

<b>Discloser Identifier:</b> 00095173	<b>Disclosure Purpose:</b> Annual Governance Disclosure 2025-26	<b>Employment Information:</b> Currently Retired/Unemployed
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Summary of Interests

Company or Organization

Entity	Type	Interest Held By	Value
Up to Date	Consultant	Self	-

Category: Consultant

End Date: Ongoing / No Known End Date

Compensation Type: Cash

Compensation: Yes

Additional Information: I write a chapter on lung cancer screening and receive royalties that typically are around 3k per year

Start Date: 01/01/2010

Additional Questions

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

1. I am a member of the Women's Preventive Services Initiative committee. there are no financial benefits. i provide input as a committee member on evidence based preventive services for women 2. I was asked to be a member of a Data Safety Monitoring Board for a NIAMS sponsored clinical trial comparing 2 strategies for managing gout ("Treat to Target Serum Urate versus Treat-to Avoid Symptoms in Gout: A Randomized Controlled Trial (TRUST) . I will be reimbursed \$250 per meeting I understand it. This is an NIH/NIAMS sponsored trial of a strategy and our only work will be evaluating the safety of each arm of the trial.

2. As part of ACP's disclosure process, ACP requires your annual affirmation to abide by its Disclosure of Interests and Management of Conflicts Policy, Non-Disclosure Agreement, Intellectual Property Policy, Staff Confidentiality Policy and Anti-Harassment Policy as determined by your College involvement.

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?

Annals of Internal Medicine editorial staff?

Other (meeting guests, contractors, authors, speakers, project contributors, peer reviewers, etc.)

Yes (ACP board, committee, council, task force, and/or other governance group, Chapter Council or other Chapter leadership role, Annals of Internal Medicine editorial staff, Other (meeting guests, contractors, authors, speakers, project contributors, peer reviewers, etc.)

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

### Disclosures of Interests: Supplemental Questions

Please review the following topic areas and report any intellectual or other relevant interests held by you or any household members from the last 3 years that may be relevant to the below 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.

### Population Health and Medical Sciences Committee: Topics Currently Under Development

In the table below, please list any relevant intellectual interests (including relevant publications from peer- and non-peer-reviewed sources or other relevant interests not captured in your Convey.

You only need to report interests from the last 3 years and you do not need to report publications developed on behalf of ACP.

You may also share a list of publications via a link to list of your published works (such as ORCID or PubMed) or as an attachment (write "see attachment" in table).

Clinical Topic Area	Relevant Interests from Last 3 Years
	<i>If none, write "None"</i>
COVID-19	Only those authored with the PHMSC
Influenza	none
Prostate Cancer	none
RSV	none

### 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 above topic areas and that my disclosures are up to date.

Linda Humphrey

Name

Signature



Date

3-10-25

Adam Obley

<b>Disclosure Purpose:</b> Annual Governance Disclosure 2025-26 (Expiration Date: 07/17/2026), Internal Medicine Meeting 2025 Faculty (Expiration Date: 07/17/2026), Faculty (Expiration Date: 07/17/2026), ACP/ Annals Forum (Expiration Date: 07/17/2026)	<b>Employment Information:</b> Currently Employed
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Summary of Interests

Company or Organization

Entity	Type	Interest Held By	Value
Center for Evidence-based Policy	Employment	Self	-
<div><div><b>Title:</b> Clinical Epidemiologist <b>Start Date:</b> 08/01/2014 <b>Additional Information:</b></div><div><b>Position Description:</b> CEbP supported 0.5 FTE until August 2020 CEbP supports 0.05 FTE since August 2020 Non-FTE consultative work since September 2021 <b>End Date:</b> Ongoing / No Known End Date</div></div>			
Edward Hines, Jr. VA Hospital	Employment <div>Current Employment</div>	Self	-
<div><div><b>Title:</b> Deputy Chief of Staff <b>Start Date:</b> 04/20/2025 <b>Additional Information:</b></div><div><b>Position Description:</b> As deputy chief of staff (deputy CMO) I serve as a member of the facility executive team overseeing a wide variety of hospital and outpatient operations and clinical staff. I continue to attend on the general medicine teaching service as well. <b>End Date:</b> Ongoing / No Known End Date</div></div>			
Oregon Medical Association	Fiduciary Officer	Self	-
<div><div><b>Official Title:</b> Trustee at-large <b>Compensation Type:</b> Unpaid <b>Start Date:</b> 01/01/2021 <b>Compensation:</b> No <b>Additional Information:</b></div><div><b>Position Description:</b> Trustee <b>End Date:</b> 05/01/2025</div></div>			
Portland VA Medical Center	Employment	Self	-
<div><div><b>Title:</b> Associate Chief of Staff for Community Care and Staff Physician <b>Start Date:</b> 07/01/2013 <b>Additional Information:</b></div><div><b>Position Description:</b> ACOS for Community Care, Chief of Staff Office Staff Physician, Division of General Medicine, Department of Hospital and Specialty Medicine <b>End Date:</b> 04/18/2025</div></div>			
School of Medicine, Oregon Health and Science University	Employment	Self	-
<div><div><b>Title:</b> Associate Professor of Medicine <b>Start Date:</b> 07/01/2013 <b>Additional Information:</b></div><div><b>Position Description:</b> Faculty appointment, not compensated <b>End Date:</b> Ongoing / No Known End Date</div></div>			

Additional Questions

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



2. As part of ACP's disclosure process, ACP requires your annual affirmation to abide by its Disclosure of Interests and Management of Conflicts Policy, Non-Disclosure Agreement, Intellectual Property Policy, Staff Confidentiality Policy and Anti-Harassment Policy as determined by your College involvement.

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?
- Annals of Internal Medicine editorial staff?
- Other (meeting guests, contractors, authors, speakers, project contributors, peer reviewers, etc.)

Yes (ACP board, committee, council, task force, and/or other governance group, Chapter Council or other Chapter leadership role, Annals of Internal Medicine editorial staff, Other (meeting guests, contractors, authors, speakers, project contributors, peer reviewers, etc.)

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

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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

## Relevant Publications and Other Intellectual Interests for Ongoing Projects

### Disclosures of Interests: Supplemental Questions

Please review the following topic areas and report any intellectual or other relevant interests held by you or any household members from the last 3 years that may be relevant to the below topic areas.

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- Examples of types of intellectual interests include publications, unpaid participation on workgroups, panels, or committees, or membership in special interest groups.

### Clinical Guidelines Committee and Population Health and Medical Sciences Committee: Topics Currently Under Development

In the table below, please list any relevant intellectual interests (including relevant publications from peer- and non-peer-reviewed sources or other relevant interests not captured in your Convey.

