

Disclosure Purpose: DM drug review, Annual Governance
Disclosure 2022-23, Contractor/Guest Annual Disclosure 2021 -
22, Faculty and Planning Committee, Internal Medicine Meeting
2022 faculty

Employment Information: Currently Employed

Summary of Interests

Company or Organization

Entity	Type	Interest Held By	Value
Agency for Healthcare Research and Quality	Grant / Contract	Other - Institution	\$400,000.00
Recipient Name: University of Minnesota and Center for Veterans Research and Education Grant / Contract Description: Contracts from AHRQ through their EPC program to conduct evidence reports Grant / Contract Valuation Date: 04/16/2021		Recipient Type: Institution Grant / Contract Purpose: Research Grant / Contract Amount: \$400,000.00 Contract Start Date: 01/01/2020 Contract End Date: Ongoing / No Known End Date	
Additional Information: I provide approx. 10% effort as co-director of our MN-EPC on the oversight and operations of our center, contribution to AHRQ-EPC methods workgroups and leadership on topic contracts awarded to our EPC through a competitive bidding process.			
American College of Physicians	Other	Other - Minneapolis VA CVRE	-
Category: Other Compensation Type: Other Compensation: No		Start Date: 01/01/2022 End Date: Ongoing / No Known End Date Other Compensation: 150,000 Additional Information: Support for our research group to ACP Center for Evidence Reviews, conducting evidence report on "Newer Anti-Diabetes Medications"	
American Urological Association Foundation	Other	Other - Minneapolis VA CVRE	-
Category: Other Compensation Type: Unpaid Additional Information: I receive support (approximately \$30,000) for our research group to conduct reviews under contract with the AUA for their clinical guideline development. I receive no personal financial support		Start Date: 01/01/2018 End Date: 05/01/2021 Compensation:	
Merck	Grant / Contract	Other - Subcontract to UM	\$263,892.00
Recipient Name: Kristine Ensrud Grant / Contract Description: Subcontract to UM from Pacific Medical University. FUNds to UM are NOT directly from Merck. Grant / Contract Valuation Date: 01/08/2021 Additional Information: Funding for research team. FUNds are provided by PAcific Medical not Merck. No salary support to Dr. Ensrud		Recipient Type: Institution Grant / Contract Purpose: Research Grant / Contract Amount: \$263,892.00 Contract Start Date: 09/07/2017 Contract End Date: 02/29/2020	
Midwest CEPAC-ICER	Other	Self	-
Category: Other Compensation Type: Unpaid Additional Information:		Start Date: 01/01/2018 End Date: Compensation:	
U.S. Department of Veterans Affairs	Employment Current Employment	Self	-
Title: Professor Start Date: 06/15/2018 End Date: Ongoing / No Known End Date		Position Description: Staff Physician Additional Information:	
VA Preventive Medical Advisory Committee	Consultant	Self	-
Category: Consultant Compensation Type: Unpaid Additional Information:		Start Date: 01/01/2018 End Date: Compensation:	

Intellectual Property

Type	Is Licensed	Interest Held By	Value
Other Intellectual Property - Research grants/contracts from VA, AHRQ, and ACP ...	-	Self	\$210,000.00
Description: Research grants/contracts from VA, AHRQ, and ACP to conduct evidence synthesis reports. Income: Yes		Income Source: Funds paid to my institution to support work of our evidence review team. AHRQ contracts can support my salary. Others do not. Additional Information: The funds of payment through home institution are research support for programs NOT personal salary. I receive approximately 5-10000 annually as additional salary beyond my VA salary for grant support through AHRQ for Evidence-based Practice Center reports as part of my role as co-director of the MN-EPC	
Amount	Type	Year	Payment Receipt
\$10,000.00	Estimated	2020	Direct Payment

\$200,000.00	Estimated	2019	Payment through home institution
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Other Intellectual Property - Evidence reports and manuscripts written on oste ...	-	Self	-
Description: Evidence reports and manuscripts written on osteoporosis based on AHRQ-funded research Income:		Income Source: AHRQ-EPC program Additional Information: Director of AHRQ-EPC site that was awarded contract. Wife was a collaborating investigator on this project and received salary support from AHRQ. I was not the PI of this project but rather overall EPC director and project collaborator	

Certification

By submitting this form, I attest that I have disclosed all interests related to healthcare from the last 3 years on behalf of myself and any household members, including consideration of interests in the following areas:

- Research and consulting support (e.g., grants, contracts, sponsorships, honoraria, or any other fees related to role as consultant, speaker's bureau participation, or expert as part of regulatory, legislative, or judicial process)
- Investments and proprietary interests excluding broadly diversified investments such as mutual or pension funds (e.g., stocks, bonds, stock options, commercial business interests, patents, trademarks, copyrights)
- Membership on boards, workgroups, panels, or committees through other medical societies or healthcare organizations
- Participation in advocacy or lobbying activities, including any roles or relationships with disease advocacy organizations

Other aspects of my background or present interests not addressed above that might be perceived as affecting my objectivity or independence

**American College of Physicians
Clinical Guidelines Committee
Disclosure of Interests: Supplemental Questions and Attestation**

Please enter your name: (You will need to sign on the second page)

Name: Timothy J. Wilt

Disclosures of Interests: Supplemental Questions

Please review the following topic areas and report any intellectual interests held by you or any household members that may be relevant to the topic areas.

- *Intellectual interests* are defined as academic ideas or activities or specific viewpoints and relate to such issues as academic advancement, clinical revenue streams, or community standing. Examples of types of intellectual interests include publications, unpaid participation on workgroups, panels, or committees, or membership in special interest groups.

Topic Areas: depression, diabetes, and colorectal cancer screening.

Within the past 3 years, have you or any household members published on any of the areas? Please include both peer-reviewed and non-peer-reviewed sources (e.g., newspaper op-ed; blog).



I have publications to report (please list in space below).



I have no publications to report.

Do you or any household members have any other intellectual interests related to any of the areas above?



I have interests to report (please list in space below).



I have no interest to report.

If you answered yes to either of the above questions, please provide additional details on the relevant interests (if not already captured in the Convey System) and list any relevant publications in the space below (or send a list of relevant publications as attachment).

I am the Director of the Minnesota ACP-Center for Evidence Reviews that is conducting t



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Clinical Guidelines Committee
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Acknowledgements and Attestations

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- I attest that I have reviewed the attached Convey disclosures report and that my disclosures are up to date.
- I attest that I have disclosed all healthcare-related financial and intellectual interests for myself and any household members from the last 3 years and I will promptly disclose any changes. These include but are not limited to: research and consulting roles; investments and proprietary interests, and intellectual interests such as participation in workgroups, panels, or committees through other medical societies or healthcare organizations.

Timothy J. Wilt

Print Name



Signature

04/22/22

Date

Disclosure Purpose: Annual Governance Disclosure 2022-23 Employment Information: Currently Employed

Summary of Interests

Company or Organization

Entity	Type	Interest Held By	Value
American Society for Bone and Mineral Research	Other	Self	-
Category: Other Compensation Type: Unpaid Additional Information:	Start Date: 01/01/2017 Compensation:	End Date: Ongoing / No Known End Date	
David Geffen School of Medicine, University of California, Los Angeles	Employment	Spouse/Partner	-
Title: Professor Start Date: 01/01/2017 End Date:	Position Description: Professor on Faculty Additional Information:		
David Geffen School of Medicine, University of California, Los Angeles	Employment Current Employment	Self	-
Title: Professor of Medicine Start Date: 07/01/2017 End Date:	Position Description: Professor in the Dept. Of Internal Medicine Additional Information:		
Dr. Miriam and Sheldon G. Adelson Medical Research Foundation	Grant / Contract	Spouse/Partner	\$350,000.00
Recipient Name: Harley Kornblum Grant / Contract Description: Neural repair and brain cancer Grant / Contract Amount: \$350,000.00 Contract Start Date: 01/01/2017 Contract End Date:	Recipient Type: Institution Grant / Contract Purpose: Research Grant / Contract Valuation Date: 12/23/2019 Additional Information:		
National Institutes of Health	Grant / Contract	Self	\$2,527,938.00
Recipient Name: Carolyn Crandall Grant / Contract Description: NIH R01 grant AG071592-01 Sleep, Falls and Fractures in men and women: Role of Nocturnal Hypoxia Grant / Contract Valuation Date: Additional Information:	Recipient Type: Institution Grant / Contract Purpose: Research Grant / Contract Amount: \$2,527,938.00 Contract Start Date: 09/15/2021 Contract End Date: 05/31/2026		
National Institutes of Health	Grant / Contract	Self	\$2,711,621.00
Recipient Name: Carolyn Crandall Grant / Contract Description: R01 Grant PI R01AG071611 The COcoa SSupplement and Multivitamins Outcomes Study (COSMOS)..... Grant / Contract Valuation Date: 08/18/2021 Additional Information:	Recipient Type: Institution Grant / Contract Purpose: Research Grant / Contract Amount: \$2,711,621.00 Contract Start Date: 05/05/2021 Contract End Date: 02/28/2025		
National Institutes of Health	Grant / Contract	Spouse/Partner	\$200,000.00
Recipient Name: Harley Kornblum Grant / Contract Description: Research on brain cancer Grant / Contract Amount: \$200,000.00 Contract Start Date: 01/01/2017 Contract End Date: Ongoing / No Known End Date	Recipient Type: Institution Grant / Contract Purpose: Research Grant / Contract Valuation Date: 12/23/2019 Additional Information: Brain cancer research		
National Institutes of Health	Grant / Contract	Self	\$25,000.00
Recipient Name: Carolyn J. Crandall Grant / Contract Description: Contract from Western Regional Center for NHLBI-funded Women's Health Initiative Study Grant / Contract Valuation Date: 12/23/2019 Additional Information:	Recipient Type: Institution Grant / Contract Purpose: Research Grant / Contract Amount: \$25,000.00 Contract Start Date: 01/01/2019 Contract End Date: Ongoing / No Known End Date		

Certification

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Other aspects of my background or present interests not addressed above that might be perceived as affecting my objectivity or independence

**American College of Physicians
Clinical Guidelines Committee
Disclosure of Interests: Supplemental Questions and Attestation**

Please enter your name: (You will need to sign on the second page)

Name: Carolyn J. Crandall

Disclosures of Interests: Supplemental Questions

Please review the following topic areas and report any intellectual interests held by you or any household members that may be relevant to the topic areas.

- *Intellectual interests* are defined as academic ideas or activities or specific viewpoints and relate to such issues as academic advancement, clinical revenue streams, or community standing. Examples of types of intellectual interests include publications, unpaid participation on workgroups, panels, or committees, or membership in special interest groups.

Topic Areas: depression, diabetes, and colorectal cancer screening.

Within the past 3 years, have you or any household members published on any of the areas? Please include both peer-reviewed and non-peer-reviewed sources (e.g., newspaper op-ed; blog).

☐ I have publications to report (please list in space below).

☒ I have no publications to report.

Do you or any household members have any other intellectual interests related to any of the areas above?

☐ I have interests to report (please list in space below).

☒ I have no interest to report.

If you answered yes to either of the above questions, please provide additional details on the relevant interests (if not already captured in the Convey System) and list any relevant publications in the space below (or send a list of relevant publications as attachment).

**American College of Physicians
Clinical Guidelines Committee
Disclosure of Interests: Supplemental Questions and Attestation**

Acknowledgements and Attestations

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Carolyn J. Crandall

Print Name

Carolyn J. Crandall

Digitally signed by Carolyn J. Crandall
DN: cn=Carolyn J. Crandall, o=University of California, Los
Angeles, ou, email=ccrandall@mednet.ucla.edu, c=US
Date: 2022.04.14 16:01:56 -07'00'

4/14/2022

Signature

Date

Disclosure Purpose: Annual Governance Disclosure 2022-23,
Contractor/Guest Annual Disclosure 2021 - 22

Employment Information: Currently Employed

Summary of Interests

Company or Organization

Entity	Type	Interest Held By	Value						
Agency for Healthcare Research and Quality	Grant / Contract	Self	\$350,000.00						
<div>Recipient Name: Brown Evidence-based Practice Center</div> <div>Grant / Contract Description: Multi year contract. Specific contract to conduct systematic review (nominated by ACP)</div> <div>Grant / Contract Valuation Date: 03/29/2019</div> <div>Additional Information:</div>		<div>Recipient Type: Institution</div> <div>Grant / Contract Purpose: Research</div> <div>Grant / Contract Amount: \$350,000.00</div> <div>Contract Start Date: 03/29/2019</div> <div>Contract End Date: Ongoing / No Known End Date</div>							
American association gynecologic laparoscopists	Consultant	Self	\$10,000.00						
<div>Category: Consultant</div> <div>Compensation Type: Cash</div> <div>Additional Information: Methodologic consultant for society's guideline development group</div>		<div>Start Date: 04/01/2018</div> <div>End Date: 12/31/2021</div> <div>Compensation: Yes</div> <table><tr><th>Year</th><th>Amount</th><th>Type</th></tr><tr><td>2020</td><td>\$10,000.00</td><td>Actual</td></tr></table>		Year	Amount	Type	2020	\$10,000.00	Actual
Year	Amount	Type							
2020	\$10,000.00	Actual							
Brown University	Employment <div>Current Employment</div>	Self	-						
<div>Title: Associate Professor</div> <div>Start Date: 07/01/2014</div> <div>End Date:</div>		<div>Position Description: Center Co-Director</div> <div>Additional Information:</div>							
Kidney disease improving clinical outcomes	Consultant	Self	\$10,000.00						
<div>Category: Consultant</div> <div>Compensation Type: Cash</div> <div>Additional Information: Conducted systematic review for guideline update</div>		<div>Start Date: 11/01/2020</div> <div>End Date: 06/30/2022</div> <div>Compensation: Yes</div> <table><tr><th>Year</th><th>Amount</th><th>Type</th></tr><tr><td>2021</td><td>\$10,000.00</td><td>Actual</td></tr></table>		Year	Amount	Type	2021	\$10,000.00	Actual
Year	Amount	Type							
2021	\$10,000.00	Actual							
National Academies of Sciences, Engineering, and Medicine	Consultant	Self	-						
<div>Category: Consultant</div> <div>Compensation Type: Unpaid</div> <div>Additional Information: Workgroup panel member for daily recommended intake review</div>		<div>Start Date: 11/30/2021</div> <div>End Date: Ongoing / No Known End Date</div> <div>Compensation: No</div>							
Society of gynecologic surgeons	Consultant	Self	\$15,000.00						
<div>Category: Consultant</div> <div>Compensation Type: Cash</div> <div>Additional Information: Methodological consultation to the society's systematic review group</div>		<div>Start Date: 01/01/2007</div> <div>End Date: Ongoing / No Known End Date</div> <div>Compensation: Yes</div> <table><tr><th>Year</th><th>Amount</th><th>Type</th></tr><tr><td>2021</td><td>\$15,000.00</td><td>Actual</td></tr></table>		Year	Amount	Type	2021	\$15,000.00	Actual
Year	Amount	Type							
2021	\$15,000.00	Actual							
Wolters Kluwer Health, Inc.	Other	Self	\$1,000.00						
<div>Category: Other</div> <div>Compensation Type: Cash</div> <div>Additional Information: Chapter author</div>		<div>Start Date: 06/01/2016</div> <div>End Date: Ongoing / No Known End Date</div> <div>Compensation: Yes</div> <table><tr><th>Year</th><th>Amount</th><th>Type</th></tr><tr><td>2021</td><td>\$1,000.00</td><td>Estimated</td></tr></table>		Year	Amount	Type	2021	\$1,000.00	Estimated
Year	Amount	Type							
2021	\$1,000.00	Estimated							

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Other aspects of my background or present interests not addressed above that might be perceived as affecting my objectivity or independence



**American College of Physicians
Clinical Guidelines Committee
Disclosure of Interests: Supplemental Questions and Attestation**

Please enter your name: (You will need to sign on the second page)

Name: Ethan Balk

Disclosures of Interests: Supplemental Questions

Please review the following topic areas and report any intellectual interests held by you or any household members that may be relevant to the topic areas.

- *Intellectual interests* are defined as academic ideas or activities or specific viewpoints and relate to such issues as academic advancement, clinical revenue streams, or community standing. Examples of types of intellectual interests include publications, unpaid participation on workgroups, panels, or committees, or membership in special interest groups.

Topic Areas: depression, diabetes, and colorectal cancer screening.

Within the past 3 years, have you or any household members published on any of the areas? Please include both peer-reviewed and non-peer-reviewed sources (e.g., newspaper op-ed; blog).



I have publications to report (please list in space below).



I have no publications to report.

Do you or any household members have any other intellectual interests related to any of the areas above?



I have interests to report (please list in space below).



I have no interest to report.

If you answered yes to either of the above questions, please provide additional details on the relevant interests (if not already captured in the Convey System) and list any relevant publications in the space below (or send a list of relevant publications as attachment).

