Timothy Wilt

May 03, 2021 11:40:58 EDT
American College of Physicians

Disclosure Purpose: Annual Governance Disclosure 2021-2022 **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
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.
Recipient Type: Institution
Grant / Contract Purpose: Research
Grant / Contract Amount: $400,000.00
Contract Start Date: 01/01/2020 ***Contract End Date:***

American College of Physicians	Other	Other - Minneapolis VA CVRE	-

Category: Other
Compensation Type: Other
Annual Compensation:
Start Date: 01/01/2018 ***End Date:***
Other Compensation: 100,000
Additional Information: Support for our research group to conduct reviews

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
Annual 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:***
Annual Compensation:

U.S. Department of Veterans Affairs	Employment Current Employment	Self	-

Title: Professor
Start Date: 06/15/2018 ***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:***
Annual 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.
Yearly Income:

Amount	Type	Year	Payment Receipt
$10,000.00	Estimated	2020	Direct Payment
$200,000.00	Estimated	2019	Payment through home institution

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

Other Intellectual Property - Evidence reports and manuscripts written on oste ...	-	Self	-

Description: Evidence reports and manuscripts written on osteoporosis based on AHRQ-funded research

Yearly 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

Convey
Global Disclosure System
AAMC

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: diverticulitis, depression, osteoporosis

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.

Timothy J. Wilt (e-signed)

Print Name

04/16/2021

Signature Date

Carolyn Crandall

Apr 02, 2021 20:43:34 EDT
American College of Physicians

Disclosure Purpose: Annual Governance Disclosure 2021-2022 **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 ***Annual Compensation:***	***End Date:***	
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:***		
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:***		
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:***		
International Society for Clinical Densitomnetry	Consultant	Self	-
Category: Consultant ***Compensation Type:*** Unpaid ***Additional Information:***	***Start Date:*** 01/01/2019 ***Annual Compensation:***	***End Date:***	
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:***	***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:***		
North American Menopause Society	Fiduciary Officer	Self	-
Official Title: member Board of Trustees ***Compensation Type:*** Unpaid ***Annual Compensation:*** ***Additional Information:***	***Position Description:*** Board of Trustees member ***Start Date:*** 10/13/2017 ***End Date:***		

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: Carolyn 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: diverticulitis, depression, osteoporosis

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).

Please see the attached list of publications regarding osteoporosis.

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.
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Carolyn J. Crandall, MD, MS, FACP

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: 2021.04.12 16:34:38 -07'00'

Signature Date

Crandall osteoporosis publications since 2018

1. **Crandall, C.J.**, Vasan, S., LaCroix, A., LeBoff, M.S., Cauley, J.A., Robbins, J.A., Jackson, R.D., Bauer, D.C. Bone Turnover Markers are not Associated with Hip Fracture Risk: A Case-Control Study in the Women's Health Initiative, Journal of Bone and Mineral Research, J Bone Miner Res. 2018 2018 Jul;33(7):1199-1208. PMID: 29923225 PMCID: PMC7060935
2. **Crandall, C.J.,** Larson, J., LaCroix, A., Cauley, J.A., LeBoff, M.S., Li, W., LeBlanc, E.S., Edwards, B.J., Manson, J.E., Ensrud, K. Predicting Fracture Risk in Younger Postmenopausal Women: Comparison of the Garvan and FRAX Risk Calculators in the Women's Health Initiative Study, *J Gen Intern Med.* 2019 Feb;34(2):235-242. PMID: 30334182. PMCID: PMC6374270.
3. Beavers, K.M., Neiberg, R.H., Johnson, K.C., Davis, C.H., Casanova, R., Schwartz, A.V., **Crandall, C.J.**, Lewis, C.E., Pi-Sunyer, X., Kritchevsky, S.B. Impact of body weight dynamics following intentional weight loss on fracture risk: Results from The Action for Health in Diabetes Study, *JBMR Plus. 2018 Oct 25;3(5):e10086.* PMID: 31131339 PMCID: PMC6524677
4. Cauley, J.A., Hovey, K.M., Stone, K.L., Andrews, C.A., Barbour, K.E., Hale, L., Jackson, R.D., Johnson, K.C., LeBlanc, E.S., Li, W., Zaslavsky, O., Ochs-Balcom, H., Wactawski-Wende, J., **Crandall, C.J.** Characteristics of self-reported sleep and the risk of falls and fractures: The Women's Health Initiative (WHI), *J Bone Miner Res.* 2019 Mar;34(3):464-474. PMID: 30461066. PMCID: PMC6563041
5. **Crandall, C.J.**, Larson, J., Manson, J.E., Cauley, J.A., LaCroix, A., Wactawski-Wende, J., Datta, M., Sattari, M., Schousboe, J.T., Leslie, W.D., Ensrud, K.E. A Comparison of U.S. and Canadian Osteoporosis Screening and Treatment Strategies in Postmenopausal Women, *Journal of Bone and Mineral Research*, 2019 Apr;34(4):607-615. PMID: 30536628 PMCID: PMC7354844
6. **Crandall, CJ**, Schousboe, JT, Morin S, Lix, LM, Leslie, W. Performance of FRAX and FRAX-Based Treatment Thresholds in Women Aged 40 and Older: The Manitoba BMD Registry, *Journal of Bone and Mineral Research*, 2019 Aug;34(8):1419-1427. PMID: 30920022
7. Haring, B., **Crandall, C.J.,** Carbone, L., Liu, S., Li, W., Johnson, K., Wactawski-Wende, J., Shadyab, A.H., Gass, M., Kamensky, V., Cauley, J.A., Wassertheil-Smoller, S., Lipoprotein(a) plasma levels, bone mineral density and risk of hip fractures in the Women's Health Initiative, *BMJ Open*, 2019 Apr 24;9(4):e027257. doi: 10.1136/bmjopen-2018-027257. PubMed PMID: 31023762. PMCID: PMC6501983
8. Follis, S., Bea, J., Klimentidis, Y., Hu, C., **Crandall, C.J,** Garcia, D.O., Shadyab, A.H., Nassir, R., Chen, Z. Psychosocial Stress and Bone Loss among Postmenopausal Women: Results from the Women's Health Initiative, *J Epidemiol Community Health.* 2019 Sep;73(9):888-892 PMID: 31289118.
9. Conley, R.B., Adib, G., Adler, R.A., Akesson, K.E., Alexander, I.M., Amenta, K.C., Blank, R.D., Brox, W.T., Carmody, E.E., Chapman-Novakofski, K., Clarke, B.L., Cody, K.M, Cooper, C., **Crandall, C.J.,** Dirschl, D.R., Eagen, T.J., Elderkin. A.L., Fujita, M., Greenspan, S.L., Halbout, P., Hochberg, M.C., Javaid, M., Jeray, K.J., Kearns, A.E., King, T., Koinis, T.F., Koontz, J.S., Kuzma, M., Lindsey, C., Lorentzon, M., Lyritis, G.P., Michaeud, L.B., Miciano, A., Morin, S.N., Mujahid, N., Napoli, N., Olenginski, T.P., Puzas, J.E., Rizou, S., Rosen, C.J., Saag, K., Thompson, E., Tosi, L.L., Tracer, H.,

Khosla, S., Kiel, D. Secondary Fracture Prevention: Consensus Clinical Recommendations from a Multistakeholder Coalition. *J Bone Miner Res.* 2020 Jan;35(1):36-52, PMID: 31538675

10. Shieh, A., Greendale, G.A., Cauley, J.A., Karvonen-Gutierrez, C., **Crandall, CJ,** Karlamangla, A.S. Estradiol and follicle stimulating hormone as predictors of onset of menopause transition-related bone loss in pre- and perimenopausal women, *J Bone Miner Res*. 2019 Dec;34(12):2246-2253. PMID: 31442329
11. Kremer, P., Laughlin, G., Shadyab, A., **Crandall, C.**, Masaki, K., Orchard, T., Snetselaar, L., LaCroix, A. Association between soft drink consumption and osteoporotic fractures among postmenopausal women: The Women´s Health Initiative, *Menopause,* 2019 26(11): 1234-1241. PMID: 31613830
12. Qaseem, A, Wilt, T., **Crandall, C.,** Hicks, L., Mustafa, R. Screening for Colorectal Cancer in Asymptomatic Average Risk Adults: A Guidance Statement from the American College of Physicians, *Ann Intern Med.* 2019 Nov 5;171(9):643-654. PMID: 31683290
13. Mori, T., **Crandall, C.J.,** Ganz, D.A. Cost-Effectiveness of Sequential Teriparatide/Alendronate versus Alendronate-only Strategies in High-risk Osteoporotic Women in the U.S.: Analyzing the Impact of Generic or Biosimilar Teriparatide, *JBMR Plus* 2019 November 13: 3(11): e10233. PMID: 31768491 PMCID: PMC6874180
14. **Crandall, C.J.**, Larson, J., Cauley, J.A., Schousboe, J.T., LaCroix, A.Z., Robbins, J.A., Watts, N.B., Ensrud, K.E. Do additional clinical risk factors improve the performance of Fracture Risk Assessment Tool (FRAX) Among Postmenopausal Women? Findings from the Women's Health Initiative Observational Study and Clinical Trials, *JBMR Plus*, 2019 Nov 30;3(12):e10239. doi: 10.1002/jbm4.10239. eCollection 2019 Dec. PMID: 31844827. PMCID: PMC6894725
15. **Crandall, C.J.**, Larson, J., Wright, N.C., Laddu, D., Stefanick, M., Kaunitz, A.M., Watts, N.B., Wactawski-Wende, J., Womack, C.R., Johnson, K.C., Carbone, L.D., Jackson, R.D., Ensrud, K.E. Does serial bone density measurement meaningfully improve incident fracture risk prediction in postmenopausal women? Results from the Women's Health Initiative Observational Study and Clinical Trials, JAMA Intern Med. 2020; 180 (9): 1232-1240, PMID: 32730575 PMCID: PMC7385675[1]
16. Conley RB, Adib G, Adler RA, Akesson, KE, Alexander, IM, Amenta, KC, Blank, RD, Brox, WT, Carmody, EE, Chapman-Novakofski, KC, Clarke, BL, Cody, KM, Cooper, C, **Crandall, CJ**, Dirschi, DR, Eagen, TJ, Elderkin, AL, Fujita, M, Greenspan, SL, Halbout, P, Hochberg, MC, Javaid, M., Jeray, KJ, Kearns, AE, King, T, Koinis, TF, Koontz, JS, Kuzma, M, Lindsey, C, Lorentzon, M, Lyritis, GP, Michaud, LB, Miciano, A, Morin, SN, Mujahid, N, Napoli, N, Olenginski, TP, Puzas, JE, Rizou, S, Rosen, CJ, Saag, K, Thompson, E., Tosi, L, Tracer, H, Khosla, S, Kiel, DP. Secondary Fracture Prevention: Consensus Clinical Recommendations From a Multistakeholder Coalition. Orthop Nurs. 2020;39(3):145-161. PMID: 32443087
17. Conley RB, Adib G, Adler RA, Akesson, KE, Alexander, IM, Amenta, KC, Blank, RD, Brox, WT, Carmody, EE, Chapman-Novakofski, KC, Clarke, BL, Cody, KM, Cooper, C, **Crandall, CJ**, Dirschi, DR, Eagen, TJ, Elderkin, AL, Fujita, M, Greenspan, SL, Halbout, P, Hochberg, MC, Javaid, M., Jeray, KJ, Kearns, AE, King, T, Koinis, TF, Koontz, JS, Kuzma, M, Lindsey, C, Lorentzon, M, Lyritis, GP, Michaud, LB, Miciano, A, Morin,