You only need to report interests from the last 3 years and you do not need to report publications developed on behalf of ACP. You may also share a list of publications via a link to list of your published works (such as ORCID or PubMed) or as an attachment (write “see attachment” in table).

Clinical Topic Area	Relevant Interests from Last 3 Years <i>If none, write “None”</i>
Anxiety	None
Breast Cancer	None
COVID-19	None
Depression	None
Hyperlipidemia	None
Hypertension	None
Influenza	None
Insomnia	None
Menopausal Therapy	None
Obesity	None
Osteoporosis	None
Prostate Cancer	None
Rhinosinusitis	None
RSV	None

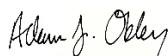
### Acknowledgements and Attestations

*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 above topic areas and that my disclosures are up to date.

Adam Obley

Name



Signature

August 14, 2025

Date

**Discloser Identifier:** 03637685

**Disclosure Purpose:** Annual Governance Disclosure 2025-26

**Employment Information:** Currently Retired/Unemployed

Summary of Interests

Company or Organization

Entity	Type	Interest Held By	Value
NAPCRG	Other	Self	-
<div><div><b>Category:</b> Other</div><div><b>End Date:</b> Ongoing / No Known End Date</div><div><b>Compensation Type:</b> Unpaid</div><div><b>Compensation:</b> No</div><div><b>Additional Information:</b> Member, Board of Directors</div></div> <div><b>Start Date:</b> 11/03/2023</div>			

Additional Questions

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

I serve as the US Co-chair of the Patient and Clinician Engagement Committee of the North American Primary Care Research Group (NAPCRG)
2. As part of ACP's disclosure process, ACP requires your annual affirmation to abide by its Disclosure of Interests and Management of Conflicts Policy, Non-Disclosure Agreement, Intellectual Property Policy, Staff Confidentiality Policy and Anti-Harassment Policy as determined by your College involvement.

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?
  - Annals of Internal Medicine editorial staff?
  - Other (meeting guests, contractors, authors, speakers, project contributors, peer reviewers, etc.)

Yes (ACP board, committee, council, task force, and/or other governance group, Chapter Council or other Chapter leadership role, Annals of Internal Medicine editorial staff, Other (meeting guests, contractors, authors, speakers, project contributors, peer reviewers, etc.))

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

## Relevant Publications and Other Intellectual Interests for Ongoing Projects

### Disclosures of Interests: Supplemental Questions

Please review the following topic areas and report any intellectual or other relevant interests held by you or any household members from the last 3 years that may be relevant to the below 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.

### Population Health and Medical Sciences Committee: Topics Currently Under Development

In the table below, please list any relevant intellectual interests (including relevant publications from peer- and non-peer-reviewed sources or other relevant interests not captured in your Convey.

You only need to report interests from the last 3 years and you do not need to report publications developed on behalf of ACP.

You may also share a list of publications via a link to list of your published works (such as ORCID or PubMed) or as an attachment (write “see attachment” in table).

Clinical Topic Area	Relevant Interests from Last 3 Years <i>If none, write “None”</i>
COVID-19	None
Influenza	None
Prostate Cancer	None
RSV	None

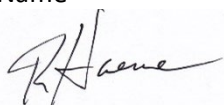
### Acknowledgements and Attestations

*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 above topic areas and that my disclosures are up to date.

Ray Haeme

Name



21 August 2025

Signature

Date

Disclosure Purpose:

Annual Governance Disclosure 2025-26, Adam Rodman's podcast

Employment Information:

Currently Employed

Summary of Interests

Company or Organization

Entity	Type	Interest Held By	Value								
Health Science Center, University of Tennessee	Employment	Self	-								
<div><div><div>Title: Associate Professor</div><div>Start Date: 08/01/2019</div><div>Additional Information:</div></div><div><div>Position Description:</div><div>I work in the Department of Medicine as an assistant professor. I teach medical students and residents in General Internal Medicine.</div><div>End Date: Ongoing / No Known End Date</div></div></div>											
Southern Medical Association	Consultant	Self	-								
<div><div><div>Category: Consultant</div><div>End Date: Ongoing / No Known End Date</div><div>Compensation Type: Unpaid</div><div>Compensation: No</div><div>Additional Information: There is no additional information</div></div><div><div>Start Date: 10/26/2023</div></div></div>											
United States Medical Licensing Examination	Consultant	Self	\$300.00								
<div><div><div>Category: Consultant</div><div>End Date: Ongoing / No Known End Date</div><div>Compensation Type: Cash</div><div>Compensation: Yes</div></div><div><div>Start Date: 10/05/2023</div></div></div> <table><thead><tr><th>Year</th><th>Amount</th><th>Amount Type</th><th>Compensation Type</th></tr></thead><tbody><tr><td>2023</td><td>\$300.00</td><td>Actual</td><td>Cash</td></tr></tbody></table> <div><div>Additional Information:</div></div>				Year	Amount	Amount Type	Compensation Type	2023	\$300.00	Actual	Cash
Year	Amount	Amount Type	Compensation Type								
2023	\$300.00	Actual	Cash								
University of South Florida	Employment <div>Current Employment</div>	Self	-								
<div><div><div>Title: Associate Dean of Student Affairs</div><div>Start Date: 08/19/2024</div><div>Additional Information:</div></div><div><div>Position Description:</div><div>End Date:</div></div></div>											

Additional Questions

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

None

2. As part of ACP's disclosure process, ACP requires your annual affirmation to abide by its Disclosure of Interests and Management of Conflicts Policy, Non-Disclosure Agreement, Intellectual Property Policy, Staff Confidentiality Policy and Anti-Harassment Policy as determined by your College involvement.

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- Chapter Council or other Chapter leadership role?
- Annals of Internal Medicine editorial staff?
- Other (meeting guests, contractors, authors, speakers, project contributors, peer reviewers, etc.)