Balk EM, Adam GP, Reddy Bhuma M, Konnyu K, Saldanha IJ, Beland MD, Shah N. Diag



**American College of Physicians
Clinical Guidelines Committee
Disclosure of Interests: Supplemental Questions and Attestation**

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Ethan Balk

Print Name

Ethan Balk

Signature

 Digitally signed by Ethan Balk
Date: 2022.04.21 09:25:40 -04'00'

4-21-2022

Date

Disclosure Purpose: Annual Governance Disclosure 2022-23, Adam Rodman's podcast

Employment Information: Currently Employed

Summary of Interests

Company or Organization

Entity	Type	Interest Held By	Value
American College of Physicians	Fiduciary Officer	Self	-
<div>Official Title: Chair, Board of Regents</div> <div>Compensation Type: Cash</div> <div>Compensation: Yes</div> <div>Additional Information:</div> <div>Position Description: As above</div> <div>Start Date: 05/01/2021</div> <div>End Date: 04/30/2022</div>			
U.S. Department of Veterans Affairs	Employment <div>Current Employment</div>	Self	-
<div>Title: Staff Physician</div> <div>Start Date: 08/08/1979</div> <div>End Date: Ongoing / No Known End Date</div> <div>Position Description: Attending physician, supervising residents and medical students</div> <div>Additional Information:</div>			

Certification

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Other aspects of my background or present interests not addressed above that might be perceived as affecting my objectivity or independence

**American College of Physicians
Clinical Guidelines Committee
Disclosure of Interests: Supplemental Questions and Attestation**

Please enter your name: (You will need to sign on the second page)

Name: Thomas G. Cooney

Disclosures of Interests: Supplemental Questions

Please review the following topic areas and report any intellectual interests held by you or any household members that may be relevant to the topic areas.

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Topic Areas: depression, diabetes, and colorectal cancer screening.

Within the past 3 years, have you or any household members published on any of the areas? Please include both peer-reviewed and non-peer-reviewed sources (e.g., newspaper op-ed; blog).

☐

I have publications to report (please list in space below).

☒

I have no publications to report.

Do you or any household members have any other intellectual interests related to any of the areas above?

☐

I have interests to report (please list in space below).

☒

I have no interest to report.

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**American College of Physicians
Clinical Guidelines Committee
Disclosure of Interests: Supplemental Questions and Attestation**

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Thomas G. Cooney

Print Name

Thomas G Cooney MD

Digitally signed by Thomas G Cooney MD
Date: 2022.04.23 09:26:26 -07'00'

04/23/2022

Signature

Date

Disclosure Purpose: Annual Governance Disclosure 2022-23 Employment Information: Currently Employed

Summary of Interests

Company or Organization

Entity	Type	Interest Held By	Value
Jacob Cross	Employment Current Employment	Self	-
<div><div>Title: President</div><div>Start Date: 01/01/2012</div><div>End Date: Ongoing / No Known End Date</div><div>Position Description: President and CEO</div><div>Additional Information:</div></div>			
Ochsner Health System	Consultant Current Employment	Self	-
<div><div>Category: Consultant</div><div>Compensation Type: Cash</div><div>Additional Information:</div><div>Start Date: 04/01/2020</div><div>Compensation:</div><div>End Date:</div></div>			

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**American College of Physicians
Clinical Guidelines Committee
Disclosure of Interests: Supplemental Questions and Attestation**

Please enter your name: (You will need to sign on the second page)

Name: Jacob T Cross

Disclosures of Interests: Supplemental Questions

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☐

I have publications to report (please list in space below).

☒

I have no publications to report.

Do you or any household members have any other intellectual interests related to any of the areas above?

☐

I have interests to report (please list in space below).

☒

I have no interest to report.

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**American College of Physicians
Clinical Guidelines Committee
Disclosure of Interests: Supplemental Questions and Attestation**

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Jacob T Cross

Print Name

Jacob Cross  Digitally signed by Jacob Cross
Date: 2022.04.19 10:08:36 -06'00'

4/19/2022

Signature

Date

Disclosure Purpose: Annual Governance Disclosure 2022-23, CME Contributor, Internal Medicine Meeting 2022 faculty **Employment Information:** Currently Employed

Summary of Interests

Company or Organization

Entity	Type	Interest Held By	Value
nick fitterman	Employment Current Employment	Self	-
<i>Title:</i> executive director Huntington Hospital <i>Start Date:</i> 10/03/2018		<i>Position Description:</i> executive director <i>Additional Information:</i>	<i>End Date:</i> Ongoing / No Known End Date

Certification

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Disclosure Purpose: Annual Governance Disclosure 2022-23 Employment Information: Currently Employed

Summary of Interests

Company or Organization

Entity	Type	Interest Held By	Value
Centers for Disease Control and Prevention	Employment Current Employment	Self	-
<div><div>Title: Director, Office of Antibiotic Stewardship</div><div>Start Date: 07/15/2007 End Date: Ongoing / No Known End Date</div><div>Position Description: I lead CDC's public health efforts related to improving antibiotic use. I am also leading efforts related to the COVID-19 pandemic response.</div><div>Additional Information:</div></div>			
GI Specialists of Georgia	Employment	Spouse/Partner	-
<div><div>Title: Physician</div><div>Start Date: 09/01/2010 End Date:</div><div>Position Description: Patient care</div><div>Additional Information:</div></div>			
Society for Healthcare Epidemiology of America	Other	Self	-
<div><div>Category: Other</div><div>Compensation Type: Unpaid</div><div>Additional Information: Board Member, Councilor</div><div>Start Date: 01/01/2021 End Date: Ongoing / No Known End Date</div><div>Compensation:</div></div>			

Certification

By submitting this form, I attest that I have disclosed all interests related to healthcare from the last 3 years on behalf of myself and any household members, including consideration of interests in the following areas:

- Research and consulting support (e.g., grants, contracts, sponsorships, honoraria, or any other fees related to role as consultant, speaker's bureau participation, or expert as part of regulatory, legislative, or judicial process)
- Investments and proprietary interests excluding broadly diversified investments such as mutual or pension funds (e.g., stocks, bonds, stock options, commercial business interests, patents, trademarks, copyrights)
- Membership on boards, workgroups, panels, or committees through other medical societies or healthcare organizations
- Participation in advocacy or lobbying activities, including any roles or relationships with disease advocacy organizations

Other aspects of my background or present interests not addressed above that might be perceived as affecting my objectivity or independence

**American College of Physicians
Clinical Guidelines Committee
Disclosure of Interests: Supplemental Questions and Attestation**

Please enter your name: (You will need to sign on the second page)

Name: Lauri Hicks

Disclosures of Interests: Supplemental Questions

Please review the following topic areas and report any intellectual interests held by you or any household members that may be relevant to the topic areas.

- *Intellectual interests* are defined as academic ideas or activities or specific viewpoints and relate to such issues as academic advancement, clinical revenue streams, or community standing. Examples of types of intellectual interests include publications, unpaid participation on workgroups, panels, or committees, or membership in special interest groups.

Topic Areas: depression, diabetes, and colorectal cancer screening.

Within the past 3 years, have you or any household members published on any of the areas? Please include both peer-reviewed and non-peer-reviewed sources (e.g., newspaper op-ed; blog).



I have publications to report (please list in space below).



I have no publications to report.

Do you or any household members have any other intellectual interests related to any of the areas above?



I have interests to report (please list in space below).



I have no interest to report.

If you answered yes to either of the above questions, please provide additional details on the relevant interests (if not already captured in the Convey System) and list any relevant publications in the space below (or send a list of relevant publications as attachment).

I am a coauthor on ACP CGC publications related to colorectal cancer screening. No other



**American College of Physicians
Clinical Guidelines Committee
Disclosure of Interests: Supplemental Questions and Attestation**

Acknowledgements and Attestations

By signing this form,

- I acknowledge that in order to maintain transparency, all participants' disclosure of interests will be publicly available on ACP's website and a link to the disclosures will be included in each published work.
- I attest that I have reviewed the attached Convey disclosures report and that my disclosures are up to date.
- I attest that I have disclosed all healthcare-related financial and intellectual interests for myself and any household members from the last 3 years and I will promptly disclose any changes. These include but are not limited to: research and consulting roles; investments and proprietary interests, and intellectual interests such as participation in workgroups, panels, or committees through other medical societies or healthcare organizations.

Lauri Hicks

Print Name

Lauri Hicks -S7 Digitally signed by Lauri Hicks -S7
Date: 2022.04.13 15:39:04 -04'00' **4/13/2022**

Signature

Date

Disclosure Purpose: Internal Medicine Meeting 2022 faculty, Annual Governance Disclosure 2021-2022

Employment Information: Currently Employed

Summary of Interests

Company or Organization

Entity	Type	Interest Held By	Value
Kaiser Permanente	Employment Current Employment	Self	-
Title: Primary Care Physician and Senior Investigator Start Date: 11/28/2005 End Date: Ongoing / No Known End Date		Position Description: Primary Care Physician, Northwest Permanente; Senior Investigator, Kaiser Permanente Center for Health Research Additional Information: Center for Health Research since 2005, NW Permanente since 2011	
Kaiser Permanente School of Medicine	Other	Self	-
Category: Other Compensation Type: Additional Information:		Start Date: 01/01/2020 Compensation: No	End Date: Ongoing / No Known End Date
Kaiser Permanente Evidence Based Practice Center	Employment	Self	-
Title: Director Start Date: 01/01/2016 End Date: Ongoing / No Known End Date		Position Description: Additional Information:	
Kaiser Permanente National Guideline Committee	Consultant	Self	-
Category: Consultant Compensation Type: Additional Information:		Start Date: 01/01/2016 Compensation:	End Date: Ongoing / No Known End Date

Certification

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- Participation in advocacy or lobbying activities, including any roles or relationships with disease advocacy organizations

Other aspects of my background or present interests not addressed above that might be perceived as affecting my objectivity or independence

**American College of Physicians
Clinical Guidelines Committee
Disclosure of Interests: Supplemental Questions and Attestation**

Please enter your name: (You will need to sign on the second page)

Name: Jennifer Lin

Disclosures of Interests: Supplemental Questions

Please review the following topic areas and report any intellectual interests held by you or any household members that may be relevant to the topic areas.

- *Intellectual interests* are defined as academic ideas or activities or specific viewpoints and relate to such issues as academic advancement, clinical revenue streams, or community standing. Examples of types of intellectual interests include publications, unpaid participation on workgroups, panels, or committees, or membership in special interest groups.

Topic Areas: depression, diabetes, and colorectal cancer screening.

Within the past 3 years, have you or any household members published on any of the areas? Please include both peer-reviewed and non-peer-reviewed sources (e.g., newspaper op-ed; blog).



I have publications to report (please list in space below).



I have no publications to report.

Do you or any household members have any other intellectual interests related to any of the areas above?



I have interests to report (please list in space below).



I have no interest to report.

If you answered yes to either of the above questions, please provide additional details on the relevant interests (if not already captured in the Convey System) and list any relevant publications in the space below (or send a list of relevant publications as attachment).

1. Lin JS, Perdue LA, Henrikson NB, Bean SI, Blasi PR. Screening for Colorectal Cancer



**American College of Physicians
Clinical Guidelines Committee
Disclosure of Interests: Supplemental Questions and Attestation**

Acknowledgements and Attestations

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Jennifer Lin

Print Name

linjes

Signature



Digitally signed by linjes
Date: 2022.04.18 13:28:48 -07'00'

4/18/2022

Date

Disclosure Purpose: Annual Governance Disclosure 2021-2022 **Employment Information:** Currently Employed

Summary of Interests

Company or Organization

Entity	Type	Interest Held By	Value
The Maroto Law Group, PC	Employment Current Employment	Self	-
<i>Title:</i> Managing Partner <i>Start Date:</i> 12/01/1994		<i>Position Description:</i> Attorney <i>Additional Information:</i>	
<i>End Date:</i>			

Certification

By submitting this form, I attest that I have disclosed all interests related to healthcare from the last 3 years on behalf of myself and any household members, including consideration of interests in the following areas:

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Other aspects of my background or present interests not addressed above that might be perceived as affecting my objectivity or independence

**American College of Physicians
Clinical Guidelines Committee
Disclosure of Interests: Supplemental Questions and Attestation**

Please enter your name: (You will need to sign on the second page)

Name: Michael Maroto

Disclosures of Interests: Supplemental Questions

Please review the following topic areas and report any intellectual interests held by you or any household members that may be relevant to the topic areas.

- *Intellectual interests* are defined as academic ideas or activities or specific viewpoints and relate to such issues as academic advancement, clinical revenue streams, or community standing. Examples of types of intellectual interests include publications, unpaid participation on workgroups, panels, or committees, or membership in special interest groups.

Topic Areas: depression, diabetes, and colorectal cancer screening.

Within the past 3 years, have you or any household members published on any of the areas? Please include both peer-reviewed and non-peer-reviewed sources (e.g., newspaper op-ed; blog).

☐

I have publications to report (please list in space below).

☒

I have no publications to report.

Do you or any household members have any other intellectual interests related to any of the areas above?

☐

I have interests to report (please list in space below).

☒

I have no interest to report.

If you answered yes to either of the above questions, please provide additional details on the relevant interests (if not already captured in the Convey System) and list any relevant publications in the space below (or send a list of relevant publications as attachment).

**American College of Physicians
Clinical Guidelines Committee
Disclosure of Interests: Supplemental Questions and Attestation**

Acknowledgements and Attestations

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Michael Maroto

Print Name

Michael Maroto

Digitally signed by Michael Maroto
Date: 2022.04.21 16:31:35 -04'00'

Signature

Date

Disclosure Purpose: Annual Governance Disclosure 2021-2022 Employment Information: Currently Employed

Summary of Interests

Company or Organization

Entity	Type	Interest Held By	Value
American College of Rheumatology	Grant / Contract	Self	-
Recipient Name: Grant / Contract Description: Grant / Contract Amount: Contract Start Date: Contract End Date: Recipient Type: Grant / Contract Purpose: Grant / Contract Valuation Date: 07/28/2020 Additional Information:			
American Gastroenterological Association	Grant / Contract	Self	-
Recipient Name: Grant / Contract Description: Grant / Contract Amount: Contract Start Date: Contract End Date: Recipient Type: Grant / Contract Purpose: Grant / Contract Valuation Date: 07/28/2020 Additional Information:			
American Society of Hematology	Grant / Contract	Self	-
Recipient Name: Reem Mustafa Grant / Contract Description: Grant / Contract Amount: Contract Start Date: Contract End Date: Recipient Type: Institution Grant / Contract Purpose: Research Grant / Contract Valuation Date: Additional Information:			
Boehringer Ingelheim	Grant / Contract	Other - This is funding that is received by the University and I do not receive any of it and it does not support my salary	-
Recipient Name: The Kidney Institute at KUMC Grant / Contract Description: KUMC is one of the sites for an international RCTs Grant / Contract Amount: Contract Start Date: 01/01/2019 Contract End Date: Ongoing / No Known End Date Recipient Type: Grant / Contract Purpose: Grant / Contract Valuation Date: Additional Information:			
ICER	Grant / Contract	Self	-
Recipient Name: Grant / Contract Description: Grant / Contract Amount: Contract Start Date: Contract End Date: Recipient Type: Grant / Contract Purpose: Grant / Contract Valuation Date: 07/28/2020 Additional Information:			
Infectious Diseases Society of America	Grant / Contract	Self	-
Recipient Name: Reem Mustafa Grant / Contract Description: Methodological support for the COVID-19 guidelines Grant / Contract Amount: Contract Start Date: Contract End Date: Recipient Type: Grant / Contract Purpose: Grant / Contract Valuation Date: 01/11/2021 Additional Information:			
Pan American Health Organization	Grant / Contract	Self	-
Recipient Name: Reem Mustafa Grant / Contract Description: Grant / Contract Amount: Contract Start Date: 06/01/2020 Contract End Date: 03/31/2021 Recipient Type: Institution Grant / Contract Purpose: Research Grant / Contract Valuation Date: 04/16/2021 Additional Information:			
University of Kansas Medical Center	Employment Current Employment	Self	-
Title: Associate Professor of Internal Medicine Start Date: 02/28/2017 End Date: Ongoing / No Known End Date Position Description: Additional Information:			
World Health Organization	Grant / Contract	Self	-
Recipient Name: Grant / Contract Description: Grant / Contract Amount: Contract Start Date: Contract End Date: Recipient Type: Institution Grant / Contract Purpose: Research Grant / Contract Valuation Date: 07/28/2020 Additional Information:			

Certification

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- Participation in advocacy or lobbying activities, including any roles or relationships with disease advocacy organizations

Other aspects of my background or present interests not addressed above that might be perceived as affecting my objectivity or independence



**American College of Physicians
Clinical Guidelines Committee
Disclosure of Interests: Supplemental Questions and Attestation**

Please enter your name: (You will need to sign on the second page)

Name: Reem Mustafa

Disclosures of Interests: Supplemental Questions

Please review the following topic areas and report any intellectual interests held by you or any household members that may be relevant to the topic areas.