[1] Selected for New England Journal of Medicine Journal Watch General Medicine Sept. 15, 2020

SN, Mujahid, N, Napoli, N, Olenginski, TP, Puzas, JE, Rizou, S, Rosen, CJ, Saag, K, Thompson, E., Tosi, L, Tracer, H, Khosla, S, Kiel, DP Secondary Fracture Prevention: Consensus Clinical Recommendations from a Multistakeholder Coalition. J Orthop Trauma. 2020;34(4):e125-e141. PMID: 32195892

18. Northuis CA, Crandall CJ, Margolis KL, Diem SJ, Ensrud KE, Lakshminarayan K. Association between post-stroke disability and 5-year hip-fracture risk: The Women's Health Initiative. *J Stroke Cerebrovasc Dis*. 2020;29(8):104976. PMID: 32689623 PMCID: PMC7394038
19. Carbone, L., Vasan, S., Elam, R., Gupta, S., Tolaymat, O., **Crandall, C.,** Wactawski-Wende, J., Johnson, K.C. The Association of Methotrexate, Sulfasalazine and Hydroxychloroquine Use with Fracture in Postmenopausal Women with Rheumatoid Arthritis: Findings from The Women's Health Initiative, *JBMR Plus*, Vol. 4, No. 10, October 2020, e10393.
20. Harvey, N.C., Kanis, J.A., Liu, E., Cooper, C., Lorentzon, M., Bea, J.W., Cespedes Feliciano, E.M., Laddu, D.R., Schnatz, P.F., Shadyab, A.H., Stefanick, M.L., Wactawski-Wende, J., **Crandall, C.J.,** Johansson, H., McCloskey, E. Predictive value of DXA appendicular lean mass for incident fractures, falls and mortality, independent of prior falls, FRAX and BMD) Findings from the Women's Health Initiative (WHI), *J Bone Miner Res.* 2021 Jan 15. doi: 10.1002/jbmr.4239. Online ahead of print. PMID: 33450071.
21. Karlamangla, A.S., Binkley, N., **Crandall, C.J.** Psychosocial Life Histories and Biological Pathways to Bone Health. Oxford Handbooks Online, Oxford University Press, Eds. C.D. Ryff and R.F. Kreuger. Online Publication Date: Oct 2018 DOI: 10.1093/oxfordhb/9780190676384.013.17. Print Publication Date: Nov 2018
22. **Crandall, C.J.**, Ensrud, K.E. Who should be screened for osteoporosis? Page 1501-1510. Marcus And Feldman's Osteoporosis, 5th Edition, Eds David Dempster, Jane Cauley, Mary Bouxsein, Felicia Cosman, Elsevier Inc., 125 London Wall, London EC2Y 5AS, United Kingdom 2021
23. Karlamangla AS, Burnett-Bowie SM, **Crandall CJ.** Bone Health During the Menopause Transition and Beyond. Obstet Gynecol Clin North Am. 2018 Dec;45(4):695-708. doi: 10.1016/j.ogc.2018.07.012. Epub 2018 Oct 25. Review. PubMed PMID: 30401551; PubMed Central PMCID: PMC6226267.
24. **Crandall, C.J.,** Strong Bones, Strong Body, Women's Preventive Health Care, *Obstet Gynecol Clin N Am* 46 (2019) 541-552. PMID: 31378294
25. Ensrud, K.E., **Crandall, C.J.**, Bisphosphonates for Postmenopausal Osteoporosis, JAMA, 2019 Oct 17. [Epub ahead of print] PubMed PMID: 31621799
26. Leslie, W.D., **Crandall, C.J.**, Population-Based Osteoporosis Primary Prevention and Screening, *Curr Osteoporos, Rep.*, 2019 Dec;17(6):483-490. PubMed PMID: 31673933.
27. **Crandall, C.J.**, Ensrud, Osteoporosis Screening in Younger Postmenopausal Women. *JAMA* 2020;323(4):367-368. PMID 31917384
28. Cauley, J.A., **Crandall, C.J.**, The Women's Health Initiative: A landmark resource for skeletal research since 1992, J Bone Miner Res. 2020 Apr 14. [Epub ahead of print] PMID: 32286708.
29. Crandall, C.J. Can We Pave the Pathway to Fracture Prevention?, editorial regarding the NIH Pathways to Prevention Workshop on appropriate use of drug therapies for

osteoporotic fracture prevention, published online April 23, 2019, Annals of Internal Medicine, PMID:31009937

30. Ensrud, K.E., Crandall, C.J. In older postmenopausal women with osteopenia,zoledronate reduced fragility fractures at 6 years. Invited commentary, Ann Intern Med. 2019 Apr 16;170(8):JC42. doi: 10.7326/ACPJ201904160-042. PubMed PMID: 30986832

Thomas Cooney

Apr 02, 2021 22:38:31 EDT
American College of Physicians

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	Fiduciary Officer	Self	-
Official Title: Chair-elect, Board of Regents ***Compensation Type:*** Cash ***Annual Compensation:*** ***Additional Information:***	***Position Description:*** As above ***Start Date:*** 04/22/2020 ***End Date:*** 04/19/2021		
U.S. Department of Veterans Affairs	Employment Current Employment	Self	-
Title: Staff Physician ***Start Date:*** 08/08/1979 ***End Date:***	***Position Description:*** Attending physician, supervising residents and medical students ***Additional Information:***		

Certification

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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

Convey Global Disclosure System | AAMC

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

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

Name: Thomas G. Cooney MD MACP

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: diverticulitis; depression; osteoporosis; COVID-19

Within the past 3 years, have you or any household members published on any of the above topic 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?

☐ 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).

Bornstein SS, Mire RD, Barrett ED, Moyer DV, Cooney TG. The Collision of COVID-19 and the U.S. Health System Ann Intern Med. 2020; https://doi.org/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

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: hypertension; high blood pressure; CAD

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).

☑ 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).

☑ 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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Thomas G. Cooney MD MACP

Print Name

member:
C5C9D906-543B-4271-90AB-965533CBA5C9
2788D4B2-0000-4035-8764-7E57AA953734

Digitally signed by member:
C5C9D906-543B-4271-90AB-965533CBA5C9
2788D4B2-0000-4035-8764-7E57AA953734
Date: 2021.04.24 14:46:41 -07'00'

04/24/2021

Signature | Date

Jacob Cross

Apr 03, 2021 13:19:02 EDT
American College of Physicians

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

Summary of Interests

Company or Organization

Entity	Type	Interest Held By	Value
Jacob Cross	Employment Current Employment	Self	-
Title: President ***Start Date:*** 01/01/2012 ***End Date:***	***Position Description:*** President and CEO ***Additional Information:***		
Ochsner Health System	Consultant Current Employment	Self	-
Category: Consultant ***Compensation Type:*** Cash ***Additional Information:***	***Start Date:*** 04/01/2020 ***Annual Compensation:***	***End Date:***	

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

Convey Global Disclosure System | AAMC

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

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

Name: J. Thomas Cross, Jr., MD

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: diverticulitis; depression; osteoporosis; COVID-19

Within the past 3 years, have you or any household members published on any of the above topic 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?

☐ 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: hypertension; high blood pressure; CAD

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).

☑ 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).

☑ 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

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J. Thomas Cross, Jr., MD

Print Name

J. Thomas Cross, Jr., MD Digitally signed by J. Thomas Cross, Jr., MD DN: cn=J. Thomas Cross, Jr., MD, o, ou, email=jtcrossjr1961@gmail.com, c=US Date: 2021.04.12 07:45:16 -06'00'

4/12/2021

Signature Date

Nick Fitterman

Apr 04, 2021 17:21:43 EDT
American College of Physicians

Disclosure Purpose: Annual Governance Disclosure 2021-2022, CME Contributor, Annual Governance Disclosure 2020-21

Employment Information: Currently Employed

Summary of Interests

Company or Organization

Entity	Type	Interest Held By	Value
nick fitterman	Employment Current Employment	Self	-

Title: executive director Huntington Hospital
Start Date: 10/03/2018
End Date:
Position Description: executive director
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:

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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

Convey Global Disclosure System | AAMC

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

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

Name: Nick Fitterman

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: diverticulitis; depression; osteoporosis; COVID-19

Within the past 3 years, have you or any household members published on any of the above topic 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?

☐ 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: hypertension; high blood pressure; CAD

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).

☑ 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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☑ No

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

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Nick Fitterman

Print Name

Nick Fitterman Digitally signed by Nick Fitterman Date: 2021.04.19 17:34:14 -04'00' 4/19/2021

Signature Date

Lauri Hicks

Apr 16, 2021 09:01:16 EDT
American College of Physicians

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	Employment Current Employment	Self	-
Title: Director, Office of Antibiotic Stewardship ***Start Date:*** 07/15/2007 ***End Date:***	***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. ***Additional Information:***		
GI Specialists of Georgia	Employment	Spouse/Partner	-
Title: Physician ***Start Date:*** 09/01/2010 ***End Date:***	***Position Description:*** Patient care ***Additional Information:***		
Society for Healthcare Epidemiology of America	Other	Self	-
Category: Other ***Compensation Type:*** Unpaid ***Additional Information:*** Board Member, Councilor	***Start Date:*** 01/01/2021 ***Annual Compensation:***	***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

Convey Global Disclosure System | AAMC

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.

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Topic Areas: diverticulitis, depression, osteoporosis

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).

This in in the Convey system, but my husband is a gastroenterologist and a partner in GI Georgia, so he treats patients with diverticulitis.

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

Acknowledgements and Attestations

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Lauri Hicks

Print Name

Lauri Hicks -S7 Digitally signed by Lauri Hicks -S7 Date: 2021.04.13 13:51:03 -04'00' 04/13/21

Signature Date

Jennifer Lin

Apr 14, 2021 19:18:50 EDT
American College of Physicians

Disclosure Purpose: 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: research physician, investigator
Start Date: 11/28/2005
End Date:
Position Description: investigator, center for health research, Kaiser Permanente NW
Additional Information: also practicing NW Permanente general internal medicine physician since 2011

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

Convey Global Disclosure System | AAMC

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 S. 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.

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Topic Areas: diverticulitis, depression, osteoporosis

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 have not authored any publications on depression but I am director of an EPC that does systematic reviews on screening and treatment of depression, anxiety and suicidal ideation and thus involved in writing proposals and securing funding related to these topics.

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

Acknowledgements and Attestations

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Jennifer S. Lin

Print Name

linjes Digitally signed by linjes Date: 2021.04.14 15:51:20 -07'00' 4/14/2021

Signature Date

Michael Maroto

Aug 12, 2020 08:51:14 EDT
American College of Physicians

Disclosure Purpose: Annual Governance Disclosure 2020-21, Annual Governance Disclosure 2021-2022

Employment Information: Currently Retired/Unemployed

Summary of Interests

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

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

Convey Global Disclosure System | AAMC

Reem Mustafa

Jul 28, 2020 17:01:37 EDT
American College of Physicians

Disclosure Purpose: Annual Governance Disclosure 2020-21., Annual Governance Disclosure 2021-2022

Employment Information: Currently Retired/Unemployed

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:*		
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:*		
University of Kansas Medical Center	Employment	Self	-
Title: Associate Professor of Internal Medicine *Start Date:* 02/28/2017 *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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Other aspects of my background or present interests not addressed above that might be perceived as affecting my objectivity or independence

Convey Global Disclosure System | AAMC

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.