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Yes

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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

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## Relevant Publications and Other Intellectual Interests for Ongoing Projects

### Disclosures of Interests: Supplemental Questions

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Clinical Topic Area	Relevant Interests from Last 3 Years <i>If none, write “None”</i>
COVID-19	Authored perspective piece on convalescent plasma and COVID-19
Influenza	None
Prostate Cancer	None
RSV	None

### 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 above topic areas and that my disclosures are up to date.

Christopher D. Jackson

\_\_\_\_\_  
Name

*Christopher Jackson*  
\_\_\_\_\_  
Signature

07/20/2025

\_\_\_\_\_  
Date



**Disclosure Purpose:** Annual Governance Disclosure 2025-26 (Expiration Date: 08/19/2026), Internal Medicine Meeting 2025 Faculty (Expiration Date: 08/19/2026), Appointee Disclosure (Expiration Date: 08/19/2026), Faculty (Expiration Date: 08/19/2026)

**Employment Information:** Currently Employed

Summary of Interests

Company or Organization

Entity	Type	Interest Held By	Value
U.S. Department of Veterans Affairs	Grant / Contract	Other - research grant - no money to me directly - only protected time	\$1200000.00
<div><div><b>Recipient Name:</b> VA Portland Health Care System <b>Grant / Contract Description:</b> Systematically Testing the Evidence on Marijuana grant through Office of Rural Health <b>Contract Start Date:</b> 06/30/2020 <b>Grant / Contract Amount:</b>\$1,200,000.00 <b>Additional Information:</b></div><div><b>Recipient Type:</b> Institution <b>Grant / Contract Purpose:</b> Research <b>Grant / Contract Valuation Date:</b> 09/12/2024 <b>Contract End Date:</b> Ongoing / No Known End Date</div></div>			
U.S. Department of Veterans Affairs	Grant / Contract	Self	\$400000.00
<div><div><b>Recipient Name:</b> VA Portland <b>Grant / Contract Description:</b> Systematically Testing the Evidence on Marijuana <b>Contract Start Date:</b> 10/01/2024 <b>Grant / Contract Amount:</b>\$400,000.00 <b>Additional Information:</b></div><div><b>Recipient Type:</b> Institution <b>Grant / Contract Purpose:</b> Research <b>Grant / Contract Valuation Date:</b> 08/19/2025 <b>Contract End Date:</b> Ongoing / No Known End Date</div></div>			
VA Portland Health Care System	Employment <div>Current Employment</div>	Self	-
<div><div><b>Title:</b> VA Portland Health Care System <b>Start Date:</b> 07/01/2005 <b>Additional Information:</b></div><div><b>Position Description:</b> Staff physician <b>End Date:</b> Ongoing / No Known End Date</div></div>			

Additional Questions

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

2. As part of ACP's disclosure process, ACP requires your annual affirmation to abide by its Disclosure of Interests and Management of Conflicts Policy, Non-Disclosure Agreement, Intellectual Property Policy, Staff Confidentiality Policy and Anti-Harassment Policy as determined by your College involvement.

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Chapter Council or other Chapter leadership role?

Annals of Internal Medicine editorial staff?

Other (meeting guests, contractors, authors, speakers, project contributors, peer reviewers, etc.)

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Yes

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Clinical Topic Area	Relevant Interests from Last 3 Years <i>If none, write “None”</i>
COVID-19	Mackey K, Kansagara D, Vela K. Update Alert 10: Risks and Impact of Angiotensin-Converting Enzyme Inhibitors or Angiotensin-Receptor Blockers on SARS-CoV-2 Infection in Adults. Ann Intern Med. 2023 May;176(5):eL230049. doi: 10.7326/L23-0049. Epub 2023 Mar 21. PMID: 36940439; PMCID: PMC10064412
Influenza	none
Prostate Cancer	none
RSV	none

### 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 above topic areas and that my disclosures are up to date.

Devan  
Kansagara  
Name

Digitally signed by Devan  
Kansagara  
Date: 2025.08.19 15:22:35  
07'00'

Signature

Date

**Disclosure Purpose:** Annual Governance Disclosure 2025-26, Appointee Disclosure

**Employment Information:** Currently Employed

### Summary of Interests

Company or Organization

Entity	Type	Interest Held By	Value
None of the interests listed below should be included in this disclosure	Employment Current Employment	Self	-

**Title:**  
**Start Date:** 07/01/2015  
**Additional Information:** N/A

**Position Description:**  
**End Date:**

### Additional Questions

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

My husband is participating in a Pfizer RSV vaccine clinical trial.

2. As part of ACP's disclosure process, ACP requires your annual affirmation to abide by its Disclosure of Interests and Management of Conflicts Policy, Non-Disclosure Agreement, Intellectual Property Policy, Staff Confidentiality Policy and Anti-Harassment Policy as determined by your College involvement.

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?
- Annals of Internal Medicine editorial staff?
- Other (meeting guests, contractors, authors, speakers, project contributors, peer reviewers, etc.)

Yes (ACP board, committee, council, task force, and/or other governance group, Chapter Council or other Chapter leadership role, Annals of Internal Medicine editorial staff, Other (meeting guests, contractors, authors, speakers, project contributors, peer reviewers, etc.)

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

### Disclosures of Interests: Supplemental Questions

Please review the following topic areas and report any intellectual or other relevant interests held by you or any household members from the last 3 years that may be relevant to the below 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.

### Population Health and Medical Sciences Committee: Topics Currently Under Development

In the table below, please list any relevant intellectual interests (including relevant publications from peer- and non-peer-reviewed sources or other relevant interests not captured in your Convey.

You only need to report interests from the last 3 years and you do not need to report publications developed on behalf of ACP.

You may also share a list of publications via a link to list of your published works (such as ORCID or PubMed) or as an attachment (write "see attachment" in table).

Clinical Topic Area	Relevant Interests from Last 3 Years <i>If none, write "None"</i>
COVID-19	
Influenza	
Prostate Cancer	None
RSV	

### 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 above topic areas and that my disclosures are up to date.

Name Alysa Kraus

Signature [Signature] Date 8/7/25



**Disclosure Purpose:** Annual Governance Disclosure 2025-26 (Expiration Date: 07/25/2026), Internal Medicine Meeting 2025 Faculty (Expiration Date: 07/25/2026)

**Employment Information:** Currently Employed

### Summary of Interests

#### Company or Organization

Entity	Type	Interest Held By	Value
Birmingham Veterans Affairs Medical Center	Employment Current Employment	Self	-
<div><div><b>Title:</b> Staff Physician <b>Start Date:</b> 07/01/2016 <b>Additional Information:</b> 2/8 VA physician as part of my UAB position</div><div><b>Position Description:</b> Infectious Diseases Physician <b>End Date:</b> Ongoing / No Known End Date</div></div>			
UAB	Employment Current Employment	Self	-
<div><div><b>Title:</b> Associate Professor <b>Start Date:</b> 07/01/2016 <b>Additional Information:</b> Full time</div><div><b>Position Description:</b> Division of Infectious Diseases <b>End Date:</b> Ongoing / No Known End Date</div></div>			