- *Intellectual interests* are defined as academic ideas or activities or specific viewpoints and relate to such issues as academic advancement, clinical revenue streams, or community standing. Examples of types of intellectual interests include publications, unpaid participation on workgroups, panels, or committees, or membership in special interest groups.

Topic Areas: depression, diabetes, and colorectal cancer screening.

Within the past 3 years, have you or any household members published on any of the areas? Please include both peer-reviewed and non-peer-reviewed sources (e.g., newspaper op-ed; blog).



I have publications to report (please list in space below).



I have no publications to report.

Do you or any household members have any other intellectual interests related to any of the areas above?



I have interests to report (please list in space below).



I have no interest to report.

If you answered yes to either of the above questions, please provide additional details on the relevant interests (if not already captured in the Convey System) and list any relevant publications in the space below (or send a list of relevant publications as attachment).

<https://pubmed.ncbi.nlm.nih.gov/33441402/>, <https://pubmed.ncbi.nlm.nih.gov/33975892/>,



**American College of Physicians
Clinical Guidelines Committee
Disclosure of Interests: Supplemental Questions and Attestation**

Acknowledgements and Attestations

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Reem Mustafa

Print Name

Reem Mustafa Digitally signed by Reem Mustafa
Date: 2022.05.05 08:35:13 -05'00'

Signature

Date

Disclosure Purpose: Annual Governance Disclosure 2022-23 Employment Information: Currently Employed

Summary of Interests

Company or Organization

Entity	Type	Interest Held By	Value
Center for Evidence-based Policy	Employment Current Employment	Self	-
Title: Clinical Epidemiologist		Position Description: CEBP supported 0.5 FTE until August 2020 CEBP supports 0.05 FTE since August 2020	
Start Date: 08/01/2014 End Date: Ongoing / No Known End Date		Additional Information:	
Medical Society of Metropolitan Portland	Fiduciary Officer	Self	-
Official Title: Trustee		Position Description: Trustee	
Compensation Type: Unpaid		Start Date: 08/01/2015 End Date: 01/01/2021	
Compensation:			
Additional Information:			
Milbank Memorial Fund	Travel	Self	\$10,000.00
Location(s): Various meetings and state workshops (as faculty)		Travel Start Date: 01/01/2015 Travel End Date: 03/31/2022	
Estimated Value: \$10,000.00		Valuation Date: 04/14/2022	
Purpose: Faculty for Evidence-informed Health Policy Workshops		Additional Information:	
National Conference of State Legislatures	Travel	Self	\$2,000.00
Location(s): Nashville, TN; New York, NY		Travel Start Date: 05/05/2018 Travel End Date: 03/01/2020	
Estimated Value: \$2,000.00		Valuation Date: 04/02/2021	
Purpose: Faculty for Evidence-informed Health Policy Workshop May 2018 and March 2020		Additional Information:	
Oregon Medical Association	Fiduciary Officer	Self	-
Official Title: Trustee at-large		Position Description: Trustee	
Compensation Type: Unpaid		Start Date: 01/01/2021 End Date:	
Compensation:			
Additional Information:			
Portland VA Medical Center	Employment Current Employment	Self	-
Title: Associate Chief of Staff for Community Care and Staff Physician		Position Description: ACOS for Community Care, Chief of Staff Office Staff Physician, Division of General Medicine, Department of Hospital and Specialty Medicine	
Start Date: 07/01/2013 End Date: Ongoing / No Known End Date		Additional Information:	
School of Medicine, Oregon Health and Science University	Employment	Self	-
Title: Associate Professor of Medicine		Position Description: Faculty appointment, not compensated	
Start Date: 07/01/2013 End Date: Ongoing / No Known End Date		Additional Information:	

Certification

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Other aspects of my background or present interests not addressed above that might be perceived as affecting my objectivity or independence

Disclosure Purpose: Annual Governance Disclosure 2021-2022 Employment Information: Currently Employed

Summary of Interests

Company or Organization

Entity	Type	Interest Held By	Value
Centers for Disease Control and Prevention	Grant / Contract	Self	\$960,000.00
<div>Recipient Name: Stanford University</div> <div>Grant / Contract Description: The goals are to conduct health and economic modeling to inform decision-making on HIV, HCV, STDs</div> <div>Grant / Contract Valuation Date: 04/26/2021</div> <div>Additional Information:</div> <div>Recipient Type: Institution</div> <div>Grant / Contract Purpose: Research</div> <div>Grant / Contract Amount: \$960,000.00</div> <div>Contract Start Date: 09/30/2019</div> <div>Contract End Date:</div>			
NIH	Grant / Contract	Self	\$4,000,000.00
<div>Recipient Name: Stanford University</div> <div>Grant / Contract Description: Grant to study opioid use, HIV, HCV.</div> <div>Grant / Contract Amount: \$4,000,000.00</div> <div>Contract Start Date: 11/01/2019</div> <div>Contract End Date:</div> <div>Additional Information:</div> <div>Recipient Type: Institution</div> <div>Grant / Contract Purpose: Research</div> <div>Grant / Contract Valuation Date: 04/26/2021</div> <div>Additional Information:</div>			
NIH	Grant / Contract	Self	\$1,000,000.00
<div>Recipient Name: Stanford University</div> <div>Grant / Contract Description: Grant to study implicit bias in diagnostic decision making</div> <div>Grant / Contract Amount: \$1,000,000.00</div> <div>Contract Start Date: 01/01/2020</div> <div>Contract End Date:</div> <div>Additional Information: Co-investigator on NIH grant, i don't know full amount, I get salary support</div> <div>Recipient Type: Institution</div> <div>Grant / Contract Purpose: Research</div> <div>Grant / Contract Valuation Date: 04/26/2021</div> <div>Additional Information:</div>			
School of Medicine, Stanford University	Employment Current Employment	Self	-
<div>Title: Professor</div> <div>Start Date: 07/01/1991</div> <div>End Date:</div> <div>Position Description: Professor</div> <div>Additional Information:</div>			
U.S. Department of Veterans Affairs	Grant / Contract	Self	\$321,000.00
<div>Recipient Name: VA Palo Alto Health Care System</div> <div>Grant / Contract Description: Grant to study the cost effectiveness of treatment for opioid use disorder</div> <div>Grant / Contract Valuation Date: 04/26/2021</div> <div>Additional Information:</div> <div>Recipient Type: Institution</div> <div>Grant / Contract Purpose: Research</div> <div>Grant / Contract Amount: \$321,000.00</div> <div>Contract Start Date: 04/01/2018</div> <div>Contract End Date: 12/31/2021</div>			

Intellectual Property

Type	Is Licensed	Interest Held By	Value
Other Intellectual Property - USPSTF	-	Self	-
<div>Description: USPSTF</div> <div>Yearly Income:</div> <div>Income Source: NONE</div> <div>Additional Information: Guideline development</div>			

Certification

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Other aspects of my background or present interests not addressed above that might be perceived as affecting my objectivity or independence

Disclosure Purpose: Annual Governance Disclosure 2022-23 Employment Information: Currently Employed

Summary of Interests

Company or Organization

Entity	Type	Interest Held By	Value
Division of Cancer Epidemiology and Genetics, National Cancer Institute	Grant / Contract	Self	\$4,000,000.00
Recipient Name: UCSF Grant / Contract Description: P01: The future of breast cancer screening in community practice: Advanced technologies performance, Grant / Contract Valuation Date: 05/22/2019 Additional Information: Co-investigator		Recipient Type: Institution Grant / Contract Purpose: Research Grant / Contract Amount: \$4,000,000.00 Contract Start Date: 09/27/2011Contract End Date: 05/31/2022	
institute for clinical and economic review	Grant / Contract	Self	\$495,000.00
Recipient Name: UCSF Grant / Contract Description: Produce comparative effectiveness reviews in support of ICER Grant / Contract Amount: \$495,000.00 Contract Start Date: 01/01/2018Contract End Date: Ongoing / No Known End Date		Recipient Type: Institution Grant / Contract Purpose: Research Grant / Contract Valuation Date: 05/22/2019 Additional Information:	
National MS Society	Other	Self	-
Category: Other Compensation Type: Unpaid Additional Information:		Start Date: 01/01/2012End Date: Ongoing / No Known End Date Compensation:	
Patient-Centered Outcomes Research Institute	Grant / Contract	Self	\$10,000,000.00
Recipient Name: UCSF Grant / Contract Description: Enabling a Paradigm Shift: A Preference-Tolerant RCT of Personalized vs. Annual Screening for Breast Grant / Contract Valuation Date: 05/22/2019 Additional Information: Co-investigator		Recipient Type: Institution Grant / Contract Purpose: Research Grant / Contract Amount: \$10,000,000.00 Contract Start Date: 09/15/2015Contract End Date: Ongoing / No Known End Date	
Society of General Internal Medicine	Other	Self	-
Category: Other Compensation Type: Unpaid Additional Information:		Start Date: 01/01/2017End Date: Ongoing / No Known End Date Compensation:	
University of California San Francisco	Employment Current Employment	Self	-
Title: Professor of Medicine Start Date: 07/01/1999End Date: Ongoing / No Known End Date		Position Description: Faculty Additional Information: Primary job	
University of California San Francisco	Other	Self	\$1,000.00
Category: Other Compensation Type: Cash		Start Date: 07/01/1999End Date: Ongoing / No Known End Date Compensation: Yes	
		Year	AmountType
		2019	\$1,000.00Estimated
Additional Information:			

Certification

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- Participation in advocacy or lobbying activities, including any roles or relationships with disease advocacy organizations

**American College of Physicians
Clinical Guidelines Committee
Disclosure of Interests: Supplemental Questions and Attestation**

Please enter your name: (You will need to sign on the second page)

Name: Jeffrey A. Tice, MD

Disclosures of Interests: Supplemental Questions

Please review the following topic areas and report any intellectual interests held by you or any household members that may be relevant to the topic areas.

- *Intellectual interests* are defined as academic ideas or activities or specific viewpoints and relate to such issues as academic advancement, clinical revenue streams, or community standing. Examples of types of intellectual interests include publications, unpaid participation on workgroups, panels, or committees, or membership in special interest groups.

Topic Areas: depression, diabetes, and colorectal cancer screening.

Within the past 3 years, have you or any household members published on any of the areas? Please include both peer-reviewed and non-peer-reviewed sources (e.g., newspaper op-ed; blog).

☐ I have publications to report (please list in space below).

☒ I have no publications to report.

Do you or any household members have any other intellectual interests related to any of the areas above?

☒ I have interests to report (please list in space below).

☐ I have no interest to report.

If you answered yes to either of the above questions, please provide additional details on the relevant interests (if not already captured in the Convey System) and list any relevant publications in the space below (or send a list of relevant publications as attachment).

I occasionally give CME talks on cancer screening, which often includes colorectal cancer



**American College of Physicians
Clinical Guidelines Committee
Disclosure of Interests: Supplemental Questions and Attestation**

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Jeffrey A. Tice, MD

Print Name

Jeffrey Tice

Signature



Digitally signed by Jeffrey Tice
Date: 2022.04.13 14:57:10 -07'00'

4/13/22

Date

Disclosure Purpose: Annual Governance Disclosure 2022-23 Employment Information: Currently Employed

Summary of Interests

Company or Organization

Entity	Type	Interest Held By	Value						
Academy Health	Consultant <div>Current Employment</div>	Self	-						
<div>Category: Consultant</div> <div>Compensation Type: Other</div> <div>Compensation: No</div> <div>Start Date: 03/30/2018</div> <div>End Date: Ongoing / No Known End Date</div> <div>Other Compensation: Scholarships to D & I, ARM and HdP-HPC conferences</div> <div>Additional Information: Developing Guidance with Learning Health System Stakeholders for Evaluation of COVID19 projects for national Foundations future funding of projects, conferen ce scholarships</div>									
AcademyHealth	Travel	Self	-						
<div>Location(s): Seattle to DC</div> <div>Travel Start Date: 02/06/2018</div> <div>Travel End Date: 02/24/2018</div> <div>Estimated Value: \$5,000.00</div> <div>Valuation Date: 12/23/2021</div> <div>Purpose: Meetings & Conferences</div> <div>Additional Information: Attended Health Data Palooza, Annual Research Meeting and Project Paradigm co sponsored and 2xs listed as RWJ conferences and Meetings</div>									
Acumen LLC	Travel	Self	\$380.00						
<div>Location(s): Seattle to DC</div> <div>Travel Start Date: 02/05/2020</div> <div>Travel End Date: 02/08/2020</div> <div>Estimated Value: \$380.00</div> <div>Valuation Date: 01/23/2020</div> <div>Purpose: PCMP CMS Measures</div> <div>Additional Information: Physician Cost Measure Patient Relationship Code TEP Patient Panel member</div>									
AHRQ	Consultant	Self	\$15,000.00						
<div>Category: Consultant</div> <div>Compensation Type: Cash</div> <div>Start Date: 04/05/2020</div> <div>End Date: 10/31/2021</div> <div>Compensation: Yes</div> <table><tr><th>Year</th><th>Amount</th><th>Type</th></tr><tr><td>2021</td><td>\$15,000.00</td><td>Actual</td></tr></table> <div>Additional Information: Conselera LLC contracted financial partner paid https://digital.ahrq.gov/acts ACTS AHRQ evidence based care transforming supports stakeholder</div>				Year	Amount	Type	2021	\$15,000.00	Actual
Year	Amount	Type							
2021	\$15,000.00	Actual							
BlackResearchers	Other	Self	\$66.00						
<div>Category: Other</div> <div>Compensation Type: Cash</div> <div>Start Date: 04/11/2022</div> <div>End Date: 04/11/2022</div> <div>Compensation: Yes</div> <table><tr><th>Year</th><th>Amount</th><th>Type</th></tr><tr><td>2022</td><td>\$66.00</td><td>Actual</td></tr></table> <div>Additional Information: Three of us authors presented our co developed RESPECT framework to the ABR monthly meeting</div>				Year	Amount	Type	2022	\$66.00	Actual
Year	Amount	Type							
2022	\$66.00	Actual							
Boston Medical Center	Other	Self	-						
<div>Category: Other</div> <div>Compensation Type: Cash</div> <div>Start Date: 09/18/2018</div> <div>End Date: 12/19/2019</div> <div>Compensation: Yes</div> <div>Additional Information: \$500 stipend Open Notes BIDMC presenting PFCC conference and \$750 total for Patient Advisory Position stipends</div>									
Camden Coalition	Consultant	Self	\$150.00						
<div>Category: Consultant</div> <div>Compensation Type: Cash</div> <div>Start Date: 08/10/2021</div> <div>End Date: 08/31/2021</div> <div>Compensation: Yes</div> <table><tr><th>Year</th><th>Amount</th><th>Type</th></tr><tr><td>2021</td><td>\$150.00</td><td>Estimated</td></tr></table> <div>Additional Information: Presenyed with CHCS on a 8 31 2021 national webinar on Complex Care and Social Needs PROM Measurement</div>				Year	Amount	Type	2021	\$150.00	Estimated
Year	Amount	Type							
2021	\$150.00	Estimated							
Camden Coalition	Other <div>Current Employment</div>	Self	\$6,300.00						
<div>Category: Other</div> <div>Compensation Type: Cash</div> <div>Start Date: 01/01/2018</div> <div>End Date: Ongoing / No Known End Date</div> <div>Compensation: Yes</div>									