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Topic Areas: diverticulitis, depression, osteoporosis

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

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Reem Mustafa

Print Name

Reem Mustafa Digitally signed by Reem Mustafa Date: 2021.04.16 12:57:46 -05'00' April, 16, 2021

Signature Date

Adam Obley

Apr 02, 2021 18:27:26 EDT
American College of Physicians

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

Summary of Interests

Company or Organization

Entity	Type	Interest Held By	Value
Adventist Health Portland	Other	Self	$2,500.00

Category: Other
Compensation Type: Cash
Start Date: 09/26/2018 *End Date:* 09/26/2018
Annual Compensation:

Year	Amount	Type
2018	$2,500.00	Actual

Additional Information: Speaking honorarium

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:*
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
Annual 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:* 06/01/2019
Estimated Value: $10,000.00
Valuation Date: 12/26/2019
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:*
Annual 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:*
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:*
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
Department of Clinical Policy
Disclosure of Interests: Supplemental Questions and Attestation

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

Name: Adam Obley

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: diverticulitis; depression; osteoporosis; COVID-19

Within the past 3 years, have you or any household members published on any of the above topic 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?

☐ 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).

Wilt TJ, Kaka AS, MacDonald R, Greer N, Obley A, Duan-Porter W. Remdesivir for Adults With COVID-19 : A Living Systematic Review for American College of Physicians Practice Points. *Ann Intern Med*. 2021;174(2):209-220. doi:10.7326/M20-5752

Qaseem A, Etxeandia-Ikobaltzeta I, Yost J, et al. Use of N95, Surgical, and Cloth Masks to Prevent COVID-19 in Health Care and Community Settings: Living Practice Points From the American College of Physicians (Version 1). *Ann Intern Med*. 2020;173(8):642-649. doi:10.7326/M20-3234

Qaseem A, Yost J, Etxeandia-Ikobaltzeta I, et al. 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. *Ann Intern Med*. 2020;173(2):W48-W51. doi:10.7326/M20-3862

Kaka AS, MacDonald R, Greer N, et al. Major Update: Remdesivir for Adults With COVID-19 : A Living Systematic Review and Meta-analysis for the American College of Physicians Practice Points [published online ahead of print, 2021 Feb 9] [published correction appears in Ann Intern Med. 2021 Mar 16;:]. *Ann Intern Med*. 2021;M20-8148. doi:10.7326/M20-8148

Qaseem A, Yost J, Etxeandia-Ikobaltzeta I, et al. What Is the Antibody Response and Role in Conferring Natural Immunity After SARS-CoV-2 Infection? Rapid, Living Practice Points From the American College of Physicians (Version 1) [published online ahead of print, 2021 Mar 16]. *Ann Intern Med*. 2021;M20-7569. doi:10.7326/M20-7569

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: hypertension; high blood pressure; CAD

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).

☐ 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)

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

☐ Yes (please provide additional details below).

☐ 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.

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.

Adam J. Obley

Print Name

Adam J. Obley 564252 Digitally signed by Adam J. Obley 564252
Date: 2021.04.19 09:01:00 -07'00'

Signature Date

Doug Owens

Apr 27, 2021 00:44:12 EDT
American College of Physicians

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

Intellectual Property

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

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: Douglas Owens

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: diverticulitis, depression, osteoporosis

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 was on the USPSTF.

US Preventive Services Task Force, Curry SJ, Krist AH, Owens DK, Barry MJ, Caughey AB, Davidson KW, Doubeni CA, Epling JW Jr., Grossman DC, Kemper AR, Kubik M, Landefeld CS, Mangione CM, Silverstein M, Simon MA, Tseng CW, Wong JB. Interventions to prevent perinatal depression: US Preventive Services Task Force Recommendation Statement. JAMA. 2019 Feb 12;321(6):580-587. doi: 10.1001/jama.2019.0007. PMID: 30747971.

US Preventive Services Task Force, Curry SJ, Krist AH, Owens DK, Barry MJ, Caughey

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.

Douglas K Owens

Print Name

Douglas Kent Owens
2021.04.26 11:21:15 -07'00'

Signature Date

Jeffrey Tice

Apr 14, 2021 12:49:40 EDT
American College of Physicians

Disclosure Purpose: Annual Governance Disclosure 2021-2022 **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:*** 09/27/2011 ***Contract 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:*** 01/01/2018 ***Contract End Date:***	***Recipient Type:*** Institution ***Grant / Contract Purpose:*** Research ***Grant / Contract Valuation Date:*** 05/22/2019 ***Additional Information:***		
Irving Street Pet Hospital	Other	Dependent Child	-
Category: Other ***Compensation Type:*** Cash ***Additional Information:***	***Start Date:*** 08/01/2018 ***End Date:*** 06/14/2020 ***Annual Compensation:***		
National MS Society	Other	Self	-
Category: Other ***Compensation Type:*** Unpaid ***Additional Information:***	***Start Date:*** 01/01/2012 ***End Date:*** ***Annual 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:*** 09/15/2015 ***Contract End Date:***		
Society of General Internal Medicine	Other	Self	-
Category: Other ***Compensation Type:*** Unpaid ***Additional Information:***	***Start Date:*** 01/01/2017 ***End Date:*** ***Annual Compensation:***		
University of California San Francisco	Employment Current Employment	Self	-
Title: Professor of Medicine ***Start Date:*** 07/01/1999 ***End Date:***	***Position Description:*** Faculty ***Additional Information:*** Primary job		
University of California San Francisco	Other	Self	$1,000.00
Category: Other ***Compensation Type:*** Cash ***Additional Information:***	***Start Date:*** 07/01/1999 ***End Date:*** ***Annual Compensation:***		

Year	Amount	Type
2019	$1,000.00	Estimated

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

Convey
Global Disclosure System
AAMC

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: diverticulitis; depression; osteoporosis

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 give UCSF CME talks on osteoporosis about once a year.

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

Acknowledgements and Attestations

By signing this form,

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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.

Jeffrey A. Tice, MD

Print Name

4/14/2021

Signature Date

Janice Tufte

Apr 05, 2021 09:40:07 EDT
American College of Physicians

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

Summary of Interests

Company or Organization

Entity	Type	Interest Held By	Value
Academy Health	Consultant	Self	-

Category: Consultant
Compensation Type: Unpaid
Additional Information: Developing Guidance with Learning Health System Stakeholders for Evaluation of COVID19 projects for national Foundations future funding of projects
Start Date: 03/30/2020
End Date:
Annual Compensation:

AcademyHealth	Travel	Self	$5,000.00

Location(s): Seattle to DC
Estimated Value: $5,000.00
Purpose: Meetings & Conferences
Travel Start Date: 02/06/2018
Travel End Date: 02/24/2020
Valuation Date: 01/23/2020
Additional Information: Attended Health Data Palooza, Annual Research Meeting and Project Paradigm co sponsored and 2xs listed as RWJ conferences and Meetings

Acumen LLC	Travel	Self	$380.00

Location(s): Seattle to DC
Estimated Value: $380.00
Purpose: PCMP CMS Measures
Travel Start Date: 02/05/2020
Travel End Date: 02/08/2020
Valuation Date: 01/23/2020
Additional Information: Physician Cost Measure Patient Relationship Code TEP Patient Panel member

AHRQ	Consultant	Self	-

Category: Consultant
Compensation Type: Unpaid
Additional Information: https://digital.ahrq.gov/acts ACTS AHRQ evidence based care transforming supports stakeholder
Start Date: 04/05/2020
End Date:
Annual Compensation:

Boston Medical Center	Other	Self	$500.00

Category: Other
Compensation Type: Cash
Start Date: 09/18/2018
End Date: 12/19/2019
Annual Compensation:

Year	Amount	Type
2018	$500.00	Estimated

Additional Information: $500 stipend Open Notes BIDMC presenting PFCC conference and $750 total for Patient Advisory Position stipends

Camden Coalition	Other	Self	$2,300.00

Category: Other
Compensation Type: Cash
Start Date: 01/01/2018
End Date:
Annual Compensation:

Year	Amount	Type
2020	$1,800.00	Estimated
2019	$500.00	Actual

Additional Information: Consumer Scholar work and Travel for Putting Care at the Center conference

Cochrane Consumers	Consultant	Self	-

Category: Consultant
Compensation Type: Unpaid
Additional Information: Reviewing guidance materials for consumer involvement in reviews for crisis management
Start Date: 04/11/2020
End Date:
Annual Compensation:

Hassanah Consulting	Consultant	Self	$17,000.00

Category: Consultant
Compensation Type: Cash
Start Date: 01/01/2018
End Date:
Annual Compensation:

Year	Amount	Type
2019	$9,000.00	Actual
2018	$8,000.00	Estimated

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	-

Category: Consultant
Compensation Type: Other, Cash
Annual Compensation:
Start Date: 01/01/2021
End Date: 06/01/2021
Other Compensation: 1000.
Additional Information: Honorariums work with HCHN

Healthcare for the Homeless Seattle King County	Other	Self	$4,700.00

Category: Other
Compensation Type: Cash
Start Date: 01/01/2018
End Date:
Annual Compensation:

Year	Amount	Type
2020	$2,500.00	Estimated
2019	$2,200.00	Estimated

Additional Information: Consumer Representative advisor

Humana Foundation	Travel	Self	$500.00

Location(s): Seattle to DC
Estimated Value: $500.00
Purpose: Food Insecurity Brochure devlopment
Travel Start Date: 08/01/2019
Travel End Date: 08/03/2019
Valuation Date: 01/23/2020
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
Travel End Date: 12/09/2019
Valuation Date: 01/23/2020
Additional Information: IHI Forum Scholarship as a Patient Advisor

Infectious Disease Society of America	Consultant	Self	$0.00

Category: Consultant
Compensation Type: Unpaid
Start Date: 09/24/2021
End Date:
Annual Compensation:

Year	Amount	Type
2020	$0.00	Actual

Additional Information: The Guideline TEP had not been initiated when expected to

ITHS University of Washington	Other	Self	-

Category: Other
Compensation Type: Unpaid
Additional Information: COVID 19 Research Prioritization Public Reviewer https://www.iths.org/iths-covid-19-research-resources/covid-19-research-portal/
Start Date: 03/20/2020
End Date:
Annual Compensation:

Ludwig Boltzmann Institut für Experimentelle und Klinische Traumatologie	Consultant	Self	-

Category: Consultant
Compensation Type: Unpaid
Additional Information:
Start Date: 06/01/2020
End Date:
Annual Compensation:

Mathematica	Other	Self	$200.00

Category: Other
Compensation Type: Cash
Start Date: 01/01/2016
End Date: 12/31/2018
Annual Compensation:

Year	Amount	Type
2018	$200.00	Actual

Additional Information:

McMaster University	Consultant	Self	-

Category: Consultant
Compensation Type: Unpaid
Additional Information: Public stakeholder on COVID-END Horizon Scan panel looking at Emerging Issues and Long Covid 19 https://www.mcmasterforum.org/networks/covid-end/resources-to-support-decision-makers/horizon-scans-for-emerging-issues
Start Date: 10/15/2020
End Date:
Annual Compensation:

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:
Annual Compensation:

National Institute on Aging	Other	Self	$750.00

Category: Other
Compensation Type: Cash
Start Date: 06/01/2019
End Date:
Annual Compensation:

Year	Amount	Type
2020	$500.00	Actual
2019	$250.00	Actual

Additional Information: Aging Initiative Advisor

National Quality Forum | Consultant Current Employment | Self | -

Category: Consultant
Compensation Type: Unpaid
Additional Information: Serving on NQF MAP CC Measurement
http://www.qualityforum.org/Project_Pages/MAP_Coordinating_Committee.aspx
Start Date: 09/15/2020
End Date:
Annual Compensation:

National Quality Forum | Consultant Current Employment | Self | -

Category: Consultant
Compensation Type: Unpaid
Additional Information: NQF Risk Adjustment Guidance Committee
https://www.qualityforum.org/Risk_Adjustment_Guidance.aspx
Start Date: 11/10/2020
End Date:
Annual Compensation:

National Quality Forum | Other | Self | -

Category: Other
Compensation Type: Other
Annual Compensation:
Start Date: 08/30/2020
End Date:
Other Compensation: Stipend
Additional Information:

National Quality Forum | Consultant | Self | -

Category: Consultant
Compensation Type: Cash
Additional Information: 2,000 for serving on MAP CC and Risk Adjustment
Start Date: 01/01/2021
End Date: 12/31/2021
Annual Compensation:

National Quality Forum | Travel | Self | $1,000.00

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 projcts

Robert Wood Johnson Foundation | Consultant | Self | $1,000.00

Category: Consultant
Compensation Type: Cash
Start Date: 02/01/2021
End Date: 09/30/2021
Annual Compensation:

Year	Amount	Type
2021	$1,000.00	Actual

Additional Information: Convening project with Dana Lewis and John Harlow

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
Travel End Date: 06/28/2021
Valuation Date: 01/23/2020
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
Travel End Date: 09/10/2019
Valuation Date: 01/23/2020
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:
Annual Compensation:

University of Washington SORCE | Consultant | Self | -

Category: Consultant
Compensation Type: Cash
Additional Information: COSMID Study Patient Advisory Co Chair Executive and Cliniucal Committee
Start Date: 01/01/2021
End Date: 12/31/2021
Annual Compensation:

University of Washington SORCE | Other | Self | $2,475.00

Category: Other
Compensation Type: Cash

Start Date: 01/01/2017 *End Date:*
Annual Compensation:

Year	Amount	Type
2020	$900.00	Estimated
2019	$1,225.00	Actual
2018	$350.00	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)

Intellectual Property

Type	Is Licensed	Interest Held By	Value
Other Intellectual Property - https://nam.edu/patient-and-family-engaged-care- ...	-	Self	-
Description: https://nam.edu/patient-and-family-engaged-care-an-essential-element-of-health-equity/ paper *Yearly Income:*	*Income Source:* 0 *Additional Information:* https://nam.edu/patient-and-family-engaged-care-an-essential-element-of-health-equity/		
Other Intellectual Property - IHI Institute for Health Improvement Developed ...	-	Self	-
Description: IHI Institute for Health Improvement Developed out webinars for Goals Driven Care / Patient Safety *Yearly Income:*	*Income Source:* 1000 *Additional Information:* Honorarium though MEF Doha, Qatar conference was cancelled		
Other Intellectual Property - Food Insecurity Brochure to accompany NQF measur	-	Self	-
Description: Food Insecurity Brochure to accompany NQF measures *Yearly Income:*	*Income Source:* NQF/ Human travel only *Additional Information:* https://store.qualityforum.org/products/food-insecurity-and-health-overcoming-food-insecurity-through-healthcare-based-interventions document I am included in as a co author		
Other Intellectual Property - Building out Core Competencies for Complex Care ...	-	Self	-
Description: Building out Core Competencies for Complex Care meetings and build out of documents *Yearly Income:*	*Income Source:* Camden Coalition Travel *Additional Information:* https://www.nationalcomplex.care/our-work/blueprint-for-complex-care/core-competencies-working-group/ A member		
Other Intellectual Property - Mitre HealthLab	-	Self	-
Description: Mitre HealthLab *Yearly Income:*	*Income Source:* *Additional Information:* Webinar provided to Mitre HealthLab on COVID19 Response and Vulnerable Populations King County WA https://janicetufte.com/covid19-vulnerable		
Other Intellectual Property - Peer Reviewer of Cochrane Protocol Musculoskelet ...	-	Self	-
Description: Peer Reviewer of Cochrane Protocol Musculoskeletal Group for Systematic Review *Yearly Income:*	*Income Source:* none *Additional Information:*		
Other Intellectual Property - Restoring the Story and Creating a Valuable Clin ...	-	Self	-
Description: Restoring the Story and Creating a Valuable Clinical Note *Yearly Income:*	*Income Source:* 0 *Additional Information:* https://www.acpjournals.org/doi/10.7326/M20-0934		
Other Intellectual Property - Paradigm Project RWJ Academy Health	-	Self	-
Description: Paradigm Project RWJ Academy Health *Yearly Income:*	*Income Source:* Academy Health for travel *Additional Information:* https://www.academyhealth.org/ParadigmProject I am serving on Design Team 3 B		
Other Intellectual Property - MuSE Systematic Review Paper	-	Self	-
Description: MuSE Systematic Review Paper *Yearly Income:*	*Income Source:* *Additional Information:* https://systematicreviewsjournal.biomedcentral.com/articles/10.1186/s13643-020-1272-5		
Other Intellectual Property - Development of Communication Resource Guide for ...	-	Self	-
Description: Development of Communication Resource Guide for Low income Individuals, Internet and Phone services *Yearly Income:*	*Income Source:* none *Additional Information:* Development of communication resources available for low income individuals compiled for COVID19 telehealth and more for WA State Health Care Authority and other organizations		
Other Intellectual Property - Low Value Research Work Group AA/Latinx Donaghue ...	-	Self	-
Description: Low Value Research Work Group AA/Latinx Donaghue Foundation *Yearly Income:*	*Income Source:* Travel for meeting		

Additional Information: https://www.academyhealth.org/blog/2019-12/focus-patients-key-reducing-low-value-care Continuation of this work

Other Intellectual Property - MuSE Systematic Review Protocol and Reviews	-	Self	-

Description: MuSE Systematic Review Protocol and Reviews
Yearly Income:
Income Source: 0
Additional Information: Under Development

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

Convey Global Disclosure System | AAMC

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 E 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: diverticulitis, depression, osteoporosis

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).

Yes I serve on three committtees for The Comparison of Surgery and Medicine on the Impact of Diverticulitis (COSMID) as Co Chair of the Patient Advisory, and a member of both the Clinical and Executive Committee.

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

Acknowledgements and Attestations

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Janice E Tufte

Print Name

Janice E Tufte

Signature

4/12/2021

Date

John Williams

Apr 05, 2021 06:18:03 EDT
American College of Physicians

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

Summary of Interests

Company or Organization

Entity	Type	Interest Held By	Value
Agency for Health Care Policy and Research	Grant / Contract	Self	$4,500.00

Recipient Name: Gillian Sanders
Recipient Type: Institution
Grant / Contract Description: Evidence Based Practice Center, Associate Editor
Grant / Contract Purpose: Research
Grant / Contract Amount: $4,500.00
Grant / Contract Valuation Date: 03/15/2019
Contract Start Date: 10/01/2014 ***Contract End Date:*** 06/30/2020
Additional Information:

ArcherDx	Other	Spouse/Partner	-

Category: Other
Start Date: 07/01/2018 ***End Date:*** 12/31/2018
Compensation Type: Cash
Annual Compensation:
Additional Information:

Associate for Molecular Pathology	Other	Spouse/Partner	-

Category: Other
Start Date: 09/01/1995 ***End Date:***
Compensation Type: Cash
Annual Compensation:
Additional Information:

Debbie's Dream Foundation	Other	Spouse/Partner	$500.00

Category: Other
Start Date: 05/13/2018 ***End Date:*** 05/13/2018
Compensation Type: Cash
Annual Compensation:

Year	Amount	Type
2018	$500.00	Estimated

Additional Information: Honorarium for a scientific presentation

Duke University	Employment Current Employment	Self	-

Title: Professor of Medicine and Psychiatry
Position Description: Faculty
Start Date: 07/01/2001 ***End Date:***
Additional Information:

DurhamVeterans Affairs Medical Center	Employment Current Employment	Self	-

Title: Staff Physician
Position Description: Physician and HSR&D Researcher
Start Date: 07/01/2001 ***End Date:***
Additional Information:

General Electric	Stock	Self	$0.00

Percentage Ownership: 0
Estimated Value: $0.00
Valuation Date:
Divestment Date: 12/26/2018
Additional Information:

Healthwise	Other	Self	-

Category: Other
Start Date: 05/25/2017 ***End Date:*** 06/01/2019
Compensation Type: Cash
Annual Compensation:
Additional Information:

HSR&D, U.S.Department of Veterans Affairs	Grant / Contract	Self	$825,000.00

Recipient Name: John W. Williams Jr
Recipient Type: Individual
Grant / Contract Description: Evidence Synthesis Program
Grant / Contract Purpose: Research
Grant / Contract Amount: $825,000.00
Grant / Contract Valuation Date: 03/15/2019
Contract Start Date: 10/01/2017 ***Contract End Date:*** 09/30/2020
Additional Information:

HSR&D, U.S.Department of Veterans Affairs	Other	Self	-

Category: Other
Start Date: 07/08/1995 ***End Date:*** 05/01/2018
Compensation Type: Unpaid
Annual Compensation:
Additional Information:

JWW Scientific Consulting,LLC	Other Business Ownership	Self	$33,375.00

Form of Business Description: Provide Medical/Scientific editing and research methods education
Ownership Category: Sole Proprietor
Percentage Ownership: 99
Partnership Category: LLC

Investment Amount Valuation Date:

Annual Compensation:

Year	Amount	Type
2020	$1,250.00	Actual
2019	$13,625.00	Actual
2018	$18,500.00	Actual

Additional Information: Business dissolved 12/2020

National Institutes of Health | Grant / Contract | Self | $45,000.00

Recipient Name: Duke University
Grant / Contract Description: Clinical Translational Science Award
Grant / Contract Amount: $45,000.00
Contract Start Date: 10/01/2013 *Contract End Date:* 09/30/2018
Recipient Type: Institution
Grant / Contract Purpose: Research
Grant / Contract Valuation Date: 03/15/2019
Additional Information: JWW Salary support only

Oak Ridge Associated Universities | Employment Current Employment | Self | -

Title: Consultant
Start Date: 03/12/2015 *End Date:*
Position Description: Consultant to CMMI for CPC+ Program: Behavioral health integration
Additional Information:

Patient Centered Outcomes Research Institute | Grant / Contract | Self | $46,899.00

Recipient Name: John W Williams Jr
Grant / Contract Description: Subcontract from Oregon Health Sciences Center; Associate Editor for PCORI
Grant / Contract Valuation Date: 12/26/2019
Additional Information: Total Costs - 2020
Recipient Type: Individual
Grant / Contract Purpose: Research
Grant / Contract Amount: $46,899.00
Contract Start Date: 06/08/2015 *Contract End Date:* 12/31/2020

Promega | Other | Spouse/Partner | -

Category: Other
Compensation Type: Cash
Additional Information:
Start Date: 06/01/2018 *End Date:* 12/31/2018
Annual Compensation:

Siemens | Stock | Self | $0.00

Percentage Ownership: 0
Valuation Date:
Additional Information:
Estimated Value: $0.00
Divestment Date: 03/15/2019

Tiantan Hospital | Other | Self | $2,500.00

Category: Other
Compensation Type: Cash
Start Date: 12/12/2019 *End Date:* 12/12/2019
Annual Compensation:

Year	Amount	Type
2019	$2,500.00	Actual

Additional Information: Honoraria for teaching a research methods workshop

University of Washington | Data And Safety Monitoring | Self | $500.00

Category: Data And Safety Monitoring
Compensation Type: Cash
Start Date: 06/22/2016 *End Date:* 12/01/2020
Annual Compensation:

Year	Amount	Type
2019	$500.00	Actual

Additional Information:

Intellectual Property

Type	Is Licensed	Interest Held By	Value
Other Intellectual Property - Chapter in UpToDate (Depression Screening)	-	Self	$935.00

Description: Chapter in UpToDate (Depression Screening)
Yearly Income:

Amount	Type	Year	Payment Receipt
$935.00	Actual	2018	Direct Payment

Income Source: Wolters Klewer
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

Convey
Global Disclosure System
AAMC

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: John W Williams Jr

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: diverticulitis, depression, osteoporosis

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 receive royalties for an UpToDate chapter "Screening for Depression in Adults"

I receive consultant income from ORAU to served as a consultant to CMMI on behavioral health integration for the CPC+ program.