### Intellectual Property

Type	Is Licensed	Interest Held By	Value																
Other Intellectual Property - Honoraria	-	Self	\$10500.00																
<div><div><b>Description:</b> Honoraria <b>Additional Information:</b> Honoraria for webinars from Prime Education LLC, ACP, Elsevier, Speaker's Network <b>Income:</b> Yes</div><div><b>Income Source:</b> Prime Education LLC, medscape, Elsevier, Speaker's Network</div></div> <table><thead><tr><th>Amount</th><th>Amount Type</th><th>Year</th><th>Payment Receipt</th></tr></thead><tbody><tr><td>\$3,500.00</td><td>Estimated</td><td>2025</td><td>Direct Payment</td></tr><tr><td>\$1,000.00</td><td>Actual</td><td>2024</td><td>Direct Payment</td></tr><tr><td>\$6,000.00</td><td>Estimated</td><td>2022</td><td>Direct Payment</td></tr></tbody></table> <div><b>Additional Information:</b> Honoraria for webinars from Prime Education LLC, ACP, Elsevier, Speaker's Network</div>				Amount	Amount Type	Year	Payment Receipt	\$3,500.00	Estimated	2025	Direct Payment	\$1,000.00	Actual	2024	Direct Payment	\$6,000.00	Estimated	2022	Direct Payment
Amount	Amount Type	Year	Payment Receipt																
\$3,500.00	Estimated	2025	Direct Payment																
\$1,000.00	Actual	2024	Direct Payment																
\$6,000.00	Estimated	2022	Direct Payment																

### Additional Questions

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

I have completed webinars for both Prime Education LLC and Medscape not relevant to ACP. I have completed editorial review for Elsevier, not relevant to ACP.

2. As part of ACP's disclosure process, ACP requires your annual affirmation to abide by its Disclosure of Interests and Management of Conflicts Policy, Non-Disclosure Agreement, Intellectual Property Policy, Staff Confidentiality Policy and Anti-Harassment Policy as determined by your College involvement.

a. Are you submitting your disclosures to ACP as a member of one of the following groups:

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- Chapter Council or other Chapter leadership role?
- Annals of Internal Medicine editorial staff?
- Other (meeting guests, contractors, authors, speakers, project contributors, peer reviewers, etc.)

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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

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Yes

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Yes

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

Yes

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## Relevant Publications and Other Intellectual Interests for Ongoing Projects

### Disclosures of Interests: Supplemental Questions

Please review the following topic areas and report any intellectual or other relevant interests held by you or any household members from the last 3 years that may be relevant to the below topic areas.

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- Examples of types of intellectual interests include publications, unpaid participation on workgroups, panels, or committees, or membership in special interest groups.

### Population Health and Medical Sciences Committee: Topics Currently Under Development

In the table below, please list any relevant intellectual interests (including relevant publications from peer- and non-peer-reviewed sources or other relevant interests not captured in your Convey.

You only need to report interests from the last 3 years and you do not need to report publications developed on behalf of ACP.

You may also share a list of publications via a link to list of your published works (such as ORCID or PubMed) or as an attachment (write “see attachment” in table).

Clinical Topic Area	Relevant Interests from Last 3 Years <i>If none, write “None”</i>
COVID-19	<ol style="list-style-type: none"><li>1. Barlam TF, Al Mohajer M., Al-Tawfiq JA, Auguste AJ, Cunha CB, Forrest GN, Gross AE, <b>Lee RA</b>, Seo SK, Suh KN, Volk S, Schaffzin JK. (2022). SHEA statement on antibiotic stewardship in hospitals during public health emergencies. <i>Infect Control Hosp Epidemiol.</i> 2022 Nov;43(11):1541-1552. doi: 10.1017/ice.2022.194. Epub 2022 Sep 14.PMID: 36102000</li><li>2. Crosby JC, <b>Lee RA</b>, McGwin G, Heath SL, Burkholder GA, Gravett RM, Overton ET, Locks G, Fleece ME, Franco R, Nafziger S, A COVID-19 monitoring process for healthcare workers utilizing occupational health, <i>Occupational Medicine</i>, 2023;, kqad114, <a href="https://doi.org/10.1093/occmed/kqad114">https://doi.org/10.1093/occmed/kqad114</a></li><li>3. Fifolt M, Corvey KJ, Crosby JC, <b>Lee RA</b>, Burkholder GA, Nafziger S. Assessing COVID-19 Crisis Communication and Health Outcomes Based on the Intervention Ladder. <i>J Contingencies and Crisis Management</i>, vol 32 (1) 2024, <a href="https://doi.org/10.1111/1468-5973.12534">https://doi.org/10.1111/1468-5973.12534</a>.</li><li>4. Invited editor for Infectious Disease Clinics, Hot Topics in Lung Infections: <a href="https://www.sciencedirect.com/journal/infectious-disease-clinics-of-north-america/vol/38/issue/1">https://www.sciencedirect.com/journal/infectious-disease-clinics-of-north-america/vol/38/issue/1</a>, published March 2024</li></ol>
Influenza	Invited editor for Infectious Disease Clinics, Hot Topics in Lung Infections: <a href="https://www.sciencedirect.com/journal/infectious-disease-clinics-of-north-america/vol/38/issue/1">https://www.sciencedirect.com/journal/infectious-disease-clinics-of-north-america/vol/38/issue/1</a> , published March 2024
Prostate Cancer	none
RSV	Invited editor for Infectious Disease Clinics, Hot Topics in Lung Infections: <a href="https://www.sciencedirect.com/journal/infectious-disease-clinics-of-north-america/vol/38/issue/1">https://www.sciencedirect.com/journal/infectious-disease-clinics-of-north-america/vol/38/issue/1</a> , published March 2024

## Relevant Publications and Other Intellectual Interests for Ongoing Projects

### Acknowledgements and Attestations

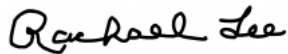
*By signing this form,*

- 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 above topic areas and that my disclosures are up to date.

Rachael Lee, MD MSPH

Name

8/6/2025



Signature

Date

**Disclosure Purpose:** Annual Governance Disclosure 2025-26, Contractor/Guest Annual Disclosure 2025 - 26

**Employment Information:** Currently Employed

### Summary of Interests

Company or Organization

Entity	Type	Interest Held By	Value
Hazelden Betty Ford Foundation	Employment Current Employment	Self	-
<div><div><b>Title:</b> Staff Physician (Part-time) <b>Start Date:</b> 07/25/2024  <b>Additional Information:</b></div><div><b>Position Description:</b> I am employed by Hazelden Betty Ford to provide weekend and intermittent coverage in the acute detoxification unit at a rehabilitation facility in Newberg, OR. I treat adults admitted for acute detoxification from alcohol or other substances. <b>End Date:</b> Ongoing / No Known End Date</div></div>			
US Department of Veterans Affairs	Employment Current Employment	Self	-
<div><div><b>Title:</b> Physician <b>Start Date:</b> 08/10/2015  <b>Additional Information:</b></div><div><b>Position Description:</b> Staff physician with clinical and research responsibilities within the VA system <b>End Date:</b> Ongoing / No Known End Date</div></div>			

### Additional Questions

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

None

2. As part of ACP's disclosure process, ACP requires your annual affirmation to abide by its Disclosure of Interests and Management of Conflicts Policy, Non-Disclosure Agreement, Intellectual Property Policy, Staff Confidentiality Policy and Anti-Harassment Policy as determined by your College involvement.