	<table> <tr> <th>Year</th><th>Amount</th><th>Type</th></tr> <tr> <td>2021</td><td>\$4,000.00</td><td>Estimated</td></tr> <tr> <td>2020</td><td>\$1,800.00</td><td>Estimated</td></tr> <tr> <td>2019</td><td>\$500.00</td><td>Actual</td></tr> </table>	Year	Amount	Type	2021	\$4,000.00	Estimated	2020	\$1,800.00	Estimated	2019	\$500.00	Actual				
Year	Amount	Type															
2021	\$4,000.00	Estimated															
2020	\$1,800.00	Estimated															
2019	\$500.00	Actual															
Additional Information: Consumer Scholar work / Amplify Speakers Bureau/ Measurement Presentation/ Core Competencies/ and Travel for Putting Care at the Center conference																	
Cochrane Consumers	Consultant Current Employment	Self -															
Category: Consultant Compensation Type: Unpaid, Cash Additional Information: Reviewing and prioritize guidance materials for consumer involvement in reviews for crisis management and recommendations																	
	Start Date: 02/01/2018 Compensation: No	End Date:															
COKA BioMedical Knowledge	Other Current Employment	Self -															
Category: Other Compensation Type: Unpaid Additional Information: I have authored standardized terms to advance interoperability for evidence based medicine COKA expert working group member, SKAF research member																	
	Start Date: 03/01/2021 Compensation: No	End Date:															
Conselara	Consultant	Self \$15,000.00															
Category: Consultant Compensation Type: Cash																	
	Start Date: 10/01/2021 Compensation: Yes	End Date: 10/31/2021															
	<table> <tr> <th>Year</th><th>Amount</th><th>Type</th></tr> <tr> <td>2021</td><td>\$15,000.00</td><td>Actual</td></tr> </table>	Year	Amount	Type	2021	\$15,000.00	Actual										
Year	Amount	Type															
2021	\$15,000.00	Actual															
Additional Information: I developed a Patient, Family and Caregiver page that is housed on the (to be endorsed) Transformative Digital Evidence Generation Knowledge Portal for AHRQ Agency For Health Research and Quality endorsement. I initiated a small group of PFC experts in evidence generation to meet quarterly https://covid-acts.ahrq.gov/display/PUB/Patient%2C+Family+and+Caregiver+Engagement																	
FDA	Expert Witness Current Employment	Self -															
Category: Expert Witness Compensation Type: Unpaid Additional Information: I will be providing Patient expert insights on uUTI and antibiotic stewardship on the day long FDA public workshop																	
	Start Date: 06/03/2022 Compensation: No	End Date: 06/03/2022															
Hassanah Consulting	Consultant Current Employment	Self \$23,800.00															
Category: Consultant Compensation Type: Cash																	
	Start Date: 01/01/2018 Compensation: Yes	End Date: Ongoing / No Known End Date															
	<table> <tr> <th>Year</th><th>Amount</th><th>Type</th></tr> <tr> <td>2021</td><td>\$9,000.00</td><td>Estimated</td></tr> <tr> <td>2020</td><td>\$5,800.00</td><td>Estimated</td></tr> <tr> <td>2019</td><td>\$9,000.00</td><td>Actual</td></tr> </table>	Year	Amount	Type	2021	\$9,000.00	Estimated	2020	\$5,800.00	Estimated	2019	\$9,000.00	Actual				
Year	Amount	Type															
2021	\$9,000.00	Estimated															
2020	\$5,800.00	Estimated															
2019	\$9,000.00	Actual															
Additional Information: This is total income, and includes compensation such as stipends listed on CVM, Muslim Resource Guides, Islamic Civic Engagement, general consulting 1099s https://janicetufte.com/cvm-patient-partner																	
Healthcare for the Homeless Seattle King County	Consultant	Self \$500.00															
Category: Consultant Compensation Type: Cash																	
	Start Date: 07/01/2021 Compensation: Yes	End Date: 12/01/2021															
	<table> <tr> <th>Year</th><th>Amount</th><th>Type</th></tr> <tr> <td>2021</td><td>\$500.00</td><td>Actual</td></tr> </table>	Year	Amount	Type	2021	\$500.00	Actual										
Year	Amount	Type															
2021	\$500.00	Actual															
Additional Information: Honorarium with NHCHN for National Institute for Medical Respite Care NIMRC conference and research outcomes final product																	
Healthcare for the Homeless Seattle King County	Other Current Employment	Self \$6,675.00															
Category: Other Compensation Type: Cash																	
	Start Date: 01/01/2018 Compensation: Yes	End Date:															
	<table> <tr> <th>Year</th><th>Amount</th><th>Type</th></tr> <tr> <td>2022</td><td>\$130.00</td><td>Estimated</td></tr> <tr> <td>2021</td><td>\$1,845.00</td><td>Actual</td></tr> <tr> <td>2020</td><td>\$2,500.00</td><td>Estimated</td></tr> <tr> <td>2019</td><td>\$2,200.00</td><td>Estimated</td></tr> </table>	Year	Amount	Type	2022	\$130.00	Estimated	2021	\$1,845.00	Actual	2020	\$2,500.00	Estimated	2019	\$2,200.00	Estimated	
Year	Amount	Type															
2022	\$130.00	Estimated															
2021	\$1,845.00	Actual															
2020	\$2,500.00	Estimated															
2019	\$2,200.00	Estimated															

Additional Information: Consumer advisor

Humana Foundation	Travel	Self	\$500.00													
Location(s): Seattle to DC Estimated Value: \$500.00 Purpose: Food Insecurity Brochure development	Travel Start Date: 08/01/2019 Valuation Date: 01/23/2020 Travel End Date: 08/03/2019 Additional Information: Patient Partner informing on food insecurity for a brochure to accompany measures															
IHI	Travel	Self	\$1,050.00													
Location(s): Seattle-Florida Estimated Value: \$1,050.00 Purpose: IHI Forum Scholarship as a Patient Advisor	Travel Start Date: 12/05/2019 Valuation Date: 01/23/2020 Travel End Date: 12/09/2019 Additional Information: IHI Forum Scholarship as a Patient Advisor and virtual 2020 and 2021 also															
Infectious Disease Society of America	Consultant	Current Employment	Self	\$300.00												
Category: Consultant Compensation Type: Unpaid	Start Date: 06/24/2020 End Date: Ongoing / No Known End Date Compensation: Yes															
<table><tr><th>Year</th><th>Amount</th><th>Type</th></tr><tr><td>2022</td><td>\$300.00</td><td>Estimated</td></tr><tr><td>2021</td><td>\$0.00</td><td>Actual</td></tr><tr><td>2020</td><td>\$0.00</td><td>Actual</td></tr></table>					Year	Amount	Type	2022	\$300.00	Estimated	2021	\$0.00	Actual	2020	\$0.00	Actual
Year	Amount	Type														
2022	\$300.00	Estimated														
2021	\$0.00	Actual														
2020	\$0.00	Actual														
Additional Information: 2022-2024 IDSA/ AIR uUTI / Antibiotic Stewardship Measurement development 2020-2021 The Guideline TEP I provided public insights partially through the process																
IPRO- QIN/ QIO	Consultant	Current Employment	Self	\$10,000.00												
Category: Consultant Compensation Type: Cash	Start Date: 03/22/2022 End Date: Ongoing / No Known End Date Compensation: Yes															
<table><tr><th>Year</th><th>Amount</th><th>Type</th></tr><tr><td>2022</td><td>\$10,000.00</td><td>Estimated</td></tr></table>					Year	Amount	Type	2022	\$10,000.00	Estimated						
Year	Amount	Type														
2022	\$10,000.00	Estimated														
Additional Information: Developing national public facing materials addressing Opioid OD and Deaths, and presenting SDoH and disparities information in the weekly meetings																
ITHS University of Washington	Other	Self	-													
Category: Other Compensation Type: Unpaid Additional Information: COVID 19 Research Prioritization Public Reviewer A Professional committee https://www.iths.org/iths-covid-19-research-resources/covid-19-research-portal/	Start Date: 03/20/2020 End Date: 12/10/2020 Compensation: No															
Ludwig Boltzmann Institut für Experimentelle und Klinische Traumatologie	Consultant	Current Employment	Self	-												
Category: Consultant Compensation Type: Unpaid Additional Information: projectsInput provided to the Instituite for research prioritization and other social research project	Start Date: 06/01/2020 End Date: 06/01/2023 Compensation: No															
Mathematica	Other	Self	-													
Category: Other Compensation Type: Cash Additional Information:	Start Date: 01/01/2016 End Date: 12/31/2018 Compensation: Yes															
McMaster University	Other	Current Employment	Self	\$1,500.00												
Category: Other Compensation Type: Cash	Start Date: 02/01/2021 End Date: Compensation: Yes															
<table><tr><th>Year</th><th>Amount</th><th>Type</th></tr><tr><td>2021</td><td>\$500.00</td><td>Estimated</td></tr><tr><td>2020</td><td>\$1,000.00</td><td>Estimated</td></tr></table>					Year	Amount	Type	2021	\$500.00	Estimated	2020	\$1,000.00	Estimated			
Year	Amount	Type														
2021	\$500.00	Estimated														
2020	\$1,000.00	Estimated														
Additional Information: 2022 CIHR public facing recommendation materials 2021-2024 ? MuSE Equity work group - Guidelines protocol and 3 papers to date- importance observationsl trials 2021Honorarium for COVID END Citizen work, Equity Task Force meetings and COVID END Horizon panel participation																
McMaster University	Consultant	Current Employment	Self	\$100.00												
Category: Consultant Compensation Type: Unpaid, Cash	Start Date: 10/15/2020 End Date: 05/31/2022 Compensation: Yes															
<table><tr><th>Year</th><th>Amount</th><th>Type</th></tr><tr><td>2021</td><td>\$100.00</td><td>Estimated</td></tr></table>					Year	Amount	Type	2021	\$100.00	Estimated						
Year	Amount	Type														
2021	\$100.00	Estimated														

Additional Information: CIHR Rec Map plain language recommendations work

Michigan Public Health Institute	Consultant	Current Employment	Self	\$5,000.00
Category: Consultant	Start Date: 03/01/2022		End Date: 12/31/2023	
Compensation Type: Cash	Compensation: Yes			
	Year	Amount	Type	
	2022	\$5,000.00	Estimated	

Additional Information: Creating Authentic Tools for Engagement (CrATE) Convening PCORI Ambassadors to develop Disparities toolkits through multi disciplined stakeholder engagement - I am a Pt-Co Lead Advisor <https://www.pcori.org/research-results/2022/creating-authentic-tools-engagement-crate?msclkid=d7dd55e8bdab11ec87f4c23cf82bb85e>

Minnesota Evidence Practice Center	Other	Self	-
Category: Other Compensation Type: Unpaid Additional Information: CLPC TEP MN-EPC Public perspective Prostrate Cancer Systematic Review/ Protocol		Start Date: 01/01/2019 End Date: 09/09/2020 Compensation:	

National Institute on Aging	Other	Current Employment	Self	\$1,750.00
Category: Other		Start Date: 06/01/2019		
Compensation Type: Cash		End Date: 06/01/2023		
		Compensation: Yes		
		Year	Amount	Type
		2022	\$500.00	Actual
		2021	\$750.00	Actual
		2020	\$250.00	Actual
		2019	\$250.00	Actual

Additional Information: HCSRN / OAIC research Aging Initiative Advisor -APCAC

National Quality Forum			Other	Current Employment	Self	\$3,000.00
Category: Other			Start Date: 08/30/2020		End Date: 07/01/2023	
Compensation Type: Other			Other Compensation: Stipend			
Compensation: Yes			Additional Information: MAP CC reviewing materials, providing public/patient input / advising			
Year	Amount	Type				
2022	\$2,000.00	Actual				
2021	\$1,000.00	Actual				

National Quality Forum	Consultant	Current Employment	Self	\$2,000.00
Category: Consultant		Start Date: 01/01/2021		
Compensation Type: Cash		End Date: 12/31/2022		
		Compensation: Yes		
		Year	Amount	Type
		2022	\$1,000.00	Estimated
		2021	\$1,000.00	Actual

Additional Information: Risk Adjustment committee honorarium NQF Risk Adjustment Guidance Committee https://www.qualityforum.org/Risk_Adjustment_Guidance.aspx

National Quality Forum	Travel	Self	-
Location(s): Seattle to DC to Seattle Estimated Value: \$1,000.00 Purpose: LTSS work group and Core Set MAP		Travel Start Date: 01/01/2017 Travel End Date: 12/31/2018 Valuation Date: 01/29/2020 Additional Information: See CVM	

Patient CenteredResearch Institute	Travel	Self	\$3,000.00
Location(s): Seattle to DC Estimated Value: \$3,000.00 Purpose: Conference Attendance		Travel Start Date: 01/01/2017 Travel End Date: 09/20/2019 Valuation Date: 01/23/2020 Additional Information: PCORI paid for multiple conference scholarships and prioritization projects	

Robert Wood Johnson Foundation	Consultant	Self	\$1,500.00
Category: Consultant	Start Date: 02/01/2021		End Date: 09/30/2021
Compensation Type: Cash	Compensation: Yes		
	Year	Amount	Type
	2021	\$1,500.00	Actual

Additional Information: Convening at the Center project with Dana Lewis and John Harlow <https://diyps.org/2020/03/12/convening-the-center/>

Robert Wood Johnson Foundation	Travel	Self	\$1,000.00															
Location(s): Seattle to DC Estimated Value: \$1,000.00 Purpose: Paradigm Project HSR																		
Travel Start Date: 06/14/2019 Valuation Date: 01/23/2020 Travel End Date: 06/28/2021 Additional Information: Travel only, no stipends, Health Services Research project (also listed under Academy Health)																		
Society for Participatory Medicine	Travel	Self	\$650.00															
Location(s): Seattle to Boston Estimated Value: \$650.00 Purpose: Panel Organizer and presenter SDoH																		
Travel Start Date: 09/07/2019 Valuation Date: 01/23/2020 Travel End Date: 09/10/2019 Additional Information: Travel to Boston as a SPM Planning Committee member and panel presenter																		
University of Washington Instituite for Translational Health Sciences	Consultant	Self	-															
Category: Consultant Compensation Type: Unpaid Additional Information: A professional review committee for COVID19 studies for possible work done at University of Washington																		
Start Date: 03/22/2020 End Date: 12/01/2020 Compensation:																		
University of Washington SORCE	Other Current Employment	Self	\$3,325.00															
Category: Other Compensation Type: Cash																		
Start Date: 01/01/2017 End Date: Ongoing / No Known End Date Compensation: Yes																		
<table><tr><th>Year</th><th>Amount</th><th>Type</th></tr><tr><td>2022</td><td>\$600.00</td><td>Estimated</td></tr><tr><td>2021</td><td>\$600.00</td><td>Estimated</td></tr><tr><td>2020</td><td>\$900.00</td><td>Estimated</td></tr><tr><td>2019</td><td>\$1,225.00</td><td>Actual</td></tr></table>				Year	Amount	Type	2022	\$600.00	Estimated	2021	\$600.00	Estimated	2020	\$900.00	Estimated	2019	\$1,225.00	Actual
Year	Amount	Type																
2022	\$600.00	Estimated																
2021	\$600.00	Estimated																
2020	\$900.00	Estimated																
2019	\$1,225.00	Actual																
Additional Information: Patient Advisor on the COSMID project started 2019 on going and Patient Advisor on CERTAIN Patient Advisory Group https://www.becertain.org/projects/diverticulitis-care/cosmid-study (2018 and 2019 has general advising \$\$ included)																		
University of Washington SORCE	Consultant	Self	-															
Category: Consultant Compensation Type: Cash Additional Information: COSMID Study Patient Advisory Co Chair Executive and Cliuiical Committee																		
Start Date: 01/01/2021 End Date: 12/31/2021 Compensation:																		

Intellectual Property

Type	Is Licensed	Interest Held By	Value								
Other Intellectual Property - Building out Core Competencies for Complex Care ...	-	Self	\$500.00								
Description: Building out Core Competencies for Complex Care meetings and build out of documents Income: Yes											
Income Source: Camden Coalition Travel Additional Information: https://www.nationalcomplex.care/our-work/blueprint-for-complex-care/core-competencies-working-group/ A member											
<table> <tr> <th>Amount</th><th>Type</th><th>Year</th><th>Payment Receipt</th></tr> <tr> <td>\$500.00</td><td>Estimated</td><td>2020</td><td>Direct Payment</td></tr> </table>	Amount	Type	Year	Payment Receipt	\$500.00	Estimated	2020	Direct Payment			
Amount	Type	Year	Payment Receipt								
\$500.00	Estimated	2020	Direct Payment								
Other Intellectual Property - MuSE Systematic Review Paper	-	Self	\$500.00								
Description: MuSE Systematic Review Paper Income: Yes											
Income Source: mcMaster Additional Information: https://systematicreviewsjournal.biomedcentral.com/articles/10.1186/s13643-020-1272-5											
<table> <tr> <th>Amount</th><th>Type</th><th>Year</th><th>Payment Receipt</th></tr> <tr> <td>\$500.00</td><td>Estimated</td><td>2021</td><td>Payment through other organization</td></tr> </table>	Amount	Type	Year	Payment Receipt	\$500.00	Estimated	2021	Payment through other organization			
Amount	Type	Year	Payment Receipt								
\$500.00	Estimated	2021	Payment through other organization								
Other Intellectual Property - Peer Reviewer of Cochrane Protocol Musculoskelet ...	-	Self	-								
Description: Peer Reviewer of Cochrane Protocol Musculoskeletal Group for Systematic Review Income: No											
Income Source: none Additional Information: Musculo skeletal protocol review											
Other Intellectual Property - SEVCO Standardized evidence / scientific terms f ...	-	Self	-								
Description: SEVCO Standardized evidence / scientific terms for interoperability Income: No											
Income Source: 0 Additional Information: Scientific Evidence Code System Expert Working Group to vote on the terms and definitions in this code system https://fevir.net/resources/Project/27845											
Other Intellectual Property - MuSE Systematic Review Protocol and Reviews	-	Self	-								
Description: MuSE Systematic Review Protocol and Reviews Income:											
Income Source: 0 Additional Information: Under Development											
Other Intellectual Property - Making Science Computable: Advancing Evidence-Ba ...	-	Self	-								

Description: Making Science Computable: Advancing Evidence-Based Health Care with Standard Terminologie
Income: No

Income Source: 0

Additional Information: ISEBHC Making Science Computable: Advancing Evidence-Based Health Care with Standard Terminologies article found here [https://mailchi.mp/3a6a1fbb8958/30th-isebhc-newsletter-dec-2021-5946756?](https://mailchi.mp/3a6a1fbb8958/30th-isebhc-newsletter-dec-2021-5946756?fbclid=IwAR2JUWBnEmnL8AHca9iLsSoZiFnun0uoYKta1WQrBmaXrgjVV0vdrpBRRTQ)
fbclid=IwAR2JUWBnEmnL8AHca9iLsSoZiFnun0uoYKta1WQrBmaXrgjVV0vdrpBRRTQ

Certification

By submitting this form, I attest that I have disclosed all interests related to healthcare from the last 3 years on behalf of myself and any household members, including consideration of interests in the following areas:

- Research and consulting support (e.g., grants, contracts, sponsorships, honoraria, or any other fees related to role as consultant, speaker's bureau participation, or expert as part of regulatory, legislative, or judicial process)
- Investments and proprietary interests excluding broadly diversified investments such as mutual or pension funds (e.g., stocks, bonds, stock options, commercial business interests, patents, trademarks, copyrights)
- Membership on boards, workgroups, panels, or committees through other medical societies or healthcare organizations
- Participation in advocacy or lobbying activities, including any roles or relationships with disease advocacy organizations

Other aspects of my background or present interests not addressed above that might be perceived as affecting my objectivity or independence

**American College of Physicians
Clinical Guidelines Committee
Disclosure of Interests: Supplemental Questions and Attestation**

Please enter your name: (You will need to sign on the second page)

Name: Janice Tufte

Disclosures of Interests: Supplemental Questions

Please review the following topic areas and report any intellectual interests held by you or any household members that may be relevant to the topic areas.