Bradley W, Williams JW Jr (Discussant), Boaz J. Behavioral Health Integration Episode 1: Identifying Patients for Behavioral Health Services. Center for Medicare and Medicaid – Comprehensive Primary Care Plus Program. Podcast. November 2020.

Williams JW Jr (Discussant), Bradley W, Boaz J. Behavioral Health Integration Episode

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

Acknowledgements and Attestations

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John W Williams Jr

Print Name

John W Williams Jr Digitally signed by John W Williams Jr Date: 2021.04.13 07:39:58 -04'00' 4/13/2021

Signature Date

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

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

Name: Raymond Haeme

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: diverticulitis; depression; osteoporosis; COVID-19

Within the past 3 years, have you or any household members published on any of the above topic 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?

☐ 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.

- *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: hypertension; high blood pressure; CAD

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).

☐ 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).

☐ 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

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Raymond Haeme

Print Name

Raymond A Haeme Digitally signed by Raymond A Haeme Date: 2021.04.22 11:24:55 -04'00' 4/22/2021

Signature Date

Billy Oglesby

Apr 13, 2021 11:53:11 EDT
American College of Physicians

Disclosure Purpose: Contractor/Guest Annual Disclosure 2021 - 22

Employment Information: Currently Employed

Summary of Interests

Company or Organization

Entity	Type	Interest Held By	Value
Association for Prevention Teaching and Research	Fiduciary Officer	Self	-
Official Title: President ***Compensation Type:*** Unpaid ***Annual Compensation:*** ***Additional Information:***	***Position Description:*** Elected president of this professional organization. ***Start Date:*** 03/01/2020 ***End Date:*** 03/01/2022		
Community Health Systems	Stock	Self	$5,446.00
Percentage Ownership: 0 ***Valuation Date:*** 04/13/2021 ***Additional Information:***	***Estimated Value:*** $5,446.00 ***Divestment Date:***		
School of Arts and Sciences, University of Pennsylvania	Employment	Spouse/Partner	-
Title: Lecturer ***Start Date:*** 01/01/2019 ***End Date:***	***Position Description:*** Part-time adjunct course instructor. ***Additional Information:***		
Thomas Jefferson University	Employment Current Employment	Self	-
Title: Interim Dean, Jefferson College of Population Health ***Start Date:*** 07/01/2019 ***End Date:***	***Position Description:*** Chief academic and executive officer of college and member of the University's academic leadership team. ***Additional Information:***		
Tivity Health	Stock	Self	$914.00
Percentage Ownership: 0 ***Valuation Date:*** 04/13/2021 ***Additional Information:***	***Estimated Value:*** $914.00 ***Divestment Date:***		
University of Alabama at Birmingham	Consultant	Self	-
Category: Consultant ***Compensation Type:*** Cash ***Additional Information:*** Taught a course as an adjunct professor.	***Start Date:*** 05/01/2019 ***End Date:*** 06/01/2019 ***Annual Compensation:***		

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

Convey Global Disclosure System | AAMC

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: Willie H. Oglesby

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: diverticulitis, depression, osteoporosis

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

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Willie H. Oglesby
Print Name

Signature 4/13/21 Date

James Pantelas

Apr 08, 2021 12:09:28 EDT
American College of Physicians

Disclosure Purpose: Contractor/Guest Annual Disclosure 2021 - 22

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:*
Annual Compensation:

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:*
Annual Compensation:

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

Certification

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Convey Global Disclosure System | AAMC

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: James Pantelas

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: diverticulitis, depression, osteoporosis

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

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James Pantelas

Print Name

Signature

May 4, 2021

Date

Missy Smith

Jan 26, 2020 17:03:13 EST
American College of Physicians

Disclosure Purpose: Annual Governance Disclosure 2020, Contractor/Guest Annual Disclosure 2020 - 21

Employment Information: Currently Retired/Unemployed

Summary of Interests

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

Additional Questions:

1. **Please specify any additional information which you consider relevant to this disclosure.**
2. **ACP requires your annual affirmation to abide by its Disclosure of Interests and Management of Conflicts Policy, Non-Disclosure Agreement, Intellectual Property Policy, and Anti-Harassment Policy *if* you're submitting your disclosures to ACP as a member of an ACP governance group or as College staff, as part of ACP's annual disclosure process.**
   a. **Are you submitting your disclosures to ACP as a member of one of the following groups:**
      - **ACP board, committee, council, task force, and/or other governance group?**
      - **Chapter Council or other Chapter leadership role?**
      - **National or chapter staff?**
      - **Annals of Internal Medicine editorial staff?**
      - **Other (meeting guests, contractors, authors, etc.)**

   Yes.

   i. **I, the undersigned, acknowledge I have read and agree to abide by the American College of Physician's Disclosure of Interests and Management of Conflicts Policy.**

      Yes

   ii. **I, the undersigned, enter into the Non-Disclosure Agreement between myself and the American College of Physicians, which governs the disclosure and furnishing of ACP's members of the Board of Regents, Board of Governors, Committees, Councils, Governors-elect and Chapter Personnel in any such Work Group of ACP, with information developed for ACP, deemed "Proprietary Information."**

      Yes

   iii. **I, the undersigned, intending to be legally bound, hereby declare and agree to terms of participation in the ACP Group activities of ACP as specified in the ACP Intellectual Property Policy.**

      Yes

   iv. **I, the undersigned, acknowledge I have read and agree to abide by the American College of Physician's Anti-Harassment Policy.**

      Yes

   You are not disclosing any interests to this organization.

Certification

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Convey Global Disclosure System | AAMC

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: Melissa Carson Smith

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: diverticulitis; depression; osteoporosis

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 co-chair the Patient and Family Action Committee for the Pediatric Acute Care Cardiology Collaborative (PAC3). Specific interest of the group as it relates to the ACP topics includes promoting patient and family emotional health and resilience.

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

Acknowledgements and Attestations

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- 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.

Melissa Carson Smith

Print Name

MCSmith 4/12/21

Signature Date

Scanned with CamScanner

Lelis Vernon

Apr 09, 2021 12:35:04 EDT
American College of Physicians

Disclosure Purpose: Contractor/Guest Annual Disclosure 2021 - 22

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:

- 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

Convey
Global Disclosure System
AAMC

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: LELIS BAUZÁ VERNON

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: *diverticulitis; depression; osteoporosis*

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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- 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.

Lelis Borza Vernon

Print Name

Signature

04/20/2021

Date

George Abraham

Apr 05, 2021 08:28:29 EDT
American College of Physicians

Disclosure Purpose: Annual Governance Disclosure 2021-2022, 2020 Annual Meeting Faculty Disclosures, Planning Committee

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: Partners in Internal Medicine, PC ***Start Date:*** 11/01/2004 ***End Date:***	***Position Description:*** President/Attending Physician ***Additional Information:*** Self-employed for practice setting		
Partners in Internal Medicine, PC,PC	Employment Current Employment	Self	-
Title: President ***Start Date:*** 11/01/2004 ***End Date:***	***Position Description:*** Physician in independent practice ***Additional Information:*** Self and spouse are employes (self-employed)		

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

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

Name: George M. Abraham, MD, MPH, FACP, FIDSA

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: diverticulitis; depression; osteoporosis; COVID-19

Within the past 3 years, have you or any household members published on any of the above topic 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?

☐ 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).

Only publications are thru the SMPC of ACP

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.

- *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: hypertension; high blood pressure; CAD

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).

☑ 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).

☑ 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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George M. Abraham

Print Name

George M. Abraham, MD, MPH, FACP, FIDSA

Digitally signed by George M. Abraham, MD, MPH, FACP, FIDSA
Date: 2021.04.17 17:39:03 -04'00'

Signature Date

Laura Baldwin

Jan 02, 2020 11:44:34 EST
American College of Physicians

Disclosure Purpose: Annual Staff Disclosure 2019

Summary of Financial Interests

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

Additional Information:

1. **Please specify any additional information which you consider relevant to this disclosure.**
2. **ACP requires your annual affirmation to abide by its Disclosure of Interests and Management of Conflicts Policy, Non-Disclosure Agreement, Intellectual Property Policy, and Anti-Harassment Policy *if* you're submitting your disclosures to ACP as a member of an ACP governance group or as College staff, as part of ACP's annual disclosure process.**
   a. **Are you submitting your disclosures to ACP as a member of one of the following groups:**
      - **ACP board, committee, council, task force, and/or other governance group?**
      - **Chapter Council or other Chapter leadership role?**
      - **National or chapter staff?**
      - **Annals of Internal Medicine editorial staff?**
      - **Other (meeting guests, contractors, authors, etc.)**

      Yes.

      i. **I, the undersigned, acknowledge I have read and agree to abide by the American College of Physician's Disclosure of Interests and Management of Conflicts Policy.**

         Yes

      ii. **I, the undersigned, enter into the Non-Disclosure Agreement between myself and the American College of Physicians, which governs the disclosure and furnishing of ACP's members of the Board of Regents, Board of Governors, Committees, Councils, Governors-elect and Chapter Personnel in any such Work Group of ACP, with information developed for ACP, deemed "Proprietary Information."**

         Yes

      iii. **I, the undersigned, intending to be legally bound, hereby declare and agree to terms of participation in the ACP Group activities of ACP as specified in the ACP Intellectual Property Policy.**

         Yes

      iv. **I, the undersigned, acknowledge I have read and agree to abide by the American College of Physician's Anti-Harassment Policy.**

         Yes

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

Convey
Global Disclosure System
AAMC

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

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.

Laura Baldiwn

Print Name

Laura Baldwin 4/19/21

Signature Date

Wayne Bylsma

Apr 08, 2021 14:30:39 EDT
American College of Physicians

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

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

Convey Global Disclosure System | AAMC

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

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

Name: Wayne H Bylsma

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: diverticulitis; depression; osteoporosis; COVID-19

Within the past 3 years, have you or any household members published on any of the above topic 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?