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?

Annals of Internal Medicine editorial staff?

Other (meeting guests, contractors, authors, speakers, project contributors, peer reviewers, etc.)

Yes (ACP board, committee, council, task force, and/or other governance group, Chapter Council or other Chapter leadership role, Annals of Internal Medicine editorial staff, Other (meeting guests, contractors, authors, speakers, project contributors, peer reviewers, etc.)

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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## Relevant Publications and Other Intellectual Interests for Ongoing Projects

### Disclosures of Interests: Supplemental Questions

Please review the following topic areas and report any intellectual or other relevant interests held by you or any household members from the last 3 years that may be relevant to the below topic areas.

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- Examples of types of intellectual interests include publications, unpaid participation on workgroups, panels, or committees, or membership in special interest groups.

### Clinical Guidelines Committee and Population Health and Medical Sciences Committee: Topics Currently Under Development

In the table below, please list any relevant intellectual interests (including relevant publications from peer- and non-peer-reviewed sources or other relevant interests not captured in your Convey.

You only need to report interests from the last 3 years and you do not need to report publications developed on behalf of ACP. You may also share a list of publications via a link to list of your published works (such as ORCID or PubMed) or as an attachment (write “see attachment” in table).

Clinical Topic Area	Relevant Interests from Last 3 Years <i>If none, write “None”</i>
Anxiety	None
Breast Cancer	None
COVID-19	<p>Publications related to COVID-19: Holmer HK, Mackey K, Fiordalisi CV, Helfand M. Major Update 2: Antibody Response and Risk for Reinfection After SARS-CoV-2 Infection-Final Update of a Living, Rapid Review. Ann Intern Med. 2023 Jan;176(1):85-91. doi: 10.7326/M22-1745. Epub 2022 Nov 29. PMID: 36442059; PMCID: PMC9707440.</p> <p>Mackey K, Kansagara D, Vela K. Update Alert 10: Risks and Impact of Angiotensin-Converting Enzyme Inhibitors or Angiotensin-Receptor Blockers on SARS-CoV-2 Infection in Adults. Ann Intern Med. 2023 May;176(5):eL230049. doi: 10.7326/L23-0049. Epub 2023 Mar 21. PubMed PMID: 36940439; PubMed Central PMCID: PMC10064412.</p>
Depression	<p>Publication related to depression treatment: Mackey K, Anderson JK, Williams BE, Ward RM, Parr NJ. Evidence Brief: Psychedelic Medications for Mental Health and Substance Use Disorders. Washington, DC: Evidence Synthesis Program, Health Services Research and Development Service, Office of Research and Development, Department of Veterans Affairs. VA ESP Project #09-199; 2022.</p>
Hyperlipidemia	None
Hypertension	None
Influenza	None
Insomnia	None
Menopausal Therapy	None
Obesity	None
Osteoporosis	None
Prostate Cancer	None

## Relevant Publications and Other Intellectual Interests for Ongoing Projects

Rhinosinusitis	None
RSV	None

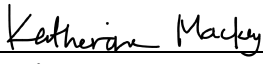
### Acknowledgements and Attestations

*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 above topic areas and that my disclosures are up to date.

Katherine Mackey

\_\_\_\_\_  
Name

  
\_\_\_\_\_  
Signature

8/7/25

\_\_\_\_\_  
Date

<b>Discloser Identifier:</b> 01440828	<b>Disclosure Purpose:</b> Annual Governance Disclosure 2025-26	<b>Employment Information:</b> Currently Employed
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## Summary of Interests

### Company or Organization

Entity	Type	Interest Held By	Value								
Illumina, Inc.	Stock	Self	\$579.00								
<div><div>Percentage Ownership: 0</div><div>Estimated Value: \$579.00</div><div>Divestment Date: 03/21/2025</div><div>Additional Information:</div></div> <div>Valuation Date: 03/21/2025</div>											
M Health Fairview- University Of Minnesota Medical Center	Employment <div>Current Employment</div>	Self	-								
<div><div>Title: Staff Hospitalist</div><div>Start Date: 07/01/2012</div><div>Additional Information:</div></div> <div>Position Description: I work as a staff physician in the hospital full time</div> <div>End Date: Ongoing / No Known End Date</div>											
sylver consulting	Consultant	Self	\$850.00								
<div><div>Category: Consultant</div><div>End Date: 01/16/2025</div><div>Compensation Type: Cash</div><div>Compensation: Yes</div></div> <div>Start Date: 01/16/2025</div>											
<table><tr><th>Year</th><th>Amount</th><th>Amount Type</th><th>Compensation Type</th></tr><tr><td>2025</td><td>\$850.00</td><td>Actual</td><td>Cash</td></tr></table>				Year	Amount	Amount Type	Compensation Type	2025	\$850.00	Actual	Cash
Year	Amount	Amount Type	Compensation Type								
2025	\$850.00	Actual	Cash								
Additional Information: This is an one time only commitment, where I discussed the role of Utilization management in hospital											
Thermo Fisher Scientific	Stock	Self	\$5200.00								
<div><div>Percentage Ownership: 0</div><div>Estimated Value: \$5,200.00</div><div>Divestment Date: 03/21/2025</div><div>Additional Information:</div></div> <div>Valuation Date: 03/21/2025</div>											
United HealthCare Services, Inc.	Stock	Self	\$3800.00								
<div><div>Percentage Ownership: 0</div><div>Estimated Value: \$3,800.00</div><div>Divestment Date: 03/21/2025</div><div>Additional Information:</div></div> <div>Valuation Date: 03/21/2025</div>											
Zimmer Biomet Holdings, Inc.	Stock	Self	\$684.00								
<div><div>Percentage Ownership: 0</div><div>Estimated Value: \$684.00</div><div>Divestment Date: 03/21/2025</div><div>Additional Information:</div></div> <div>Valuation Date: 03/21/2025</div>											

## Additional Questions

1. Please specify any additional information which you consider relevant to this disclosure.
2. As part of ACP's disclosure process, ACP requires your annual affirmation to abide by its **Disclosure of Interests and Management of Conflicts Policy**, **Non-Disclosure Agreement**, **Intellectual Property Policy**, **Staff Confidentiality Policy** and **Anti-Harassment Policy** as determined by your College involvement.

a. Are you submitting your disclosures to ACP as a member of one of the following groups:

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- **Chapter Council or other Chapter leadership role?**
- **Annals of Internal Medicine editorial staff?**
- **Other (meeting guests, contractors, authors, speakers, project contributors, peer reviewers, etc.)**

Yes (ACP board, committee, council, task force, and/or other governance group, Chapter Council or other Chapter leadership role, Annals of Internal Medicine editorial staff, Other (meeting guests, contractors, authors, speakers, project contributors, peer reviewers, etc.)