- *Intellectual interests* are defined as academic ideas or activities or specific viewpoints and relate to such issues as academic advancement, clinical revenue streams, or community standing. Examples of types of intellectual interests include publications, unpaid participation on workgroups, panels, or committees, or membership in special interest groups.

Topic Areas: depression, diabetes, and colorectal cancer screening.

Within the past 3 years, have you or any household members published on any of the areas? Please include both peer-reviewed and non-peer-reviewed sources (e.g., newspaper op-ed; blog).

☐

I have publications to report (please list in space below).

☒

I have no publications to report.

Do you or any household members have any other intellectual interests related to any of the areas above?

☐

I have interests to report (please list in space below).

☒

I have no interest to report.

If you answered yes to either of the above questions, please provide additional details on the relevant interests (if not already captured in the Convey System) and list any relevant publications in the space below (or send a list of relevant publications as attachment).

**American College of Physicians
Clinical Guidelines Committee
Disclosure of Interests: Supplemental Questions and Attestation**

Acknowledgements and Attestations

By signing this form,

- I acknowledge that in order to maintain transparency, all participants' disclosure of interests will be publicly available on ACP's website and a link to the disclosures will be included in each published work.
- I attest that I have reviewed the attached Convey disclosures report and that my disclosures are up to date.
- I attest that I have disclosed all healthcare-related financial and intellectual interests for myself and any household members from the last 3 years and I will promptly disclose any changes. These include but are not limited to: research and consulting roles; investments and proprietary interests, and intellectual interests such as participation in workgroups, panels, or committees through other medical societies or healthcare organizations.

Janice Tufte

Print Name



Signature

4 21 22

Date

Disclosure Purpose: Annual Governance Disclosure 2022-23, Planning Committee, Faculty, Annual Meeting

Employment Information: Currently Employed

Summary of Interests

Company or Organization

Entity	Type	Interest Held By	Value												
Heritage Medical Associates	Employment <div>Current Employment</div>	Self	-												
<div><div>Title: Physician</div><div>Start Date: 01/02/2005</div><div>End Date: Ongoing / No Known End Date</div></div> <div><div>Position Description:</div><div>Additional Information:</div></div>															
Overbrook School	Employment	Spouse/Partner	-												
<div><div>Title: Registered Nurse</div><div>Start Date: 08/15/2013</div><div>End Date:</div></div> <div><div>Position Description:</div><div>Additional Information:</div></div>															
State Volunteer Mutual Insurance Company	End Point Review Committee	Self	\$12,612.50												
<div>Category: End Point Review Committee</div> <div>Compensation Type: Cash</div>		<div>Start Date: 01/01/2018</div> <div>End Date: Ongoing / No Known End Date</div>													
		<div>Compensation: Yes</div> <table><tr><th>Year</th><th>Amount</th><th>Type</th></tr><tr><td>2021</td><td>\$3,806.25</td><td>Actual</td></tr><tr><td>2020</td><td>\$4,118.75</td><td>Actual</td></tr><tr><td>2019</td><td>\$4,687.50</td><td>Actual</td></tr></table>		Year	Amount	Type	2021	\$3,806.25	Actual	2020	\$4,118.75	Actual	2019	\$4,687.50	Actual
Year	Amount	Type													
2021	\$3,806.25	Actual													
2020	\$4,118.75	Actual													
2019	\$4,687.50	Actual													
<div>Additional Information: Serve as a member of the Underwriting Committee for SVMIC. Compensated for time spent reviewing applications.</div>															

Certification

By submitting this form, I attest that I have disclosed all interests related to healthcare from the last 3 years on behalf of myself and any household members, including consideration of interests in the following areas:

- Research and consulting support (e.g., grants, contracts, sponsorships, honoraria, or any other fees related to role as consultant, speaker’s bureau participation, or expert as part of regulatory, legislative, or judicial process)
- Investments and proprietary interests excluding broadly diversified investments such as mutual or pension funds (e.g., stocks, bonds, stock options, commercial business interests, patents, trademarks, copyrights)
- Membership on boards, workgroups, panels, or committees through other medical societies or healthcare organizations
- Participation in advocacy or lobbying activities, including any roles or relationships with disease advocacy organizations

Other aspects of my background or present interests not addressed above that might be perceived as affecting my objectivity or independence

**American College of Physicians
Department of Clinical Policy
Disclosure of Interests: Supplemental Questions and Attestation**

**Disclosures of Interests: Supplemental Questions for Clinical Guidelines Committee and Scientific
Medical Policy Committee**

Please review the following topic areas and report any intellectual interests held by you or any household members that may be relevant to the topic areas.

- *Intellectual interests* are defined as academic ideas or activities or specific viewpoints and relate to such issues as academic advancement, clinical revenue streams, or community standing. Examples of types of intellectual interests include publications, unpaid participation on workgroups, panels, or committees, or membership in special interest groups.

Topic Areas: depression, diabetes, colorectal cancer screening, COVID-19, hematuria, and cannabinoids

Within the past 3 years, have you or any household members published on any of the above areas? Please include both peer-reviewed and non-peer-reviewed sources (e.g., newspaper op-ed; blog).

☒ I have publications to report (please list in space below).

☐ I have no publications to report.

Do you or any household members have any other intellectual interests related to any of the above areas?

☐ I have interests to report (please list in space below).

☒ I have no interest to report.

If you answered yes to either of the above questions, please provide additional details on the relevant interests (if not already captured in the Convey System) and list any relevant publications in the space below (or send a list of relevant publications as attachment).

Ideas & Opinion article - COVID: <https://www.acpjournals.org/doi/10.7326/M20-1851>

American College of Physicians
Department of Clinical Policy
Disclosure of Interests: Supplemental Questions and Attestation

Disclosures of Interests: Supplemental Questions for Performance Measurement Committee

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Topic Areas: osteoporosis

Please review the list of measures in the attached Word/Excel document and other topic areas listed above. The PMC will review these measures and other topics during the upcoming meeting.

Within the last 3 years, have you or any household members contributed towards the development, testing and/or maintenance of one of these measures or a competing measure (measure on the same topic)?

- | | |
|---|--|
| <input type="checkbox"/> Yes (please provide additional details below). | <input type="checkbox"/> n/a (no clinical topics or specific measures under discussion on upcoming agenda) |
| <input checked="" type="checkbox"/> No | |

Within the last 3 years, have you or any household members published on any of the clinical topic areas covered by these measures or other topics areas? Please include both peer-reviewed and non-peer-reviewed sources (e.g., newspaper op-ed; blog)

- | | |
|---|--|
| <input type="checkbox"/> Yes (please provide additional details below). | <input type="checkbox"/> n/a (no clinical topics or specific measures under discussion on upcoming agenda) |
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If you answered yes to either question above, please list any relevant measures publications in space below (or send list of relevant measures/publications as attachment). Otherwise, you may leave blank.

**American College of Physicians
Department of Clinical Policy
Disclosure of Interests: Supplemental Questions and Attestation**

Acknowledgements and Attestations

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Ryan D. Mire

Print Name



Signature

4/20/22

Date

Disclosure Purpose: Annual Meeting Faculty, Annual Governance
Disclosure 2021-2022

Employment Information: Currently Employed

Summary of Interests

Company or Organization

Entity	Type	Interest Held By	Value
American College of Physicians	Fiduciary Officer	Self	-
<div><div>Official Title: Chair-elect Board of Regents</div><div>Compensation Type:</div><div>Annual Compensation:</div><div>Additional Information:</div></div> <div>Position Description: Chair-elect Board of Regents</div> <div>Start Date: 05/02/2021</div> <div>End Date: 05/01/2022</div>			
Texas Medical Association	Fiduciary Officer	Self	-
<div><div>Official Title: Trustee</div><div>Compensation Type: Other</div><div>Start Date: 05/01/2017</div><div>Annual Compensation:</div><div>Additional Information:</div></div> <div>Position Description: I am elected member of the Texas Medical Association Board of Trustees.</div> <div>Other Compensation: none</div> <div>End Date: 05/01/2022</div>			
Texas Medical Home Initiative	Employment Current Employment	Self	-
<div><div>Title: Executive Director</div><div>Start Date: 08/01/2008</div><div>End Date:</div></div> <div>Position Description: I lead the activities of the Texas Medical Home Initiative, a non-profit whose mission is to ensure that every Texan has a medical home.</div> <div>Additional Information:</div>			

Certification

By submitting this form, I attest that I have disclosed all interests related to healthcare from the last 3 years on behalf of myself and any household members, including consideration of interests in the following areas:

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Other aspects of my background or present interests not addressed above that might be perceived as affecting my objectivity or independence

Disclosure Purpose: Annual Staff Disclosure 2021 - 2022 Employment Information: Currently Employed

Summary of Interests

Company or Organization

Entity	Type	Interest Held By	Value
American College of Physicians	Employment Current Employment	Self	-
Title: Director, Public Relations Start Date: 02/06/2006 End Date:		Position Description: Additional Information:	

Certification

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**American College of Physicians
Department of Clinical Policy
Disclosure of Interests: Supplemental Questions and Attestation**

**Disclosures of Interests: Supplemental Questions for Clinical Guidelines Committee and Scientific
Medical Policy Committee**

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Topic Areas: depression, diabetes, colorectal cancer screening, COVID-19, hematuria, and cannabinoids

Within the past 3 years, have you or any household members published on any of the above areas? Please include both peer-reviewed and non-peer-reviewed sources (e.g., newspaper op-ed; blog).

☐ I have publications to report (please list in space below).

☒ I have no publications to report.

Do you or any household members have any other intellectual interests related to any of the above areas?

☐ I have interests to report (please list in space below).

☒ I have no interest to report.

If you answered yes to either of the above questions, please provide additional details on the relevant interests (if not already captured in the Convey System) and list any relevant publications in the space below (or send a list of relevant publications as attachment).

**American College of Physicians
Department of Clinical Policy
Disclosure of Interests: Supplemental Questions and Attestation**

Disclosures of Interests: Supplemental Questions for Performance Measurement Committee

Please review the following measures or topic areas and report any intellectual interests held by you or any household members that may be relevant to the measures or topic areas under discussion.

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Topic Areas: osteoporosis

Please review the list of measures in the attached Word/Excel document and other topic areas listed above. The PMC will review these measures and other topics during the upcoming meeting.

Within the last 3 years, have you or any household members contributed towards the development, testing and/or maintenance of one of these measures or a competing measure (measure on the same topic)?

- | | |
|---|--|
| <input type="checkbox"/> Yes (please provide additional details below). | <input type="checkbox"/> n/a (no clinical topics or specific measures under discussion on upcoming agenda) |
| <input checked="" type="checkbox"/> No | |

Within the last 3 years, have you or any household members published on any of the clinical topic areas covered by these measures or other topics areas? Please include both peer-reviewed and non-peer-reviewed sources (e.g., newspaper op-ed; blog)

- | | |
|---|--|
| <input type="checkbox"/> Yes (please provide additional details below). | <input type="checkbox"/> n/a (no clinical topics or specific measures under discussion on upcoming agenda) |
| <input checked="" type="checkbox"/> No | |

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**American College of Physicians
Department of Clinical Policy
Disclosure of Interests: Supplemental Questions and Attestation**

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Laura Baldwin

Print Name

5/6/22

Signature

Date

Disclosure Purpose: Annual Staff Disclosure 2021 - 2022 Employment Information: Currently Employed

Summary of Interests

Company or Organization

Entity	Type	Interest Held By	Value
American College of Physicians	Employment Current Employment	Self	-
Title: Chief Operating Officer Start Date: 10/15/1997 End Date:		Position Description: Oversees operations of the organization Additional Information:	
Ewing Cole	Employment	Spouse/Partner	-
Title: Project Manager Start Date: 01/01/1998 End Date:		Position Description: Manages building/renovation of health care facilities Additional Information:	

Certification

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**American College of Physicians
Department of Clinical Policy
Disclosure of Interests: Supplemental Questions and Attestation**

**Disclosures of Interests: Supplemental Questions for Clinical Guidelines Committee and Scientific
Medical Policy Committee**

Please review the following topic areas and report any intellectual interests held by you or any household members that may be relevant to the topic areas.

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Topic Areas: depression, diabetes, colorectal cancer screening, COVID-19, hematuria, and cannabinoids

Within the past 3 years, have you or any household members published on any of the above areas? Please include both peer-reviewed and non-peer-reviewed sources (e.g., newspaper op-ed; blog).

☐ I have publications to report (please list in space below).

☒ I have no publications to report.

Do you or any household members have any other intellectual interests related to any of the above areas?

☐ I have interests to report (please list in space below).

☒ I have no interest to report.

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**American College of Physicians
Department of Clinical Policy
Disclosure of Interests: Supplemental Questions and Attestation**

Disclosures of Interests: Supplemental Questions for Performance Measurement Committee

Please review the following measures or topic areas and report any intellectual interests held by you or any household members that may be relevant to the measures or topic areas under discussion.

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Topic Areas: osteoporosis

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Within the last 3 years, have you or any household members contributed towards the development, testing and/or maintenance of one of these measures or a competing measure (measure on the same topic)?

- | | |
|---|--|
| <input type="checkbox"/> Yes (please provide additional details below). | <input type="checkbox"/> n/a (no clinical topics or specific measures under discussion on upcoming agenda) |
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Within the last 3 years, have you or any household members published on any of the clinical topic areas covered by these measures or other topics areas? Please include both peer-reviewed and non-peer-reviewed sources (e.g., newspaper op-ed; blog)

- | | |
|---|--|
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**American College of Physicians
Department of Clinical Policy
Disclosure of Interests: Supplemental Questions and Attestation**

Acknowledgements and Attestations

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Wayne H. Bylsma

Print Name

Wayne H. Bylsma Digitally signed by Wayne H. Bylsma
Date: 2022.04.22 09:39:26 -04'00'

Signature

04 22 2022

Date

Disclosure Purpose: Annual Staff Disclosure 2021 - 2022 Employment Information: Currently Employed

Summary of Interests

Company or Organization

Entity	Type	Interest Held By	Value
American College of Physicians	Employment Current Employment	Self	-
<div><div>Title: Associate, Performance Measurement Start Date: 04/04/2022</div><div>End Date: Ongoing / No Known End Date</div><div>Position Description: - Review measurement science work with the PMC Additional Information: Full-time exempt</div></div>			

Certification

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**American College of Physicians
Department of Clinical Policy
Disclosure of Interests: Supplemental Questions and Attestation**

**Disclosures of Interests: Supplemental Questions for Clinical Guidelines Committee and Scientific
Medical Policy Committee**

Please review the following topic areas and report any intellectual interests held by you or any household members that may be relevant to the topic areas.

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Topic Areas: depression, diabetes, colorectal cancer screening, COVID-19, hematuria, and cannabinoids

Within the past 3 years, have you or any household members published on any of the above areas? Please include both peer-reviewed and non-peer-reviewed sources (e.g., newspaper op-ed; blog).

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☒ I have no publications to report.

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☐ I have interests to report (please list in space below).

☒ I have no interest to report.

