMATION

INTELLECTUAL AND OTHER INTERESTS

Within the last 3 years	s, have you or an	y household members						
participated in workgroups, panels, or committees through other medical societies or healthcare organizations?								
participated in any advocacy or lobbying activities related to health or healthcare, including any roles or relationships with disease advocacy organizations?						0		
spoken publicly o	n topics related t	to health or healthcare?		⊠Yes	No	0		
Is there any other aspect of your background or present interests not addressed above that Mes No might be perceived as affecting your objectivity or independence?								
		please provide additional details in the space pro						
Status	Reporting for	Details (organization, role, topic area)	-	of Incom	e			
Inactive (last 3 yrs)	Myself	AAFP, Commission on Health of the Public & Science	\$0			X		
Active (current)	Myself	PAFP, Board Chair	\$0			X		
Inactive (last 3 yrs)	Myself	PAFP, President	\$0			X		
Active (current)	Myself	AMA Pain Task Force	\$0			X		
Active (current)	Myself	NQF SDOH Data Integration Workgroup	\$0			X		
			Click	to add ne	ew rou	/		
DECLARATION								
	1000	ief that I have disclosed my financial and intellect	ual inter	ests abov	e and	ı		
Swedt Office	lun		April 10, 20)19				
Signature		ı	Date					