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

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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

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Yes

## Certification

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## Relevant Publications and Other Intellectual Interests for Ongoing Projects

### Disclosures of Interests: Supplemental Questions

Please review the following topic areas and report any intellectual or other relevant interests held by you or any household members from the last 3 years that may be relevant to the below topic areas.

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### Population Health and Medical Sciences Committee: Topics Currently Under Development

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You may also share a list of publications via a link to list of your published works (such as ORCHID or PubMed) or as an attachment (write "see attachment" in table).

Clinical Topic Area Relevant Interests from Last 3 Years

*If none, write "None"*

COVID-19

*None*

Influenza

*None*

Prostate Cancer

*None*

RSV

*None*

### Acknowledgements and Attestations

*By signing this form,*

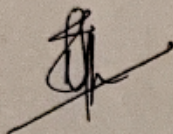
- I acknowledge that in order to maintain transparency, all participants' disclosure of interests will be publicly available on ACP's website and a link to the disclosures will be included in each published work.



- I attest that I have reviewed the above topic areas and that my disclosures are up to date.

Name THEJASWI K. POONACHA

Signature Date



08/05/2025

<b>Discloser Identifier:</b> 01164590	<b>Disclosure Purpose:</b> Annual Governance Disclosure 2025-26	<b>Employment Information:</b> Currently Employed
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Summary of Interests

Company or Organization

Entity	Type	Interest Held By	Value
American College of Physicians	Travel	Self	\$1000.00
<div><div><b>Location(s):</b> Philadelphia, PA</div><div><b>Travel End Date:</b> 05/10/2024</div><div><b>Valuation Date:</b> 01/02/2025</div><div><b>Additional Information:</b></div></div> <div><b>Travel Start Date:</b> 05/09/2024</div> <div><b>Estimated Value:</b> \$1,000.00</div> <div><b>Purpose:</b> ACP Committee Meeting</div>			
Michigan Medicine	Employment <div>Current Employment</div>	Self	-
<div><div><b>Title:</b> Professor</div><div><b>Start Date:</b> 07/01/2008</div><div><b>Additional Information:</b></div></div> <div><b>Position Description:</b> Department of Internal Medicine, Division of Gastroenterology</div> <div><b>End Date:</b></div>			
National Cancer Institute	Grant / Contract	Self	\$3603234.00
<div><div><b>Recipient Name:</b> University of Michigan</div><div><b>Grant / Contract Description:</b> Grant funding de-implementation trial focused on low-value prostate cancer treatment</div><div><b>Contract Start Date:</b> 10/01/2022</div><div><b>Grant / Contract Amount:</b>\$3,603,234.00</div><div><b>Additional Information:</b></div></div> <div><b>Recipient Type:</b> Institution</div> <div><b>Grant / Contract Purpose:</b> Research</div> <div><b>Grant / Contract Valuation Date:</b> 01/19/2024</div> <div><b>Contract End Date:</b> 12/31/2024</div>			
U.S. Department of Veterans Affairs	Employment <div>Current Employment</div>	Self	-
<div><div><b>Title:</b> Director, HSR&amp;D Center for Clinical Management Research</div><div><b>Start Date:</b> 07/01/2008</div><div><b>Additional Information:</b> Primary employer</div></div> <div><b>Position Description:</b> Gastroenterologist at VA Ann Arbor Healthcare System Research Scientist at the VA Ann Arbor Center for Clinical Management Research</div> <div><b>End Date:</b> Ongoing / No Known End Date</div>			
U.S. Department of Veterans Affairs	Employment	Spouse/Partner	-
<div><div><b>Title:</b> Staff Physician</div><div><b>Start Date:</b> 07/01/2005</div><div><b>Additional Information:</b></div></div> <div><b>Position Description:</b> General internist at VA Ann Arbor Healthcare System</div> <div><b>End Date:</b> Ongoing / No Known End Date</div>			
U.S. Department of Veterans Affairs	Grant / Contract	Self	\$500000.00
<div><div><b>Recipient Name:</b> Sameer D Saini</div><div><b>Grant / Contract Description:</b> Reducing use of low value colonoscopy</div><div><b>Contract Start Date:</b> 10/01/2019</div><div><b>Grant / Contract Amount:</b>\$500,000.00</div><div><b>Additional Information:</b></div></div> <div><b>Recipient Type:</b> Institution</div> <div><b>Grant / Contract Purpose:</b> Research</div> <div><b>Grant / Contract Valuation Date:</b> 08/21/2020</div> <div><b>Contract End Date:</b> 09/30/2024</div>			
U.S. Department of Veterans Affairs	Grant / Contract	Self	\$1099389.00
<div><div><b>Recipient Name:</b> Sameer D Saini, Grace Su</div><div><b>Recipient Type:</b> Institution</div></div>			

Entity	Type	Interest Held By	Value
<b>Grant / Contract Description:</b> Using Analytic Morphomics to Predict Outcomes and Improve Access in Chronic Liver Disease <b>Contract Start Date:</b> 05/01/2019 <b>Grant / Contract Amount:</b> \$1,099,389.00 <b>Additional Information:</b>			
<b>Grant / Contract Purpose:</b> Research <b>Grant / Contract Valuation Date:</b> 01/08/2021 <b>Contract End Date:</b> 04/30/2023			
U.S. Department of Veterans Affairs	Grant / Contract	Self	\$50000.00
<b>Recipient Name:</b> Sameer D Saini <b>Grant / Contract Description:</b> Grant related to performance measure refinement on colorectal cancer screening overuse <b>Contract Start Date:</b> 09/01/2019 <b>Grant / Contract Amount:</b> \$50,000.00 <b>Additional Information:</b>			
<b>Recipient Type:</b> Institution <b>Grant / Contract Purpose:</b> Other - Operational development <b>Grant / Contract Valuation Date:</b> 08/21/2020 <b>Contract End Date:</b> 12/31/2023			
U.S. Department of Veterans Affairs	Grant / Contract	Self	\$5755000.00
<b>Recipient Name:</b> Sameer D Saini <b>Grant / Contract Description:</b> VA Center of Innovation Grant <b>Contract Start Date:</b> 10/01/2018 <b>Grant / Contract Amount:</b> \$5,755,000.00 <b>Additional Information:</b>			
<b>Recipient Type:</b> Institution <b>Grant / Contract Purpose:</b> Research <b>Grant / Contract Valuation Date:</b> 08/27/2024 <b>Contract End Date:</b> 09/30/2029			

## Additional Questions

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

None

2. As part of ACP's disclosure process, ACP requires your annual affirmation to abide by its Disclosure of Interests and Management of Conflicts Policy, Non-Disclosure Agreement, Intellectual Property Policy, Staff Confidentiality Policy and Anti-Harassment Policy as determined by your College involvement.