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**American College of Physicians
Department of Clinical Policy
Disclosure of Interests: Supplemental Questions and Attestation**

Disclosures of Interests: Supplemental Questions for Performance Measurement Committee

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Topic Areas: osteoporosis

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- | | |
|---|--|
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| <input checked="" type="checkbox"/> No | |

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- | | |
|---|--|
| <input type="checkbox"/> Yes (please provide additional details below). | <input type="checkbox"/> n/a (no clinical topics or specific measures under discussion on upcoming agenda) |
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Department of Clinical Policy
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Karen Campos

Print Name

Karen Campos, CHES

Digitally signed by Karen Campos, CHES
Date: 2022.04.20 12:45:17 -04'00'

4/22/2022

Signature

Date

Disclosure Purpose: CGC/PMC/SMPC, Entry

Summary of Interests

Company or Organization

Entity	Type	Interest Held By	Value
American College of Physicians	Employment	Self	-
Title: Manager, Clinical Policy Start Date: 08/26/2014 End Date:		Position Description: Additional Information:	
The Beasley Firm, LLC	Employment	Spouse/Partner	-
Title: Technology Specialist Start Date: 09/01/2009 End Date:		Position Description: Additional Information:	

Certification

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**American College of Physicians
Department of Clinical Policy
Disclosure of Interests: Supplemental Questions and Attestation**

**Disclosures of Interests: Supplemental Questions for Clinical Guidelines Committee and Scientific
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Topic Areas: depression, diabetes, colorectal cancer screening, COVID-19, hematuria, and cannabinoids

Within the past 3 years, have you or any household members published on any of the above areas? Please include both peer-reviewed and non-peer-reviewed sources (e.g., newspaper op-ed; blog).

☐ I have publications to report (please list in space below).

☒ I have no publications to report.

Do you or any household members have any other intellectual interests related to any of the above areas?

☐ I have interests to report (please list in space below).

☒ I have no interest to report.

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**American College of Physicians
Department of Clinical Policy
Disclosure of Interests: Supplemental Questions and Attestation**

Disclosures of Interests: Supplemental Questions for Performance Measurement Committee

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Topic Areas: osteoporosis

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Within the last 3 years, have you or any household members contributed towards the development, testing and/or maintenance of one of these measures or a competing measure (measure on the same topic)?

☐

Yes (please provide additional details below).

☐

n/a (no clinical topics or specific measures under discussion on upcoming agenda)

☒

No

Within the last 3 years, have you or any household members published on any of the clinical topic areas covered by these measures or other topics areas? Please include both peer-reviewed and non-peer-reviewed sources (e.g., newspaper op-ed; blog)

☐

Yes (please provide additional details below).

☐

n/a (no clinical topics or specific measures under discussion on upcoming agenda)

☒

No

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**American College of Physicians
Department of Clinical Policy
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Kate Carroll

Print Name

Kate Carroll

Digitally signed by Kate Carroll
Date: 2022.04.21 16:18:04 -04'00'

Signature

Date

Disclosure Purpose: Annual Staff Disclosure 2021 - 2022 Employment Information: Currently Employed

Summary of Interests

Company or Organization

Entity	Type	Interest Held By	Value
American College of Physicians	Consultant Current Employment	Self	-
Category: Consultant Compensation Type: Cash Additional Information: Start Date: 09/01/2018 Annual Compensation: End Date:			
Cochrane Response	Consultant	Self	-
Category: Consultant Compensation Type: Cash Additional Information: Start Date: 07/01/2018 Annual Compensation: End Date: 02/15/2019			
INSTIT.SALUD PUBLICAY LABORAL NAVARRA	Consultant	Self	-
Category: Consultant Compensation Type: Cash, Unpaid Additional Information: Start Date: 01/01/2018 Annual Compensation: End Date: 12/31/2019			
McMaster University MacGRADE Centre	Consultant	Self	-
Category: Consultant Compensation Type: Cash, Unpaid Additional Information: Start Date: 01/01/2018 Annual Compensation: End Date: 07/31/2019			

Certification

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Department of Clinical Policy
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Topic Areas: depression, diabetes, colorectal cancer screening, COVID-19, hematuria, and cannabinoids

Within the past 3 years, have you or any household members published on any of the above areas? Please include both peer-reviewed and non-peer-reviewed sources (e.g., newspaper op-ed; blog).

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**American College of Physicians
Department of Clinical Policy
Disclosure of Interests: Supplemental Questions and Attestation**

Disclosures of Interests: Supplemental Questions for Performance Measurement Committee

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Topic Areas: osteoporosis

Please review the list of measures in the attached Word/Excel document and other topic areas listed above. The PMC will review these measures and other topics during the upcoming meeting.

Within the last 3 years, have you or any household members contributed towards the development, testing and/or maintenance of one of these measures or a competing measure (measure on the same topic)?

- | | |
|---|--|
| <input type="checkbox"/> Yes (please provide additional details below). | <input type="checkbox"/> n/a (no clinical topics or specific measures under discussion on upcoming agenda) |
| <input checked="" type="checkbox"/> No | |

Within the last 3 years, have you or any household members published on any of the clinical topic areas covered by these measures or other topics areas? Please include both peer-reviewed and non-peer-reviewed sources (e.g., newspaper op-ed; blog)

- | | |
|---|--|
| <input type="checkbox"/> Yes (please provide additional details below). | <input type="checkbox"/> n/a (no clinical topics or specific measures under discussion on upcoming agenda) |
| <input checked="" type="checkbox"/> No | |

If you answered yes to either question above, please list any relevant measures publications in space below (or send list of relevant measures/publications as attachment). Otherwise, you may leave blank.

**American College of Physicians
Department of Clinical Policy
Disclosure of Interests: Supplemental Questions and Attestation**

Acknowledgements and Attestations

By signing this form,

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Itziar Etxeandia Ikobaltzeta

Print Name

Itziar Etxeandia Ikobaltzeta

Digitally signed by Itziar Etxeandia
Ikobaltzeta
Date: 2022.05.04 22:26:49 +02'00'

Signature

Date

Disclosure Purpose: Annual Staff Disclosure 2020, Annual Staff Disclosure 2021 - 2022, Planners and Faculty

Employment Information: Currently Employed

Summary of Interests

Company or Organization

Entity	Type	Interest Held By	Value
American College of Physicians	Employment Current Employment	Self	-
<div><div>Title: Vice President, Marketing & PR</div><div>Start Date: 06/10/1996</div><div>End Date:</div><div>Position Description:</div><div>Additional Information:</div></div>			

Certification

By submitting this form, I attest that I have disclosed all interests related to healthcare from the last 3 years on behalf of myself and any household members, including consideration of interests in the following areas:

- Research and consulting support (e.g., grants, contracts, sponsorships, honoraria, or any other fees related to role as consultant, speaker’s bureau participation, or expert as part of regulatory, legislative, or judicial process)
- Investments and proprietary interests excluding broadly diversified investments such as mutual or pension funds (e.g., stocks, bonds, stock options, commercial business interests, patents, trademarks, copyrights)
- Membership on boards, workgroups, panels, or committees through other medical societies or healthcare organizations
- Participation in advocacy or lobbying activities, including any roles or relationships with disease advocacy organizations

Other aspects of my background or present interests not addressed above that might be perceived as affecting my objectivity or independence

**American College of Physicians
Department of Clinical Policy
Disclosure of Interests: Supplemental Questions and Attestation**

**Disclosures of Interests: Supplemental Questions for Clinical Guidelines Committee and Scientific
Medical Policy Committee**

Please review the following topic areas and report any intellectual interests held by you or any household members that may be relevant to the topic areas.

- *Intellectual interests* are defined as academic ideas or activities or specific viewpoints and relate to such issues as academic advancement, clinical revenue streams, or community standing. Examples of types of intellectual interests include publications, unpaid participation on workgroups, panels, or committees, or membership in special interest groups.

Topic Areas: depression, diabetes, colorectal cancer screening, COVID-19, hematuria, and cannabinoids

Within the past 3 years, have you or any household members published on any of the above areas? Please include both peer-reviewed and non-peer-reviewed sources (e.g., newspaper op-ed; blog).

☐ I have publications to report (please list in space below).

☒ I have no publications to report.

Do you or any household members have any other intellectual interests related to any of the above areas?

☐ I have interests to report (please list in space below).

☒ I have no interest to report.

If you answered yes to either of the above questions, please provide additional details on the relevant interests (if not already captured in the Convey System) and list any relevant publications in the space below (or send a list of relevant publications as attachment).

**American College of Physicians
Department of Clinical Policy
Disclosure of Interests: Supplemental Questions and Attestation**

Disclosures of Interests: Supplemental Questions for Performance Measurement Committee

Please review the following measures or topic areas and report any intellectual interests held by you or any household members that may be relevant to the measures or topic areas under discussion.

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Topic Areas: osteoporosis

Please review the list of measures in the attached Word/Excel document and other topic areas listed above. The PMC will review these measures and other topics during the upcoming meeting.

Within the last 3 years, have you or any household members contributed towards the development, testing and/or maintenance of one of these measures or a competing measure (measure on the same topic)?

- | | |
|---|--|
| <input type="checkbox"/> Yes (please provide additional details below). | <input type="checkbox"/> n/a (no clinical topics or specific measures under discussion on upcoming agenda) |
| <input checked="" type="checkbox"/> No | |

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- | | |
|---|--|
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**American College of Physicians
Department of Clinical Policy
Disclosure of Interests: Supplemental Questions and Attestation**

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Allison Ewing

Print Name

5-4-22

Signature

Date

Disclosure Purpose: Annual Staff Disclosure 2020 - 2021 **Employment Information:** Currently Employed

Summary of Interests

Company or Organization

Entity	Type	Interest Held By	Value
American College of Physicians	Employment Current Employment	Self	-
<div><div><div>Title: Manager of Media Relations</div><div>Start Date: 04/27/2020</div></div><div><div>End Date: Ongoing / No Known End Date</div></div><div><div>Position Description: I manage media relations for the College.</div><div>Additional Information:</div></div></div>			

Certification

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- Participation in advocacy or lobbying activities, including any roles or relationships with disease advocacy organizations

Other aspects of my background or present interests not addressed above that might be perceived as affecting my objectivity or independence

Disclosure Purpose: Contractor/Guest Annual Disclosure 2021 - 22 **Employment Information:** Currently Employed

Summary of Interests

Company or Organization

Entity	Type	Interest Held By	Value
Oregon Health & Science University	Employment Current Employment	Self	-
<div><div>Title: Research Director</div><div>Start Date: 11/17/2014</div></div> <div>End Date: Ongoing / No Known End Date</div> <div><div>Position Description: I provide oversight on methods and direct supervision to researchers.</div><div>Additional Information:</div></div>			

Certification

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**American College of Physicians
Department of Clinical Policy
Disclosure of Interests: Supplemental Questions and Attestation**

**Disclosures of Interests: Supplemental Questions for Clinical Guidelines Committee and Scientific
Medical Policy Committee**

Please review the following topic areas and report any intellectual interests held by you or any household members that may be relevant to the topic areas.

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Topic Areas: depression, diabetes, colorectal cancer screening, COVID-19, hematuria, and cannabinoids

Within the past 3 years, have you or any household members published on any of the above areas? Please include both peer-reviewed and non-peer-reviewed sources (e.g., newspaper op-ed; blog).

☒ I have publications to report (please list in space below).

☐ I have no publications to report.

Do you or any household members have any other intellectual interests related to any of the above areas?

☐ I have interests to report (please list in space below).

☒ I have no interest to report.

If you answered yes to either of the above questions, please provide additional details on the relevant interests (if not already captured in the Convey System) and list any relevant publications in the space below (or send a list of relevant publications as attachment).

I have done systematic reviews that are proprietary to state Medicaid programs (not pu

**American College of Physicians
Department of Clinical Policy
Disclosure of Interests: Supplemental Questions and Attestation**

Disclosures of Interests: Supplemental Questions for Performance Measurement Committee

Please review the following measures or topic areas and report any intellectual interests held by you or any household members that may be relevant to the measures or topic areas under discussion.

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Topic Areas: osteoporosis

Please review the list of measures in the attached Word/Excel document and other topic areas listed above. The PMC will review these measures and other topics during the upcoming meeting.

Within the last 3 years, have you or any household members contributed towards the development, testing and/or maintenance of one of these measures or a competing measure (measure on the same topic)?

- | | |
|---|--|
| <input type="checkbox"/> Yes (please provide additional details below). | <input type="checkbox"/> n/a (no clinical topics or specific measures under discussion on upcoming agenda) |
| <input checked="" type="checkbox"/> No | |

Within the last 3 years, have you or any household members published on any of the clinical topic areas covered by these measures or other topics areas? Please include both peer-reviewed and non-peer-reviewed sources (e.g., newspaper op-ed; blog)

- | | |
|--|--|
| <input checked="" type="checkbox"/> Yes (please provide additional details below). | <input type="checkbox"/> n/a (no clinical topics or specific measures under discussion on upcoming agenda) |
| <input type="checkbox"/> No | |

If you answered yes to either question above, please list any relevant measures publications in space below (or send list of relevant measures/publications as attachment). Otherwise, you may leave blank.

I am the senior author on a ACP commissioned systematic review and network meta-a

**American College of Physicians
Department of Clinical Policy
Disclosure of Interests: Supplemental Questions and Attestation**

Acknowledgements and Attestations

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Curtis Harrod

Print Name

Curtis Harrod Digitally signed by Curtis Harrod
Date: 2022.04.20 11:24:10 -07'00'

Signature

Date

Disclosure Purpose: Annual Governance Disclosure 2021-2022 Employment Information: Currently Employed

Summary of Interests

Company or Organization

Entity	Type	Interest Held By	Value
American College of Physicians	Employment Current Employment	Self	-
Title: EVP/CEO Start Date: 01/01/2017 End Date: Position Description: EVP/CEO Additional Information:			
American Medical Association	Other	Self	-
Category: Other Compensation Type: Unpaid Start Date: 01/01/2017 End Date: Additional Information: Annual Compensation:			
Council of Medical Subspecialty Societies	Fiduciary Officer	Self	-
Official Title: CMSS Board Member/President Compensation Type: Unpaid Position Description: CMSS Board member/President Annual Compensation: Start Date: 10/27/2020 End Date: Additional Information:			
Inspira Health Woodbury	Employment	Spouse/Partner	-
Title: Physician Staff- Inspira Medical Group Start Date: 01/01/2017 End Date: Position Description: Salaried Pulmonary Critical Care Sleep Physician Additional Information: Inspira Group Physicians 2950 College Drive Suite 1E Vineland, NJ 08360			
PCPCC	Fiduciary Officer	Self	-
Official Title: PCPCC Board Chair Compensation Type: Unpaid Position Description: PCPCC Board Chair Annual Compensation: Start Date: 01/01/2017 End Date: Additional Information:			
Temple University	Fiduciary Officer	Self	-
Official Title: Lewis Katz School of Medicine at Temple University Medical Alumni Board Compensation Type: Unpaid Position Description: Board member Annual Compensation: Start Date: 01/01/2017 End Date: Additional Information:			

Intellectual Property

Type	Is Licensed	Interest Held By	Value
Other Intellectual Property - Multiple presentations and publications	-	Self	-
Description: Multiple presentations and publications Yearly Income: Income Source: None Additional Information:			
Other Intellectual Property - Multiple presentations	-	Self	-
Description: Multiple presentations Yearly Income: Income Source: Board of Regents Additional Information:			

Certification

By submitting this form, I attest that I have disclosed all interests related to healthcare from the last 3 years on behalf of myself and any household members, including consideration of interests in the following areas:

- Research and consulting support (e.g., grants, contracts, sponsorships, honoraria, or any other fees related to role as consultant, speaker's bureau participation, or expert as part of regulatory, legislative, or judicial process)
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Other aspects of my background or present interests not addressed above that might be perceived as affecting my objectivity or independence

**American College of Physicians
Department of Clinical Policy
Disclosure of Interests: Supplemental Questions and Attestation**

**Disclosures of Interests: Supplemental Questions for Clinical Guidelines Committee and Scientific
Medical Policy Committee**

Please review the following topic areas and report any intellectual interests held by you or any household members that may be relevant to the topic areas.

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Topic Areas: depression, diabetes, colorectal cancer screening, COVID-19, hematuria, and cannabinoids

Within the past 3 years, have you or any household members published on any of the above areas? Please include both peer-reviewed and non-peer-reviewed sources (e.g., newspaper op-ed; blog).

☒ I have publications to report (please list in space below).

☐ I have no publications to report.

Do you or any household members have any other intellectual interests related to any of the above areas?

☐ I have interests to report (please list in space below).

☒ I have no interest to report.

If you answered yes to either of the above questions, please provide additional details on the relevant interests (if not already captured in the Convey System) and list any relevant publications in the space below (or send a list of relevant publications as attachment).

Please find attached.

**American College of Physicians
Department of Clinical Policy
Disclosure of Interests: Supplemental Questions and Attestation**

Disclosures of Interests: Supplemental Questions for Performance Measurement Committee

Please review the following measures or topic areas and report any intellectual interests held by you or any household members that may be relevant to the measures or topic areas under discussion.