☐ 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.

- *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: hypertension; high blood pressure; CAD

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).

☑ 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).

☑ 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

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Wayne H Bylsma

Print Name

Wayne H. Bylsma Digitally signed by Wayne H. Bylsma Date: 2021.04.18 10:19:47 -04'00' 04.18.2021

Signature Date

Kate Carroll

Jan 05, 2021 15:40:31 EST
American College of Physicians

Disclosure Purpose: January 2021 CGC, PMC, SMPC meetings, September 2020 CGC, PMC, SMPC meetings

Employment Information: Currently Retired/Unemployed

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

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

Convey Global Disclosure System | AAMC

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

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

Name: Kate Carroll

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: diverticulitis; depression; osteoporosis; COVID-19

Within the past 3 years, have you or any household members published on any of the above topic 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?

☐ 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.

- *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: hypertension; high blood pressure; CAD

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).

☑ 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).

☑ 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

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Kate Carroll

Print Name

Kate Carroll Digitally signed by Kate Carroll Date: 2021.04.16 14:37:22 -04'00' 4/16/2021

Signature Date

Somosree Dutt

Mar 30, 2021 13:32:57 EDT
American College of Physicians

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	-
Title: Associate-Performance Measurement ***Start Date:*** 03/22/2021 ***End Date:***	***Position Description:*** ***Additional Information:***		
Mesirow Financial	Employment	Spouse/Partner	-
Title: Vice President, Quantitative Research ***Start Date:*** 03/28/2010 ***End Date:*** 09/07/2018	***Position Description:*** ***Additional Information:***		
University of Illinois, Chicago	Employment	Self	-
Title: Associate Director of Clinical Strategy, Analysis, and Practice ***Start Date:*** 05/15/2015 ***End Date:*** 03/15/2019	***Position Description:*** Assisted in the development and implementation of structured quality improvement program for the ambulatory group. Successfully led the MACRA-MIPS project from inception, avoided CMS penalty and obtained significant incentive for the physician group. ***Additional Information:***		
University of Pennsylvania Health System	Employment	Self	-
Title: Quality Analyst ***Start Date:*** 04/01/2019 ***End Date:*** 07/12/2019	***Position Description:*** Conducted, studied, and analyzed healthcare data to evaluate providers' performance in quality improvement - Tracked Penn Medicine-Primary Care's internal quality improvement program and provided detailed gap analysis regularly to all 25 PCP clinics ***Additional Information:***		
Vanguard	Employment	Spouse/Partner	-
Title: Investment Risk Manager ***Start Date:*** 09/10/2018 ***End Date:***	***Position Description:*** ***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

Convey Global Disclosure System | AAMC

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

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

Name: Somosree Dutt

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: diverticulitis; depression; osteoporosis; COVID-19

Within the past 3 years, have you or any household members published on any of the above topic 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?

☐ 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.

- *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: hypertension; high blood pressure; CAD

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).

☑ 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).

☑ 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

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Somosree Dutt

Print Name

Somosree Dutt

Signature

04-20-2021

Date

Itziar Etxeandia Ikobaltzeta

Apr 11, 2021 09:08:35 EDT
American College of Physicians

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

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

Convey Global Disclosure System | AAMC

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

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

Name: Itziar Etxeandia Ikobaltzeta

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: diverticulitis; depression; osteoporosis; COVID-19

Within the past 3 years, have you or any household members published on any of the above topic 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?

☐ 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. Qaseem A, Yost J, Etxeandia-Ikobaltzeta I, Forciea MA, Abraham GM, Miller MC, et al. What Is the Antibody Response and Role in Conferring Natural Immunity After SARS-CoV-2 Infection? Rapid, Living Practice Points From the American College of Physicians (Version 1). Annals of Internal Medicine. 2021.
2. Qaseem A, Yost J, Etxeandia-Ikobaltzeta I, Miller MC, Abraham GM, Obley AJ, et al. 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. 2020;173(2):W48-W51.

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.

- *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: hypertension; high blood pressure; CAD

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).

☑ 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).

☑ 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.
- 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.

Itziar Etxeandia Ikobaltzeta

Print Name

2021.04.19 15:48:53 +02'00'

Signature Date

1. Qaseem A, Yost J, Etxeandia-Ikobaltzeta I, Forciea MA, Abraham GM, Miller MC, et al. What Is the Antibody Response and Role in Conferring Natural Immunity After SARS-CoV-2 Infection? Rapid, Living Practice Points From the American College of Physicians (Version 1). Annals of Internal Medicine. 2021.

2. Qaseem A, Yost J, Etxeandia-Ikobaltzeta I, Miller MC, Abraham GM, Obley AJ, et al. 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. 2020;173(2):W48-W51.

3. Qaseem A, Yost J, Etxeandia-Ikobaltzeta I, Miller MC, Abraham GM, Obley AJ, et al. 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 (version 1). Annals of internal medicine. 2020;173(2):137-42.

4. Qaseem A, Yost J, Etxeandia-Ikobaltzeta I, Humphrey LL. 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. 2020;173(5):W88-W9.

5. Qaseem A, Yost J, Etxeandia-Ikobaltzeta I, Abraham GM, Jokela JA, Forciea MA, et al. Should Remdesivir Be Used for the Treatment of Patients With COVID-19? Rapid, Living Practice Points From the American College of Physicians (Version 1). Annals of internal medicine. 2020.

6. Qaseem A, Etxeandia-Ikobaltzeta I, Yost J, Miller MC, Abraham GM, Obley AJ, et al. Use of N95, surgical, and cloth masks to prevent COVID-19 in health care and community settings: living practice points from the American College of Physicians (version 1). Annals of internal medicine. 2020;173(8):642-9.

7. Qaseem A, Etxeandia-Ikobaltzeta I, Yost J, Humphrey LL. Update Alert: Use of N95, Surgical, or Cloth Masks to Prevent COVID-19 in Health Care and Community Settings: Living Practice Points From the American College of Physicians (Version 1). Annals of internal medicine. 2020;173(12):170.

Allison Ewing

Jan 23, 2020 13:28:43 EST
American College of Physicians

Disclosure Purpose: Annual Staff Disclosure 2020

Summary of Financial Interests

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

Additional Information:

1. **Please specify any additional information which you consider relevant to this disclosure.**
2. **ACP requires your annual affirmation to abide by its Disclosure of Interests and Management of Conflicts Policy, Non-Disclosure Agreement, Intellectual Property Policy, and Anti-Harassment Policy *if* you're submitting your disclosures to ACP as a member of an ACP governance group or as College staff, as part of ACP's annual disclosure process.**
   a. **Are you submitting your disclosures to ACP as a member of one of the following groups:**
      - **ACP board, committee, council, task force, and/or other governance group?**
      - **Chapter Council or other Chapter leadership role?**
      - **National or chapter staff?**
      - **Annals of Internal Medicine editorial staff?**
      - **Other (meeting guests, contractors, authors, etc.)**

      Yes.

      i. **I, the undersigned, acknowledge I have read and agree to abide by the American College of Physician's Disclosure of Interests and Management of Conflicts Policy.**

         Yes

      ii. **I, the undersigned, enter into the Non-Disclosure Agreement between myself and the American College of Physicians, which governs the disclosure and furnishing of ACP's members of the Board of Regents, Board of Governors, Committees, Councils, Governors-elect and Chapter Personnel in any such Work Group of ACP, with information developed for ACP, deemed "Proprietary Information."**

         Yes

      iii. **I, the undersigned, intending to be legally bound, hereby declare and agree to terms of participation in the ACP Group activities of ACP as specified in the ACP Intellectual Property Policy.**

         Yes

      iv. **I, the undersigned, acknowledge I have read and agree to abide by the American College of Physician's Anti-Harassment Policy.**

         Yes

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

Convey
Global Disclosure System
AAMC

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

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.

Allison Ewing

Print Name

Signature Date

Andrew Hachadorian

Aug 07, 2020 10:17:31 EDT
American College of Physicians

Disclosure Purpose: Annual Staff Disclosure 2020 - 2021 **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:

- 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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Convey Global Disclosure System | AAMC

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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Andrew Hachadorian
Print Name

Andrew Hachadorian
Signature

Date 4/19/21

Shannon Merillat

Jan 05, 2021 10:05:15 EST
American College of Physicians

Disclosure Purpose: Annual Staff Disclosure 2020 - 2021 **Employment Information:** Currently Retired/Unemployed

Summary of Interests

Company or Organization

Entity	Type	Interest Held By	Value
American Academy of Neurology	Employment	Self	-
Title: Senior Guideline Development Program Manager ***Start Date:*** 11/12/2014 ***End Date:*** 08/21/2020	***Position Description:*** Manage and coordinate development of clinical practice guidelines on topics relevant to neurological disease treatment, diagnosis, prognosis, and screening ***Additional Information:***		
Health Dimensions Group	Employment	Spouse/Partner	-
Title: Document Production Coordinator ***Start Date:*** 08/20/2020 ***End Date:***	***Position Description:*** Responsible for all aspects of document and presentation preparation and production ***Additional Information:*** https://healthdimensionsgroup.com/about/		
HealthPartners	Employment	Spouse/Partner	-
Title: Purchasing Agent ***Start Date:*** 03/13/2018 ***End Date:*** 08/14/2020	***Position Description:*** Procurement of medical equipment and supplies and contract management for orthopedic and laboratory service lines. ***Additional Information:*** Health Partners is an integrated, nonprofit health care provider and health insurance company https://www.healthpartners.com/about/		
M*Modal	Employment	Spouse/Partner	-
Title: Product Marketing Specialist ***Start Date:*** 12/15/2017 ***End Date:*** 03/09/2018	***Position Description:*** Developed white papers and marketing materials ***Additional Information:*** https://www.3m.com/3M/en_US/company-us/about-3m/		

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

Convey Global Disclosure System | AAMC

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

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

Name: Shannon Merillat

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: diverticulitis; depression; osteoporosis; COVID-19

Within the past 3 years, have you or any household members published on any of the above topic 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?

☐ 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: hypertension; high blood pressure; CAD

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).

☑ 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).

☑ 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

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Shannon Merillat

Print Name

Shannon Merillat Digitally signed by Shannon Merillat Date: 2021.04.20 12:37:16 -04'00' 04/20/2021

Signature Date

Darilyn Moyer

Apr 11, 2021 10:56:06 EDT
American College of Physicians

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 ***Additional Information:***	***Start Date:*** 01/01/2017 ***End Date:*** ***Annual Compensation:***		
Council of Medical Subspecialty Societies	Fiduciary Officer	Self	-
Official Title: CMSS Board Member/President ***Compensation Type:*** Unpaid ***Annual Compensation:*** ***Additional Information:***	***Position Description:*** CMSS Board member/President ***Start Date:*** 10/27/2020 ***End Date:***		
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 ***Annual Compensation:*** ***Additional Information:***	***Position Description:*** PCPCC Board Chair ***Start Date:*** 01/01/2017 ***End Date:***		
Temple University	Fiduciary Officer	Self	-
Official Title: Lewis Katz School of Medicine at Temple University Medical Alumni Board ***Compensation Type:*** Unpaid ***Annual Compensation:*** ***Additional Information:***	***Position Description:*** Board member ***Start Date:*** 01/01/2017 ***End Date:***		

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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- 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

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

Name: Darilyn V. Moyer, MD, FACP, FRCP, FIDSA

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: diverticulitis; depression; osteoporosis; COVID-19

Within the past 3 years, have you or any household members published on any of the above topic 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?