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?
- Annals of Internal Medicine editorial staff?
- Other (meeting guests, contractors, authors, speakers, project contributors, peer reviewers, etc.)

Yes (ACP board, committee, council, task force, and/or other governance group, Chapter Council or other Chapter leadership role, Annals of Internal Medicine editorial staff, Other (meeting guests, contractors, authors, speakers, project contributors, peer reviewers, etc.)

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:

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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

## Relevant Publications and Other Intellectual Interests for Ongoing Projects

### Disclosures of Interests: Supplemental Questions

Please review the following topic areas and report any intellectual or other relevant interests held by you or any household members from the last 3 years that may be relevant to the below topic areas.

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- Examples of types of intellectual interests include publications, unpaid participation on workgroups, panels, or committees, or membership in special interest groups.

### Population Health and Medical Sciences Committee: Topics Currently Under Development

In the table below, please list any relevant intellectual interests (including relevant publications from peer- and non-peer-reviewed sources or other relevant interests not captured in your Convey.

You only need to report interests from the last 3 years and you do not need to report publications developed on behalf of ACP.

You may also share a list of publications via a link to list of your published works (such as ORCID or PubMed) or as an attachment (write “see attachment” in table).

Clinical Topic Area	Relevant Interests from Last 3 Years <i>If none, write “None”</i>
COVID-19	<p>Adams MA, Kerr EA, Gao Y, Saini SD. Impacts of COVID-19 on appropriate use of screening colonoscopy in a large integrated healthcare delivery system. J Gen Intern Med. 2023 Aug;38(11):2577-2583. PMID: PMC10212219.</p> <p>Iwashyna TJ, Seelye S, Berkowitz TS, Pura J, Bohnert ASB, Bowling CB, Boyko EJ, Hynes DM, Ioannou GN, Maciejewski ML, O'Hare AM, Viglianti EM, Womer J, Prescott HC, Smith VA; VA HSR&amp;D COVID-19 Observational Research Collaboratory. Late mortality after COVID-19 infection among US Veterans vs risk-matched comparators: A 2-Year cohort analysis. JAMA Intern Med. 2023 Oct 1;183(10):1111-1119. PMID: PMC10442778.</p> <p>Hebert PL, Kumbier KE, Smith VA, Hynes DM, Govier DJ, Wong E, Kaufman BG, Shepherd-Banigan M, Rowneki M, Bohnert ASB, Ioannou GN, Boyko EJ, Iwashyna TJ, O'Hare AM, Bowling CB, Viglianti EM, Maciejewski ML; VA COVID-19 Observational Research Collaboratory (CORC). Changes in outpatient health care use after COVID-19 infection among Veterans. JAMA Netw Open. 2024 Feb 5;7(2):e2355387. PMID: PMC10858406.</p> <p>Iwashyna TJ, Smith VA, Seelye S, Bohnert ASB, Boyko EJ, Hynes DM, Ioannou GN, Maciejewski ML, O'Hare AM, Viglianti EM, Berkowitz TS, Pura J, Womer J, Kamphuis LA, Monahan ML, Bowling CB; VA HSR&amp;D COVID-19 Observational Research Collaboratory (CORC). Self-reported everyday functioning after COVID-19 infection. JAMA Netw Open. 2024 Mar 4;7(3):e240869. [Online ahead of print.] PMID: PMC10907923.</p> <p>Hauschildt KE, Bui DP, Govier DJ, Eaton TL, Viglianti EM, Ettman CK, McCready H, Smith VA, O'Hare AM, Osborne TF, Boyko EJ, Ioannou GN, Maciejewski ML, Bohnert ASB, Hynes DM, Iwashyna TJ; VA COVID-19 Observational Research Collaboratory (CORC). Regional variation in financial hardship among US veterans during the COVID-19 pandemic. Health Aff Sch. 2024 Jun 5;2(6):qxae075. PMID: PMC11210296.</p>

## Relevant Publications and Other Intellectual Interests for Ongoing Projects

	Kim, et al. Impact of COVID-19 on specialty televisits in a large integrated health care system. Am J Manag Care 2025 Jun;31(6):296-300.
Influenza	NONE
Prostate Cancer	<p><b>Grant</b>  R37CA222885 (Co-PIs Sameer Saini, Ted Skolarus)  01/16/2018-12/31/2024  NCI, National Institutes of Health  Total Award: \$3,603,234  De-implementation of low value castration for men with prostate cancer  Role: Co-Principal Investigator (Sameer effort start date 10/01/2022)</p> <p><b>Publication</b>  Skolarus TA, Hawley ST, Forman J, Sales AE, Sparks JB, Metreger T, Burns J, Caram MV, Radhakrishnan A, Dossett LA, Makarov DV, Leppert JT, Shelton JB, Stensland KD, Dunsmore J, MacLennan S, Saini S, Hollenbeck BK, Shahinian V, Wittmann DA, Deolankar V, Sriram S. Unpacking overuse of androgen deprivation therapy for prostate cancer to inform de-implementation strategies. Implement Sci Commun. 2024 Apr 9;5(1):37. [Online ahead of print.] PMID: PMC11005280.</p> <p>Prostate Cancer Mortality in Men Aged 70 Years Who Recently Underwent Prostate-Specific Antigen Screening.  Chung DH, Caverly TJ, Schipper MJ, Hofer TP, Gulati R, Rose BS, Caram MEV, Tsao PA, Stensland KD, Elliott D, Saini SD, Bryant AK.  JAMA Netw Open. 2025 Feb 3;8(2):e2459766. doi: 10.1001/jamanetworkopen.2024.59766.  PMID: 39951264</p> <p>Rates of PSMA PET Staging and Positivity in Newly Diagnosed Prostate Cancer in a National Health Care System.  Miller SR, Gonzalez RT, Jackson WC, Caram MEV, Tsao PA, Stensland K, Shah Y, Wale D, Wong KK, Viglianti BL, Elliott D, Caverly T, Hofer TP, Saini S, Green MD, Schipper M, Dess RT, Bryant AK.  J Nucl Med. 2025 Jan 3;66(1):75-83. doi: 10.2967/jnumed.124.268555.  PMID: 39753368</p>
RSV	NONE