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Topic Areas: osteoporosis

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Within the last 3 years, have you or any household members contributed towards the development, testing and/or maintenance of one of these measures or a competing measure (measure on the same topic)?

- | | |
|---|--|
| <input type="checkbox"/> Yes (please provide additional details below). | <input type="checkbox"/> n/a (no clinical topics or specific measures under discussion on upcoming agenda) |
| <input checked="" type="checkbox"/> No | |

Within the last 3 years, have you or any household members published on any of the clinical topic areas covered by these measures or other topics areas? Please include both peer-reviewed and non-peer-reviewed sources (e.g., newspaper op-ed; blog)

- | | |
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| <input type="checkbox"/> Yes (please provide additional details below). | <input type="checkbox"/> n/a (no clinical topics or specific measures under discussion on upcoming agenda) |
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Department of Clinical Policy
Disclosure of Interests: Supplemental Questions and Attestation**

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Darilyn V. Moyer, MD, FACP, FRCP, FIDSA, FAMWA

Publications related to COVID-19 released within the last three years:

- Ann C. Greiner, **Darilyn V. Moyer**, and Anand Parekh, “Hidden In Plain Sight: We Must Leverage Primary Care To Mitigate Covid-19”, An article in *Forbes*, 11/21
- Eileen Barrett, MD, MPH, Susan Thompson Hingle, MD, Cynthia D. Smith, MD, **Darilyn V. Moyer, MD**, “Getting Through COVID-19: Keeping Clinicians in the Workforce”, An article in *Annals of Internal Medicine*, 2021; doi:10.7326/M21-3381, 9/21
- Christine Laine, MD, MPH; Deborah Cotton, MD, MPH; **Darilyn V. Moyer, MD**; “COVID-19 Vaccine: Practical Clinical Considerations” A special article in *Annals of Internal Medicine*, 2021; doi.org/10.7326/M21-1260, 05/21
- Christine Laine, MD, MPH; Deborah Cotton, MD, MPH; **Darilyn V. Moyer, MD**; “COVID-19 Vaccine Distribution and Allocation: What Physicians Need to Know” A special article in *Annals of Internal Medicine*, 2021; doi:10.7326/M21-0331, 03/21
- Christine Laine, MD, MPH; Deborah Cotton, MD, MPH; **Darilyn V. Moyer, MD**; “COVID-19: Promoting Vaccine Acceptance” A special article in *Annals of Internal Medicine*, 2021; doi.org/10.7326/M20-8008, 02/21
- Christine Laine, MD, MPH; Deborah Cotton, MD, MPH; **Darilyn V. Moyer, MD**; “COVID-19 Vaccine: What Physicians Need to Know” A special article in *Annals of Internal Medicine*, 2020; 173:830. doi:10.7326/M20-6841, 11/20
- Jain, S. & Kim, D. (Eds.). (2020). An evolution of empowerment: A women in medicine summit compendium. “Perfect Prescription for Inequity: The intersection of COVID-19 and the U.S. health care system” **Darilyn V. Moyer**. Wiley, 09/20

Disclosure Purpose: Annual Staff Disclosure 2021 - 2022,
Planners and Faculty

Employment Information: Currently Employed

Summary of Interests

Company or Organization			
Entity	Type	Interest Held By	Value
American College of Physicians	Employment Current Employment	Self	-
<div><div>Title: Vice President, Clinical Policy</div><div>Start Date: 12/07/2003</div><div>End Date: Ongoing / No Known End Date</div><div>Position Description:</div><div>Additional Information:</div></div>			
American College of Physicians	Other	Self	-
<div><div>Category: Other</div><div>Compensation Type:</div><div>Additional Information: I regularly represent ACP in external initiatives related to clinical and medical policies (such as meetings, workgroups, committees, governance boards).</div><div>Start Date: 12/07/2003</div><div>Annual Compensation:</div><div>End Date:</div></div>			

Certification

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**American College of Physicians
Department of Clinical Policy
Disclosure of Interests: Supplemental Questions and Attestation**

**Disclosures of Interests: Supplemental Questions for Clinical Guidelines Committee and Scientific
Medical Policy Committee**

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Topic Areas: depression, diabetes, colorectal cancer screening, COVID-19, hematuria, and cannabinoids

Within the past 3 years, have you or any household members published on any of the above areas? Please include both peer-reviewed and non-peer-reviewed sources (e.g., newspaper op-ed; blog).

☐ I have publications to report (please list in space below).

☒ I have no publications to report.

Do you or any household members have any other intellectual interests related to any of the above areas?

☐ I have interests to report (please list in space below).

☒ I have no interest to report.

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**American College of Physicians
Department of Clinical Policy
Disclosure of Interests: Supplemental Questions and Attestation**

Disclosures of Interests: Supplemental Questions for Performance Measurement Committee

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Topic Areas: osteoporosis

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- | | |
|---|--|
| <input type="checkbox"/> Yes (please provide additional details below). | <input type="checkbox"/> n/a (no clinical topics or specific measures under discussion on upcoming agenda) |
| <input checked="" type="checkbox"/> No | |

Within the last 3 years, have you or any household members published on any of the clinical topic areas covered by these measures or other topics areas? Please include both peer-reviewed and non-peer-reviewed sources (e.g., newspaper op-ed; blog)

- | | |
|---|--|
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**American College of Physicians
Department of Clinical Policy
Disclosure of Interests: Supplemental Questions and Attestation**

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Amir Qaseem

Print Name

Amir Qaseem

Digitally signed by Amir Qaseem
DN: cn=Amir Qaseem, o, ou,
email=aqaseem@acponline.org, c=US
Date: 2022.04.21 09:52:29 -04'00'

4/21/2022

Signature

Date

Disclosure Purpose: Annual Staff Disclosure 2020 - 2021, Annual Staff Disclosure 2021 - 2022

Employment Information: Currently Employed

Summary of Interests

Company or Organization

Entity	Type	Interest Held By	Value
American College of Physicians	Employment Current Employment	Self	-
<i>Title:</i> Senior Research Associate <i>Start Date:</i> 01/13/2021 <i>End Date:</i>		<i>Position Description:</i> Center for Evidence Reviews <i>Additional Information:</i>	

Certification

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Department of Clinical Policy
Disclosure of Interests: Supplemental Questions and Attestation**

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Topic Areas: depression, diabetes, colorectal cancer screening, COVID-19, hematuria, and cannabinoids

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☐ I have no publications to report.

Do you or any household members have any other intellectual interests related to any of the above areas?

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☒ I have no interest to report.

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Department of Clinical Policy
Disclosure of Interests: Supplemental Questions and Attestation**

Disclosures of Interests: Supplemental Questions for Performance Measurement Committee

Please review the following measures or topic areas and report any intellectual interests held by you or any household members that may be relevant to the measures or topic areas under discussion.

- *Intellectual interests* are defined as academic ideas or activities or specific viewpoints and relate to such issues as academic advancement, clinical revenue streams, or community standing. Examples of types of intellectual interests include publications, unpaid participation on workgroups, panels, or committees, or membership in special interest groups.

Topic Areas: osteoporosis

Please review the list of measures in the attached Word/Excel document and other topic areas listed above. The PMC will review these measures and other topics during the upcoming meeting.

Within the last 3 years, have you or any household members contributed towards the development, testing and/or maintenance of one of these measures or a competing measure (measure on the same topic)?

☐

Yes (please provide additional details below).

☐

n/a (no clinical topics or specific measures under discussion on upcoming agenda)

☒

No

Within the last 3 years, have you or any household members published on any of the clinical topic areas covered by these measures or other topics areas? Please include both peer-reviewed and non-peer-reviewed sources (e.g., newspaper op-ed; blog)

☐

Yes (please provide additional details below).

☐

n/a (no clinical topics or specific measures under discussion on upcoming agenda)

☒

No

If you answered yes to either question above, please list any relevant measures publications in space below (or send list of relevant measures/publications as attachment). Otherwise, you may leave blank.

**American College of Physicians
Department of Clinical Policy
Disclosure of Interests: Supplemental Questions and Attestation**

Acknowledgements and Attestations

By signing this form,

- I acknowledge that in order to maintain transparency, all participants' disclosure of interests will be publicly available on ACP's website and a link to the disclosures will be included in each published work.
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- I attest that I have disclosed all healthcare-related financial and intellectual interests for myself and any household members from the last 3 years and I will promptly disclose any changes. These include but are not limited to: research and consulting roles; investments and proprietary interests, and intellectual interests such as participation in workgroups, panels, or committees through other medical societies or healthcare organizations.

Tatyana Shamliyan

Print Name

Tatyana A Shamliyan

Digitally signed by Tatyana A Shamliyan
Date: 2022.04.20 13:17:54 -04'00'

04/20/2021

Signature

Date

Disclosure Purpose: Annual Staff Disclosure 2021 - 2022 Employment Information: Currently Employed

Summary of Interests

Company or Organization

Entity	Type	Interest Held By	Value
American College of Physicians	Other Current Employment	Self	-
<div>Category: Other Start Date: 08/17/2021 End Date:</div> <div>Compensation Type: Cash Annual Compensation: No</div> <div>Additional Information:</div>			

Certification

By submitting this form, I attest that I have disclosed all interests related to healthcare from the last 3 years on behalf of myself and any household members, including consideration of interests in the following areas:

- Research and consulting support (e.g., grants, contracts, sponsorships, honoraria, or any other fees related to role as consultant, speaker’s bureau participation, or expert as part of regulatory, legislative, or judicial process)
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- Membership on boards, workgroups, panels, or committees through other medical societies or healthcare organizations
- Participation in advocacy or lobbying activities, including any roles or relationships with disease advocacy organizations

Other aspects of my background or present interests not addressed above that might be perceived as affecting my objectivity or independence



**American College of Physicians
Department of Clinical Policy
Disclosure of Interests: Supplemental Questions and Attestation**

**Disclosures of Interests: Supplemental Questions for Clinical Guidelines Committee and Scientific
Medical Policy Committee**

Please review the following topic areas and report any intellectual interests held by you or any household members that may be relevant to the topic areas.

- *Intellectual interests* are defined as academic ideas or activities or specific viewpoints and relate to such issues as academic advancement, clinical revenue streams, or community standing. Examples of types of intellectual interests include publications, unpaid participation on workgroups, panels, or committees, or membership in special interest groups.

Topic Areas: depression, diabetes, colorectal cancer screening, COVID-19, hematuria, and cannabinoids

Within the past 3 years, have you or any household members published on any of the above areas? Please include both peer-reviewed and non-peer-reviewed sources (e.g., newspaper op-ed; blog).

☐ I have publications to report (please list in space below).

☒ I have no publications to report.

Do you or any household members have any other intellectual interests related to any of the above areas?

☐ I have interests to report (please list in space below).

☒ I have no interest to report.

If you answered yes to either of the above questions, please provide additional details on the relevant interests (if not already captured in the Convey System) and list any relevant publications in the space below (or send a list of relevant publications as attachment).

**American College of Physicians
Department of Clinical Policy
Disclosure of Interests: Supplemental Questions and Attestation**

Disclosures of Interests: Supplemental Questions for Performance Measurement Committee

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Topic Areas: osteoporosis

Please review the list of measures in the attached Word/Excel document and other topic areas listed above. The PMC will review these measures and other topics during the upcoming meeting.

Within the last 3 years, have you or any household members contributed towards the development, testing and/or maintenance of one of these measures or a competing measure (measure on the same topic)?

- | | |
|---|--|
| <input type="checkbox"/> Yes (please provide additional details below). | <input type="checkbox"/> n/a (no clinical topics or specific measures under discussion on upcoming agenda) |
| <input checked="" type="checkbox"/> No | |

Within the last 3 years, have you or any household members published on any of the clinical topic areas covered by these measures or other topics areas? Please include both peer-reviewed and non-peer-reviewed sources (e.g., newspaper op-ed; blog)

- | | |
|---|--|
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| <input checked="" type="checkbox"/> No | |

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Yasmine Sust

Print Name

Yasmine Sust Digitally signed by Yasmine Sust
Date: 2022.04.21 12:56:00 -04'00' **4/21/22**

Signature

Date

Disclosure Purpose: Annual Staff Disclosure 2021 - 2022 Employment Information: Currently Employed

Summary of Interests

Company or Organization

Entity	Type	Interest Held By	Value
American College of Physicians	Employment Current Employment	Self	-
<i>Title:</i> Senior Scientist, Clinical Policy <i>Start Date:</i> 06/15/2020 <i>End Date:</i> Ongoing / No Known End Date <i>Position Description:</i> Leading the performance measurement strategy <i>Additional Information:</i>			
Boehringer Ingelheim	Other	Self	-
<i>Category:</i> Other <i>Compensation Type:</i> Cash <i>Additional Information:</i> As a result of my participation at the following stakeholder meeting, my former employer received honoraria: Boehringer Ingelheim, Stakeholder, Advancing Quality for Patients with Type 2 Diabetes and Established Cardiovascular Disease, 2018 <i>Start Date:</i> 01/01/2018 <i>End Date:</i> 12/31/2018 <i>Annual Compensation:</i>			
Discern Health	Other	Self	-
<i>Category:</i> Other <i>Compensation Type:</i> Cash <i>Additional Information:</i> As a result of my participation on the following roundtables/stakeholder meetings/work groups, my former employer has received honoraria: Discern Health, interviewee, Understanding Quality Measurement Priorities for Breast Cancer, 2020 Discern Health, Expert Panel Member, Cancer Immunotherapy Quality Measurement, 2019 Discern, Advisor, Telehealth Measurement Gaps, 2018 <i>Start Date:</i> 01/01/2018 <i>End Date:</i> 03/01/2020 <i>Annual Compensation:</i>			
PCPI Foundation	Employment	Self	-
<i>Title:</i> Senior Director, Measurement Science <i>Start Date:</i> 01/01/2017 <i>End Date:</i> 06/12/2020 <i>Position Description:</i> Orchestrate daily activities of the Measurement Science Program, developing and implementing key performance measures, and monitoring performance to uphold market competitiveness. <i>Additional Information:</i> My salary at the PCPI was supported by services provided as a contractor and subcontractor to CMS and non-profit organizations for measure development, specification, testing and endorsement.			
Pharmacy Quality Alliance (PQA)	Other	Self	-
<i>Category:</i> Other <i>Compensation Type:</i> Cash <i>Additional Information:</i> As a result of my participation on the following roundtable, my former employer has received honoraria: PQA, roundtable member, Patient Engagement Rubric, 2019 <i>Start Date:</i> 01/01/2019 <i>End Date:</i> 12/31/2019 <i>Annual Compensation:</i>			

Certification

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**American College of Physicians
Department of Clinical Policy
Disclosure of Interests: Supplemental Questions and Attestation**

**Disclosures of Interests: Supplemental Questions for Clinical Guidelines Committee and Scientific
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Topic Areas: depression, diabetes, colorectal cancer screening, COVID-19, hematuria, and cannabinoids

Within the past 3 years, have you or any household members published on any of the above areas? Please include both peer-reviewed and non-peer-reviewed sources (e.g., newspaper op-ed; blog).

☐ I have publications to report (please list in space below).

☒ I have no publications to report.

Do you or any household members have any other intellectual interests related to any of the above areas?

☐ I have interests to report (please list in space below).

☒ I have no interest to report.