☐ 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) 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

2) Christine Laine, MD, MPH; Deborah Cotton, MD, MPH; Darilyn V. Moyer, MD; "COVID-19 Vaccine Distribution and Allocation: Promoting Vaccine Acceptance" A special article in Annals of Internal Medicine, 2021; doi.org/10.7326/M20-8008, 02/21

3) 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

4) 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, 03/21

5) 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

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: hypertension; high blood pressure; CAD

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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).

☑ 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).

☑ 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

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Darilyn V. Moyer, MD

Print Name

Darilyn Moyer 4/20/2021

Signature Date

Amir Qaseem

Apr 21, 2021 12:56:37 EDT
American College of Physicians

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: Vice President, Clinical Policy ***Start Date:*** 12/07/2003 ***End Date:***	***Position Description:*** ***Additional Information:***		
Centers for Disease Control and Prevention	Other Current Employment	Self	-
Category: Other ***Compensation Type:*** Unpaid ***Additional Information:*** don't have the exact dates	***Start Date:*** 01/01/2016 ***End Date:*** ***Annual Compensation:***		
Cochrane	Other Current Employment	Self	-
Category: Other ***Compensation Type:*** Unpaid ***Additional Information:*** dont have exact start date	***Start Date:*** 01/01/2020 ***End Date:*** ***Annual Compensation:***		
Cochrane	Other Current Employment	Self	-
Category: Other ***Compensation Type:*** ***Additional Information:***	***Start Date:*** 06/01/2019 ***End Date:*** ***Annual Compensation:***		
COVID-19 Evidence Network to support Decision-making	Other Current Employment	Self	-
Category: Other ***Compensation Type:*** Unpaid ***Additional Information:*** Dont have exact start date	***Start Date:*** 05/01/2020 ***End Date:*** ***Annual Compensation:***		
Dynamed	Other Current Employment	Self	-
Category: Other ***Compensation Type:*** Other ***Annual Compensation:***	***Start Date:*** 07/01/2014 ***End Date:*** ***Other Compensation:*** honorarium ***Additional Information:***		
Dynamed	Other Current Employment	Self	-
Category: Other ***Compensation Type:*** Unpaid ***Additional Information:*** I do not know the exact start date.	***Start Date:*** 01/01/2013 ***End Date:*** ***Annual Compensation:***		
European Commission	Other Current Employment	Self	-
Category: Other ***Compensation Type:*** ***Additional Information:***	***Start Date:*** 01/01/2021 ***End Date:*** ***Annual Compensation:***		
GRADE Working Group	Other Current Employment	Self	-
Category: Other ***Compensation Type:*** Unpaid ***Additional Information:*** I do not have the exact start date	***Start Date:*** 01/01/2003 ***End Date:*** ***Annual Compensation:***		
Guidelines International Network	Other Current Employment	Self	-
Category: Other ***Compensation Type:*** Unpaid ***Additional Information:*** dont have exact start date	***Start Date:*** 08/01/2010 ***End Date:*** ***Annual Compensation:***		
Measures Application Partnership	Other Current Employment	Self	-
Category: Other ***Compensation Type:*** Unpaid ***Additional Information:*** I do not remember the exact start date.	***Start Date:*** 01/01/2014 ***End Date:*** ***Annual Compensation:***		
MedBiquitous	Other	Self	-
Category: Other	***Start Date:*** 01/01/2013 ***End Date:*** 01/01/2019		

Compensation Type: *Additional Information:* Do not have exact start or end dates	*Annual Compensation:*		
National Academies of Sciences, Engineering, and Medicine	Other Current Employment	Self	-
Category: Other *Compensation Type:* Unpaid *Additional Information:* don't have the exact dates	*Start Date:* 01/01/2019 *Annual Compensation:*	*End Date:*	
National Quality Forum	Other	Self	-
Category: Other *Compensation Type:* Unpaid *Additional Information:* don't have the exact dates	*Start Date:* 01/01/2019 *Annual Compensation:*	*End Date:* 07/01/2020	
National Quality Forum	Other	Self	-
Category: Other *Compensation Type:* Unpaid *Additional Information:* Don't have the exact start or end date	*Start Date:* 01/01/2015 *Annual Compensation:*	*End Date:* 01/01/2021	
National Quality Forum	Other Current Employment	Self	-
Category: Other *Compensation Type:* Unpaid *Additional Information:* don't have the exact dates	*Start Date:* 01/01/2018 *Annual Compensation:*	*End Date:*	
PCPI	Other	Self	-
Category: Other *Compensation Type:* Unpaid *Additional Information:* Do not have exact start date	*Start Date:* 01/01/2015 *Annual Compensation:*	*End Date:* 07/31/2020	
PCPI	Other	Self	-
Category: Other *Compensation Type:* Unpaid *Additional Information:* don't have the exact start date	*Start Date:* 01/01/2017 *Annual Compensation:*	*End Date:* 07/31/2020	
RIGHT Working Group	Other Current Employment	Self	-
Category: Other *Compensation Type:* Unpaid *Additional Information:* I do not have the exact start date	*Start Date:* 01/01/2014 *Annual Compensation:*	*End Date:*	
Thomas Jefferson University	Other Current Employment	Self	-
Category: Other *Compensation Type:* *Additional Information:*	*Start Date:* 01/01/2017 *Annual Compensation:*	*End Date:*	
Women's Preventive Services Initiative	Other Current Employment	Self	-
Category: Other *Compensation Type:* Unpaid *Additional Information:* don't have the exact dates	*Start Date:* 05/01/2016 *Annual Compensation:*	*End Date:*	

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

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

Name: Amir Qaseem

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: diverticulitis; depression; osteoporosis; COVID-19

Within the past 3 years, have you or any household members published on any of the above topic 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?

☐ 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.

- *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: hypertension; high blood pressure; CAD

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).

☑ 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).

☑ 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

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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.

Amir Qaseem

Print Name

Amir Qaseem Digitally signed by Amir Qaseem Date: 2021.04.19 13:11:59 -04'00' 4/19/2021

Signature Date

Tatyana Shamliyan

Jan 13, 2021 16:42:14 EST
American College of Physicians

Disclosure Purpose: Annual Staff Disclosure 2020 - 2021 **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:

- 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

Convey Global Disclosure System | AAMC

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

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

Name: Tatyana A Shamliyan

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: diverticulitis; depression; osteoporosis; COVID-19

Within the past 3 years, have you or any household members published on any of the above topic 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?

☐ 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. Aronow WS, Shamliyan TA. Effects of antidepressants on QT interval in people with mental disorders. Arch Med Sci. 2020;16(4):727-41.
2. Aronow WS, Shamliyan TA. Effects of atypical antipsychotic drugs on QT interval in patients with mental disorders. Ann Transl Med. 2018;6(8):147.

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: hypertension; high blood pressure; CAD

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).

☑ 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).

☐ 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.

Shamliyan TA, Avanesova AA, Aronow WS. Insufficient evidence regarding benefits from sodium-glucose cotransporter-2 inhibitors in heart failure with preserved ejection fraction. Vessel Plus 2020;4:35. http://dx.doi.org/10.20517/2574-1209.2020.34
Aronow WS, Shamliyan TA. Comparative Clinical Outcomes of Edoxaban in Adults With Nonvalvular Atrial Fibrillation. Am J Ther. 2020;27(3):e270-e85.
Aronow WS, Shamliyan TA. Exercise for Preventing Hospitalization and Readmission in Adults With Congestive Heart Failure. Cardiol Rev. 2019;27(1):41-8.
Aronow WS, Shamliyan TA. Comparative Effectiveness and Safety of Rivaroxaban in Adults With Nonvalvular Atrial Fibrillation. Am J Ther. 2019;26(6):e679-e703.
Aronow WS, Shamliyan TA. Dietary Sodium Interventions to Prevent Hospitalization and Readmission in Adults with Congestive Heart Failure. Am J Med. 2018;131 (4):365-70 e1.
Aronow WS, Shamliyan TA. Comparative Effectiveness of Disease Management With Information Communication Technology for Preventing Hospitalization and

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

Acknowledgements and Attestations

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Tatyana Shamliyan

Print Name

Tatyana Shamliyan Digitally signed by Tatyana Shamliyan Date: 2021.04.19 10:16:01 -04'00' 04/16/2021

Signature Date

Patricia Siemion

Mar 30, 2021 10:11:38 EDT
American College of Physicians

Disclosure Purpose: Annual Staff Disclosure 2019, 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	-
Title: Coordinator, Clinical Policy ***Start Date:*** 04/14/2014 ***End Date:***	***Position Description:*** Provides administrative support to the Clinical Policy Department and CGC, PMC and SMPC meetings and webinars. ***Additional Information:***		
International Association of Bridge, Structural, Ornamental and Reinforcing Ironworkers	Employment	Spouse/Partner	-
Title: ***Start Date:*** 06/01/1989 ***End Date:***	***Position Description:*** ***Additional Information:***		

Certification

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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

Convey Global Disclosure System | AAMC

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

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

Name: Trish Siemion

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: diverticulitis; depression; osteoporosis; COVID-19

Within the past 3 years, have you or any household members published on any of the above topic 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?

☐ 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: hypertension; high blood pressure; CAD

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).

☑ 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).

☑ 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

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Trish Siemion

Print Name

Trish Siemion Digitally signed by Trish Siemion Date: 2021.04.12 16:28:28 -04'00' 4/12/2021

Signature Date

Samantha Tierney

Jul 28, 2020 13:03:32 EDT
American College of Physicians

Disclosure Purpose: Annual Staff Disclosure 2020 - 2021 **Employment Information:** Currently Retired/Unemployed

Summary of Interests

Company or Organization

Entity	Type	Interest Held By	Value
American College of Physicians	Employment	Self	-
Title: Senior Scientist, Clinical Policy ***Start Date:*** 06/15/2020 ***End Date:*** ***Position Description:*** Leading the performance measurement strategy ***Additional Information:***			
Boehringer Ingelheim	Other	Self	-
Category: Other ***Compensation Type:*** Cash ***Additional Information:*** 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 ***Start Date:*** 01/01/2018 ***End Date:*** 12/31/2018 ***Annual Compensation:***			
Discern Health	Other	Self	-
Category: Other ***Compensation Type:*** Cash ***Additional Information:*** 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 ***Start Date:*** 01/01/2018 ***End Date:*** 03/01/2020 ***Annual Compensation:***			
PCPI Foundation	Employment	Self	-
Title: Senior Director, Measurement Science ***Start Date:*** 01/01/2017 ***End Date:*** 06/12/2020 ***Position Description:*** Orchestrate daily activities of the Measurement Science Program, developing and implementing key performance measures, and monitoring performance to uphold market competitiveness. ***Additional Information:*** 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	-
Category: Other ***Compensation Type:*** Cash ***Additional Information:*** As a result of my participation on the following roundtable, my former employer has received honoraria: PQA, roundtable member, Patient Engagement Rubric, 2019 ***Start Date:*** 01/01/2019 ***End Date:*** 12/31/2019 ***Annual Compensation:***			

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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- 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

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

Name: Samantha Tierney

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: diverticulitis; depression; osteoporosis; COVID-19

Within the past 3 years, have you or any household members published on any of the above topic 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?