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**American College of Physicians
Department of Clinical Policy
Disclosure of Interests: Supplemental Questions and Attestation**


Acknowledgements and Attestations

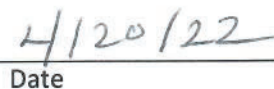
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Samantha Tierney

Print Name


Signature


Date

Disclosure Purpose: Contractor/Guest Annual Disclosure 2021 - 22 **Employment Information:** Currently Employed

Summary of Interests

Company or Organization

Entity	Type	Interest Held By	Value
Canadian Institutes of Health Research	Grant / Contract	Self	\$9,310,000.00
<i>Recipient Name:</i> Dr. Michael McGillion <i>Grant / Contract Description:</i> The SMArT VIEW, CoVeRed <i>Grant / Contract Amount:</i> \$9,310,000.00 <i>Contract Start Date:</i> 10/15/2015 <i>Contract End Date:</i> 09/30/2019		<i>Recipient Type:</i> Individual <i>Grant / Contract Purpose:</i> Research <i>Grant / Contract Valuation Date:</i> 10/15/2015 <i>Additional Information:</i>	
COVID-END	Other	Self	-
<i>Category:</i> Other <i>Compensation Type:</i> Unpaid <i>Additional Information:</i>		<i>Start Date:</i> 05/01/2020 <i>Annual Compensation:</i> No	<i>End Date:</i> Ongoing / No Known End Date
Evidence Based Research Network	Fiduciary Officer	Self	-
<i>Official Title:</i> Steering Committee Member <i>Compensation Type:</i> Unpaid <i>Annual Compensation:</i> No <i>Additional Information:</i>		<i>Position Description:</i> <i>Start Date:</i> 10/01/2016	<i>End Date:</i> Ongoing / No Known End Date
Evidence Synthesis International	Fiduciary Officer	Self	-
<i>Official Title:</i> Secretariat <i>Compensation Type:</i> Unpaid <i>Annual Compensation:</i> <i>Additional Information:</i>		<i>Position Description:</i> Organize and support activities of the organisation <i>Start Date:</i> 03/01/2018	<i>End Date:</i> Ongoing / No Known End Date
Sigma Theta Tau International	Fiduciary Officer	Self	-
<i>Official Title:</i> President - Alpha Nu Chapter <i>Compensation Type:</i> Unpaid <i>Annual Compensation:</i> No <i>Additional Information:</i>		<i>Position Description:</i> President - Alpha Nu Chapter <i>Start Date:</i> 09/01/2019	<i>End Date:</i> 09/30/2021
Sigma Theta Tau International	Fiduciary Officer	Self	-
<i>Official Title:</i> Immediate Past President <i>Compensation Type:</i> <i>Annual Compensation:</i> No <i>Additional Information:</i>		<i>Position Description:</i> <i>Start Date:</i> 10/01/2021	<i>End Date:</i> 09/30/2022
University of Bologna	Other	Self	-
<i>Category:</i> Other <i>Compensation Type:</i> Cash <i>Additional Information:</i> Guest Lecturer		<i>Start Date:</i> 11/16/2019 <i>Annual Compensation:</i> No	<i>End Date:</i> 11/22/2019
Villanova University	Employment Current Employment	Self	-
<i>Title:</i> Associate Professor <i>Start Date:</i> 08/22/2017 <i>End Date:</i> Ongoing / No Known End Date		<i>Position Description:</i> <i>Additional Information:</i>	
Villanova University	Grant / Contract	Self	\$50,000.00
<i>Recipient Name:</i> M. Louise Fitzpatrick College of Nursing <i>Grant / Contract Description:</i> COVID-19 Caring About Health for All Study (CHAMPS) <i>Grant / Contract Amount:</i> \$50,000.00 <i>Contract Start Date:</i> <i>Contract End Date:</i>		<i>Recipient Type:</i> Institution <i>Grant / Contract Purpose:</i> Research <i>Grant / Contract Valuation Date:</i> 03/31/2020 <i>Additional Information:</i> Principal Investigators: Kaufman, P., Havens, D., Mensinger, J.; Co-Investigators: Bradley, P., Brom, H., Copel, L., Maldonado, L., Smeltzer, S., Yost, J.	

Certification

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**American College of Physicians
Department of Clinical Policy
Disclosure of Interests: Supplemental Questions and Attestation**

Disclosures of Interests: Supplemental Questions for Clinical Guidelines Committee and Scientific Medical Policy Committee

Please review the following topic areas and report any intellectual interests held by you or any household members that may be relevant to the topic areas.

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☐ I have no publications to report.

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1. DIABETES [non-ACP related italicized]

1. Navodia, N., Wahoush, O., Tang, T., Yost, J., Ibrahim, S., & Sherifali, D. (2019). *Culturally tailored self-management interventions for South Asians with type 2 diabetes: A systematic review*. *Canadian Journal of Diabetes*, 43(6), 445-452.

2. COVID 19 [non-ACP related italicized]

1. Qaseem, A., Yost, J., Etxeandia-Ikobaltzeta, I., Abraham, G. M. A., Jokela, M., Forciea, J. A., Miller, M., Humphrey, L. L., for the Scientific Medical Policy Committee of the American College of Physicians. (2022). Should remdesivir be used for the treatment of patients with COVID-19? Rapid, living practice points from the American College of Physicians (Version 2, Update 3). *Annals of Internal Medicine*.
2. Qaseem, A., Yost, J., Etxeandia-Ikobaltzeta, I., Forciea, M. A., Abraham, G. M., Miller, M. C., Obley, A., Humphrey, L. L., for the Scientific Medical Policy Committee of the American College of Physicians. (2022). What is the role of antibody determination in patients after SARS-CoV-2 infection? Rapid, living practice points from the American College of Physicians (Version 2). *Annals of Internal Medicine*.
3. Mensinger, J. L., Brom, H. M., Havens, D. S., Costello, A., D'Annunzio, C., Dean Durning, J., Bradley, P. K., Copel, L. C., Maldonado, L., Smeltzer, S. C., Yost, J., & Kaufmann, P. G. *Psychological responses of hospital-based nurses working during the COVID-19 pandemic in the United States: An observational study*. *Applied Nursing Research*, 63(2022).
4. Kaufmann, P. G., Havens, D. S., Mensinger, J. L., Bradley, P. K., Brom, H. M., Copel, L. C., Costello, A., D'Annunzio, C., Dean Durning, J., Maldonado, L., Barrow McKenzie, A., Smeltzer, S. C., Yost, J., and the CHAMPS Study Investigators. *The COVID-19 study of healthcare and support personnel (CHAMPS): Objectives and design*. *JMIR Research Protocols*, 10(10): e30757.
5. Qaseem, A., Yost, J., Etxeandia-Ikobaltzeta, I., Abraham, G. M. A., Jokela, M., Miller, M., Forciea, J. A., Humphrey, L. L., for the Scientific Medical Policy Committee of the American College of Physicians. Should remdesivir be used for the treatment of patients with COVID-19? Rapid, living practice points from the American College of Physicians (Version 2, Update Alert 2). (2021). *Annals of Internal Medicine*, online ahead of print.
6. Qaseem, A., Yost, J., Etxeandia-Ikobaltzeta, I., Abraham, G. M. A., Jokela, M., Miller, M., Forciea, J. A., Humphrey, L. L., for the Scientific Medical Policy Committee of the American College of Physicians. Should remdesivir be used for the treatment of patients with COVID-19? Rapid, living practice points from the American College of Physicians (Version 2, Update Alert 1). (2021). *Annals of Internal Medicine*, online ahead of print.

**American College of Physicians
Department of Clinical Policy
Disclosure of Interests: Supplemental Questions and Attestation**

Disclosures of Interests: Supplemental Questions for Performance Measurement Committee

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Topic Areas: osteoporosis

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Within the last 3 years, have you or any household members contributed towards the development, testing and/or maintenance of one of these measures or a competing measure (measure on the same topic)?

- | | |
|---|--|
| <input type="checkbox"/> Yes (please provide additional details below). | <input type="checkbox"/> n/a (no clinical topics or specific measures under discussion on upcoming agenda) |
| <input checked="" type="checkbox"/> No | |

Within the last 3 years, have you or any household members published on any of the clinical topic areas covered by these measures or other topics areas? Please include both peer-reviewed and non-peer-reviewed sources (e.g., newspaper op-ed; blog)

- | | |
|---|--|
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| <input checked="" type="checkbox"/> No | |

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Jennifer Yost

Print Name

Signature



May 4, 2022

Date

CONTINUED FROM P. 1

7. Qaseem, A., Yost, J., Forciea, M., Jokela, J., Miller, M., Obley, A. J., Humphrey, L. L., for the Scientific Medical Policy Committee of the American College of Physicians. The Development of Rapid, Living Practice Points: Summary of Methods from the Scientific Medical Policy Committee of the American College of Physicians. *Annals of Internal Medicine*, online ahead of print. doi: 10.7326/M20-7641

8. Qaseem, A., Yost, J., Etxeandia-Ikobaltzeta, I., Forciea, M. A., Abraham, G. M., Miller, M. C., Obley, A., Humphrey, L. L., for the Scientific Medical Policy Committee of the American College of Physicians. (2021). What is the role of antibody determination in patients after SARS-CoV-2 infection? Rapid, living practice points from the American College of Physicians (Version 1). *Annals of Internal Medicine*, 174(6), 828-839

9. Qaseem, A., Yost, J., Etxeandia-Ikobaltzeta, I., Abraham, G. M. A., Jokela, M., Forciea, J. A., Miller, M., Humphrey, L. L., for the Scientific Medical Policy Committee of the American College of Physicians. Should remdesivir be used for the treatment of patients with COVID-19? Rapid, living practice points from the American College of Physicians (Version 2). (2021). *Annals of Internal Medicine*, 174(5), 673-679.

10. Qaseem, A., Etxeandia-Ikobaltzeta, I., Yost, J., Humphrey, L. L., for the Scientific Medical Policy Committee of the American College of Physicians. (2020). Update alert: What is the effectiveness of N95 respirators, surgical masks, and cloth masks in community and healthcare settings for prevention of COVID-19? Living Practice Points from the American College of Physicians. *Annals of Internal Medicine*, 173(12), 170.

11. Qaseem, A., Yost, J., Etxeandia-Ikobaltzeta, I., Miller, M., Abraham, G. M., Obley, A. J., Forciea, M. A., Jokela, J. A., Humphrey, L. L., for the Scientific Medical Policy Committee of the American College of Physicians. Should remdesivir be used for the treatment of patients with COVID-19? Rapid, living practice points from the American College of Physicians (Version 1). (2020). *Annals of Internal Medicine*, 174(2), 229-236.

12. Qaseem, A., Yost, J., Etxeandia-Ikobaltzeta, I., Humphrey, L. L., for the Scientific Medical Policy Committee of the American College of Physicians. (2020). Update alert 2: Should clinicians use chloroquine or hydroxychloroquine alone or in combination with azithromycin for the prophylaxis or treatment of COVID-19? Living practice points from the American College of Physicians. *Annals of Internal Medicine*, 173(5), W88-W89.

13. Qaseem, A., Etxeandia-Ikobaltzeta, I., Yost, J., Miller, M., Abraham, G. M., Obley, A. J., Forciea, M. A., Jokela, J. A., Humphrey, L. L., for the Scientific Medical Policy Committee of the American College of Physicians. (2020). What is the effectiveness of N95 respirators, surgical masks, and cloth masks in community and healthcare settings for prevention of COVID-19? What is the effectiveness for re-use or extended use of N95 respirators for prevention of COVID-19? Living Practice Points from the American College of Physicians (Version 1). *Annals of Internal Medicine*, 173(8), 642-649.

14. Qaseem, A., Yost, J., Etxeandia-Ikobaltzeta, I., Humphrey, L. L., for the Scientific Medical Policy Committee of the American College of Physicians. (2020). Update alert: Should clinicians use chloroquine or hydroxychloroquine alone or in combination with azithromycin for the prophylaxis or treatment of COVID-19? Living practice points from the American College of Physicians. *Annals of Internal Medicine*, 173(2), W48-W51.

15. Qaseem, A., Yost, J., Etxeandia-Ikobaltzeta, I., Miller, M., Abraham, G. M., Obley, A. J., Forciea, M. A., Jokela, J. A., Humphrey, L. L., for the Scientific Medical Policy Committee of the American College of Physicians. (2020). Should clinicians use chloroquine or hydroxychloroquine alone or in combination with azithromycin for the prophylaxis or treatment of COVID-19? (Version 1) *Annals of Internal Medicine*, 173(2), 137-142.

Disclosure Purpose: Contractor/Guest Annual Disclosure 2022 - 23 **Employment Information:** Currently Employed

Summary of Interests

Company or Organization

Entity	Type	Interest Held By	Value
Association of Academic Health Centers	Consultant Current Employment	Self	-
<i>Category:</i> Consultant <i>Compensation Type:</i> Other <i>Compensation:</i>		<i>Start Date:</i> 01/01/2020 <i>Other Compensation:</i> contract <i>Additional Information:</i>	<i>End Date:</i> Ongoing / No Known End Date

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**American College of Physicians
Clinical Guidelines Committee, Performance Measurement Committee,
& Scientific Medical Policy Committee
Disclosure of Interests: Attestation and Supplemental Questions**

Guest Disclosures of Interests: Acknowledgements and Attestations

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- I attest that I have disclosed all healthcare-related financial and intellectual interests for myself and any household members from the last 3 years and I will promptly disclose any changes. These include but are not limited to: research and consulting roles; investments and proprietary interests, and intellectual interests such as participation in workgroups, panels, or committees through other medical societies or healthcare organizations.

Gerald Gartlehner

Print Name

Gerald Gartlehner

Digital unterschrieben von Gerald
Gartlehner
Datum: 2022.04.21 16:47:58 +02'00'

Signature

Date

Disclosure Purpose: Contractor/Guest Annual Disclosure 2021 - 22 **Employment Information:** Currently Employed

Summary of Interests

Company or Organization

Entity	Type	Interest Held By	Value
University for Continuing Education Krems	Employment Current Employment	Self	-
<div><div>Title: MD, PhD</div><div>Start Date: 09/01/2019</div></div> <div><div>End Date: Ongoing / No Known End Date</div><div>Position Description: Researcher</div><div>Additional Information:</div></div>			

Certification

By submitting this form, I attest that I have disclosed all interests related to healthcare from the last 3 years on behalf of myself and any household members, including consideration of interests in the following areas:

- Research and consulting support (e.g., grants, contracts, sponsorships, honoraria, or any other fees related to role as consultant, speaker’s bureau participation, or expert as part of regulatory, legislative, or judicial process)
- Investments and proprietary interests excluding broadly diversified investments such as mutual or pension funds (e.g., stocks, bonds, stock options, commercial business interests, patents, trademarks, copyrights)
- Membership on boards, workgroups, panels, or committees through other medical societies or healthcare organizations
- Participation in advocacy or lobbying activities, including any roles or relationships with disease advocacy organizations

Other aspects of my background or present interests not addressed above that might be perceived as affecting my objectivity or independence



**American College of Physicians
Clinical Guidelines Committee, Performance Measurement Committee,
& Scientific Medical Policy Committee
Disclosure of Interests: Attestation and Supplemental Questions**

Guest Disclosures of Interests: Acknowledgements and Attestations

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Andreea-Iulia Dobrescu

Print Name

Andreea-Iulia Dobrescu

Digital unterschrieben von Andreea-Iulia
Dobrescu
Datum: 2022.04.21 22:05:29 +02'00'

21.04.2022

Signature

Date

Disclosure Purpose: Annual Governance Disclosure 2022-23 **Employment Information:** Currently Retired/Unemployed

Summary of Interests

I do not have any interests to disclose at this time.

Certification

By submitting this form, I attest that I have disclosed all interests related to healthcare from the last 3 years on behalf of myself and any household members, including consideration of interests in the following areas:

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Other aspects of my background or present interests not addressed above that might be perceived as affecting my objectivity or independence



Disclosure Purpose: Contractor/Guest Annual Disclosure 2022 - 23 **Employment Information:** Currently Employed

Summary of Interests

Company or Organization

Entity	Type	Interest Held By	Value
University of Arkansas at Little Rock	Employment Current Employment	Self	-
<div><div><div>Title: Associate Dean/Professor of History</div><div>Start Date: 08/15/1991</div><div>End Date: Ongoing / No Known End Date</div></div><div><div>Position Description: Responsible for curriculum and student success in the College of Humanities, Arts, Social Sciences and Education</div><div>Additional Information:</div></div></div>			

Certification

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Other aspects of my background or present interests not addressed above that might be perceived as affecting my objectivity or independence

Disclosure Purpose: Contractor/Guest Annual Disclosure 2022 - 23 **Employment Information:** Currently Retired/Unemployed

Summary of Interests

Company or Organization

Entity	Type	Interest Held By	Value						
National Cancer Institute	Consultant	Self	\$9,600.00						
Category: Consultant Compensation Type: Cash		Start Date: 01/01/2019 End Date: Ongoing / No Known End Date Compensation: Yes							
		<table><tr><th>Year</th><th>Amount</th><th>Type</th></tr><tr><td>2019</td><td>\$9,600.00</td><td>Actual</td></tr></table>	Year	Amount	Type	2019	\$9,600.00	Actual	
Year	Amount	Type							
2019	\$9,600.00	Actual							
Additional Information: This is through Emmes Corporation for my involvement on the Adult Late Phase CIRB for NCI. These are twice monthly meetings where we review new and ongoing research efforts run under the NCI umbrella.									
University of Michigan	Consultant	Self	\$8,000.00						
Category: Consultant Compensation Type: Cash		Start Date: 01/01/2018 End Date: Ongoing / No Known End Date Compensation: Yes							
		<table><tr><th>Year</th><th>Amount</th><th>Type</th></tr><tr><td>2019</td><td>\$8,000.00</td><td>Actual</td></tr></table>	Year	Amount	Type	2019	\$8,000.00	Actual	
Year	Amount	Type							
2019	\$8,000.00	Actual							
Additional Information: Compensation is for my involvement on their C1 Oncology IRB. Note that I have functioned as a non-affiliated, non-scientist on this board for over 12 years.									

Certification

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**American College of Physicians
Clinical Guidelines Committee, Performance Measurement Committee,
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Disclosure of Interests: Attestation and Supplemental Questions**

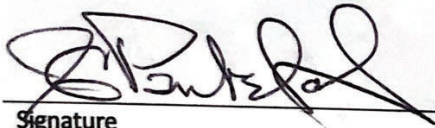
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James G Pantelas

Print Name



Signature

May 4, 2022

Date