☐ 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: hypertension; high blood pressure; CAD

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)?

- [x] Yes (please provide additional details below).
- [ ] 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).
- [x] 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 oversaw the maintenance and NQF submission of the 2 CAD measures included in the review.

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

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Samantha Tierney

Print Name

Samantha Tierney Digitally signed by Samantha Tierney
Date: 2021.04.20 10:54:36 -04'00'

Signature Date

Jennifer Yost

Aug 21, 2020 13:53:05 EDT
American College of Physicians

Disclosure Purpose: CGC/PMC/SMPC Meetings **Employment Information:** Currently Retired/Unemployed

Summary of Interests

Company or Organization

Entity	Type	Interest Held By	Value
Canadian Institutes of Health Research	Grant / Contract	Self	$22,600.00

Recipient Name: Dr. Sandra Carroll
Recipient Type: Individual
Grant / Contract Description: Following the C-SPIN Roadmap: Realizing Meaningful Patient Engagement
Grant / Contract Purpose: Research
Grant / Contract Amount: $22,600.00
Grant / Contract Valuation Date: 03/01/2016
Contract Start Date: 03/01/2016 *Contract End Date:* 02/28/2018
Additional Information:

Canadian Institutes of Health Research	Grant / Contract	Self	$226,000.00

Recipient Name: Dr. Michael McGillion
Recipient Type: Individual
Grant / Contract Description: THE SMArT VIEW, CoVeRed
Grant / Contract Purpose: Research
Grant / Contract Amount: $226,000.00
Grant / Contract Valuation Date: 03/01/2016
Contract Start Date: 03/01/2016 *Contract End Date:* 02/28/2018
Additional Information:

Canadian Institutes of Health Research	Grant / Contract	Self	$9,310,000.00

Recipient Name: Dr. Michael McGillion
Recipient Type: Individual
Grant / Contract Description: The SMArT VIEW, CoVeRed
Grant / Contract Purpose: Research
Grant / Contract Amount: $9,310,000.00
Grant / Contract Valuation Date: 10/15/2015
Contract Start Date: 10/15/2015 *Contract End Date:* 09/30/2019
Additional Information:

COVID-END	Other	Self	-

Category: Other
Start Date: 05/01/2020 *End Date:*
Compensation Type: Unpaid
Annual Compensation:
Additional Information:

Evidence Based Research Network	Fiduciary Officer	Self	-

Official Title: Steering Committee Member
Position Description:
Compensation Type: Unpaid
Start Date: 10/01/2016 *End Date:*
Annual Compensation:
Additional Information:

Evidence Synthesis International	Fiduciary Officer	Self	-

Official Title: Secretariat
Position Description: Organize and support activities of the organisation
Compensation Type: Unpaid
Start Date: 03/01/2018 *End Date:*
Annual Compensation:
Additional Information:

McMaster University	Employment	Self	-

Title: Assistant Professor
Position Description:
Start Date: 06/01/2010 *End Date:* 06/30/2017
Additional Information:

Sigma Theta Tau International	Fiduciary Officer	Self	-

Official Title: President - Alpha Nu Chapter
Position Description: President - Alpha Nu Chapter
Compensation Type: Unpaid
Start Date: 09/01/2019 *End Date:* 08/31/2021
Annual Compensation:
Additional Information:

University of Bologna	Other	Self	$5,213.19

Category: Other
Start Date: 11/16/2019 *End Date:* 11/22/2019
Compensation Type: Cash
Annual Compensation:

Year	Amount	Type
2019	$5,213.19	Actual

Additional Information: Guest Lecturer

Villanova University	Employment	Self	-

Title: Associate Professor
Position Description:
Start Date: 08/22/2017 *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

Convey Global Disclosure System | AAMC

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

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

Name: Jennifer Yost

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: diverticulitis; depression; osteoporosis; COVID-19

Within the past 3 years, have you or any household members published on any of the above topic 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?

☐ 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. 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. doi: 10.7326/M20-7569

2. 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

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: hypertension; high blood pressure; CAD

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).

☑ 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).

☑ 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

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Jennifer Yost

Print Name

Jennifer Yost Digitally signed by Jennifer Yost Date: 2021.04.27 22:01:57 -04'00' 4/27/2021

Signature Date

Ethan Balk

Aug 14, 2020 10:34:00 EDT
American College of Physicians

Disclosure Purpose: Contractor/Guest Annual Disclosure 2020 - 21

Summary of Financial Interests

Company or Organization

Entity	Type	Interest Held By	Value
Agency for Healthcare Research and Quality	Grant / Contract	Self	$350,000.00
Recipient Name: Brown Evidence-based Practice Center ***Grant / Contract Description:*** Multi year contract. Specific contract to conduct systematic review (nominated by ACP) ***Grant / Contract Valuation Date:*** 03/29/2019 ***Additional Information:***	***Recipient Type:*** Institution ***Grant / Contract Purpose:*** Research ***Grant / Contract Amount:*** $350,000.00 ***Contract Start Date:*** 03/29/2019	***Contract End Date:***	
Brown University	Employment	Self	-
Title: Associate Professor ***Start Date:*** 07/01/2014	***End Date:***	***Position Description:*** Center Co-Director ***Additional Information:***	

Additional Information:

1. **Please specify any additional information which you consider relevant to this disclosure.**

   None

2. **ACP requires your annual affirmation to abide by its Disclosure of Interests and Management of Conflicts Policy, Non-Disclosure Agreement, Intellectual Property Policy, and Anti-Harassment Policy *if* you're submitting your disclosures to ACP as a member of an ACP governance group or as College staff, as part of ACP's annual disclosure process.**

   a. **Are you submitting your disclosures to ACP as a member of one of the following groups:**
      - **ACP board, committee, council, task force, and/or other governance group?**
      - **Chapter Council or other Chapter leadership role?**
      - **National or chapter staff?**
      - **Annals of Internal Medicine editorial staff?**
      - **Other (meeting guests, contractors, authors, etc.)**

      Yes.

      i. **I, the undersigned, acknowledge I have read and agree to abide by the American College of Physician's Disclosure of Interests and Management of Conflicts Policy.**

         Yes

      ii. **I, the undersigned, enter into the Non-Disclosure Agreement between myself and the American College of Physicians, which governs the disclosure and furnishing of ACP's members of the Board of Regents, Board of Governors, Committees, Councils, Governors-elect and Chapter Personnel in any such Work Group of ACP, with information developed for ACP, deemed "Proprietary Information."**

         Yes

      iii. **I, the undersigned, intending to be legally bound, hereby declare and agree to terms of participation in the ACP Group activities of ACP as specified in the ACP Intellectual Property Policy.**

         Yes

      iv. **I, the undersigned, acknowledge I have read and agree to abide by the American College of Physician's Anti-Harassment Policy.**

         Yes

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: 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: diverticulitis, depression, osteoporosis

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).

Lead author on AHRQ report:

Balk EM, Adam GP, Cao W, Danko K, Bhuma MR, Mehta S, Saldanha IJ, Beland MD, Shah N. Management of Colonic Diverticulitis. Comparative Effectiveness Review No. 233. (Prepared by the Brown Evidence-based Practice Center under Contract No. 290-2015- 00002-I.) AHRQ Publication No. 20(21)-EHC025. Rockville, MD: Agency for Healthcare Research and Quality; October 2020. DOI: https://doi.org/10.23970/AHRQEPCCER233.

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

Acknowledgements and Attestations

By signing this form,

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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.

Ethan Balk, MD MPH

Print Name

Ethan Balk Digitally signed by Ethan Balk Date: 2021.04.23 11:57:31 -04'00' 4/23/2021

Signature Date

Gerald Gartlehner

Mar 26, 2020 06:34:40 EDT
American College of Physicians

Disclosure Purpose: Disclosure of Interests, Disclosure o finterest

Summary of Interests

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

Additional Information:

1. **Please specify any additional information which you consider relevant to this disclosure.**
2. **ACP requires your annual affirmation to abide by its Disclosure of Interests and Management of Conflicts Policy, Non-Disclosure Agreement, Intellectual Property Policy, and Anti-Harassment Policy *if* you're submitting your disclosures to ACP as a member of an ACP governance group or as College staff, as part of ACP's annual disclosure process.**
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        - **Chapter Council or other Chapter leadership role?**
        - **National or chapter staff?**
        - **Annals of Internal Medicine editorial staff?**
        - **Other (meeting guests, contractors, authors, etc.)**

    No.

    You are not disclosing any interests to this organization.

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

Convey Global Disclosure System | AAMC

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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Gerald Gartlehner

Print Name

Gerald Gartlehner Digital unterschrieben von Gerald Gartlehner Datum: 2021.04.14 08:51:46 +02'00' 04/14/2021

Signature Date

Devan Kansagara

Apr 12, 2021 13:37:28 EDT
American College of Physicians

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	Grant / Contract	Other - Portland VA Research Foundation	$174,000.00

Recipient Name: Portland VA Research Foundation
Grant / Contract Description: Osteoporosis treatment systematic review for ACP Clinical Guideline Committee
Grant / Contract Valuation Date: 12/16/2020
Additional Information: Serving as PI of this project; member of ACP Clinical Guideline Committee
Recipient Type: Institution
Grant / Contract Purpose: Research
Grant / Contract Amount: $174,000.00
Contract Start Date: 10/01/2020 ***Contract End Date:***

VA Portland Health Care System	Employment Current Employment	Self	-

Title: VA Portland Health Care System
Start Date: 07/01/2005 ***End Date:***
Position Description: Staff physician
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

Convey Global Disclosure System | AAMC

American College of Physicians
Scientific Medical Policy Committee
Disclosure of Interests: Supplemental Questions and Attestation

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

Name: Devan Kansagara

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: COVID-19

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).

94. Mackey, K., Ayers, C. K., Kondo, K. K., Saha, S., Advani, S. M., Young, S., ... & Kansagara D. Racial and Ethnic Disparities in COVID-19–Related Infections, Hospitalizations, and Deaths: A Systematic Review. Annals of internal medicine. 2020. PMID: 33253040

86. Mackey K, King VJ, Gurley S, Kiefer M, Liederbauer E, Vela K, Sonnen P, and Kansagara D. Risks and impact of angiotensin-converting enzyme inhibitors or angiotensin-receptor clockers on SARS-CoV-2infection in adults. A living systematic review Ann Int Med. 2020. PMID: 32422062 [E-pub ahead of print]

American College of Physicians
Scientific Medical Policy Committee
Disclosure of Interests: Supplemental Questions and Attestation

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Devan Kansagara

Print Name

Devan Kansagara Digitally signed by Devan Kansagara
Date: 2021.04.27 15:55:36 -07'00'

Signature Date

Brittany Lazur

Dec 22, 2020 14:31:09 EST
American College of Physicians

Disclosure Purpose: Contractor/Guest Annual Disclosure 2020 - 21

Summary of Interests

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

Additional Information:

1. **Please specify any additional information which you consider relevant to this disclosure.**
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      - **Annals of Internal Medicine editorial staff?**
      - **Other (meeting guests, contractors, authors, etc.)**

      No.

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Convey Global Disclosure System | AAMC

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Clinical Guidelines Committee, Performance Measurement Committee,
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Brittany Lazur

Print Name

Brittany Lazur Digitally signed by Brittany Lazur Date: 2021.04.23 20:10:42 -07'00' 4/23/21

Signature Date