## 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 above topic areas and that my disclosures are up to date.

Sameer D. Saini

Name



Signature

8/12/2025

Date



**Disclosure Purpose:** Annual Governance Disclosure 2025-26 (Expiration Date: 08/13/2026), Internal Medicine Meeting 2025 Faculty (Expiration Date: 08/13/2026), Appointee Disclosure (Expiration Date: 08/13/2026), ACP/ Annals Forum (Expiration Date: 08/13/2026), 2025 ACP Illinois-Education Committee (Expiration Date: 08/13/2026), ACP Illinois IM 2024-Education Committee (Expiration Date: 08/13/2026), Internist Editorial Advisory Board (Expiration Date: 08/13/2026)

**Employment Information:** Currently Employed

Summary of Interests

Company or Organization

Entity	Type	Interest Held By	Value
School of Medicine, Southern Illinois University	Employment Current Employment	Self	-
<div><div>Title: Professor of medicine Start Date: 09/08/2008 Additional Information:</div><div>Position Description: Chief of Infectious Diseases Pandemic response Officer End Date:</div></div>			

Additional Questions

1. Please specify any additional information which you consider relevant to this disclosure.  
  
Medical Advisor to the local health department ( Sangamon County Department of Public health)
2. As part of ACP's disclosure process, ACP requires your annual affirmation to abide by its Disclosure of Interests and Management of Conflicts Policy, Non-Disclosure Agreement, Intellectual Property Policy, Staff Confidentiality Policy and Anti-Harassment Policy as determined by your College involvement.  
  
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?

■ Annals of Internal Medicine editorial staff?

■ Other (meeting guests, contractors, authors, speakers, project contributors, peer reviewers, etc.)

  
Yes (ACP board, committee, council, task force, and/or other governance group, Chapter Council or other Chapter leadership role, Annals of Internal Medicine editorial staff, Other (meeting guests, contractors, authors, speakers, project contributors, peer reviewers, etc.)  
  
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

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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
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## Relevant Publications and Other Intellectual Interests for Ongoing Projects

### Disclosures of Interests: Supplemental Questions

Please review the following topic areas and report any intellectual or other relevant interests held by you or any household members from the last 3 years that may be relevant to the below topic areas.

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### Population Health and Medical Sciences Committee: Topics Currently Under Development

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You may also share a list of publications via a link to list of your published works (such as ORCID or PubMed) or as an attachment (write “see attachment” in table).

Clinical Topic Area	Relevant Interests from Last 3 Years <i>If none, write “None”</i>
COVID-19	Illinois Department of Public Health -Immunization Advisory Committee Starting 2025-2026. Participates in multiple interviews (radio and newspaper) about the respiratory season and various respiratory viruses
Influenza	Illinois Department of Public Health -Immunization Advisory Committee Starting 2025-2026. Participates in multiple interviews (radio and newspaper) about the respiratory season and various respiratory viruses
Prostate Cancer	NONE
RSV	Work group member CDC- Adult RSV vaccine appointed by ACP- Work group ended in May 2025. Illinois Department of Public Health - Immunization Advisory Committee Starting 2025-2026. Participates in multiple interviews (radio and newspaper) about the respiratory season and various respiratory viruses

### 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 above topic areas and that my disclosures are up to date.

## Relevant Publications and Other Intellectual Interests for Ongoing Projects

Vidya Sundareshan

Name



8/26/2025

Signature

Date

**Disclosure Purpose:** Annual Governance Disclosure 2025-26, Contributor Disclosure, Contractor/Guest Annual Disclosure 2025 - 26

**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	\$2000000.00
<div><div><b>Recipient Name:</b> University of Minnesota and Center for Veterans Research and Education <b>Grant / Contract Description:</b> Contracts from AHRQ through their EPC program to conduct evidence reports <b>Contract Start Date:</b> 01/01/2022 <b>Grant / Contract Amount:</b>\$2,000,000.00 <b>Additional Information:</b> I provide approx. 25% 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. The above amount represents currently funded projects in our EPC</div><div><b>Recipient Type:</b> Institution <b>Grant / Contract Purpose:</b> Research <b>Grant / Contract Valuation Date:</b> 04/06/2023 <b>Contract End Date:</b> 06/30/2025</div></div>			
American College of Physicians	Other	Other - Minneapolis VA CVRE	-
<div><div><b>Category:</b> Other <b>End Date:</b> 05/31/2026 <b>Compensation Type:</b> Other <b>Compensation:</b> No <b>Additional Information:</b> Support for our research group to ACP Center for Evidence Reviews, conducting evidence report on "Newer Anti-Diabetes Medications"</div><div><b>Start Date:</b> 01/01/2022 <b>Other Compensation:</b> 250,000</div></div>			
American Urological Association Foundation	Other	Other - Minneapolis VA CVRE	-
<div><div><b>Category:</b> Other <b>End Date:</b> 06/01/2023 <b>Compensation Type:</b> Unpaid <b>Compensation:</b> No <b>Additional Information:</b> Our research organization receives funding (approximately \$40,000) for our Minnesota Evidence Review Team research group to conduct reviews under contract with the AUA for their BPH clinical guideline development. I receive no personal financial support</div><div><b>Start Date:</b> 08/01/2022</div></div>			
Midwest CEPAC-ICER	Other	Self	-
<div><div><b>Category:</b> Other <b>End Date:</b> <b>Compensation Type:</b> Unpaid <b>Compensation:</b> <b>Additional Information:</b></div><div><b>Start Date:</b> 01/01/2018</div></div>			
U.S. Department of Veterans Affairs	Employment <div>Current Employment</div>	Self	-
<div><div><b>Title:</b> Professor <b>Start Date:</b> 06/15/2018 <b>Additional Information:</b> Current projects include:Screening for Hepatocellular Cancer among increased-risk adults</div><div><b>Position Description:</b> Staff Physician <b>End Date:</b> Ongoing / No Known End Date</div></div>			
U.S. Department of Veterans Affairs	Grant / Contract	Other - Research funds from VA-HSRD are sent to our VA Research Office	\$375000.00

Entity	Type	Interest Held By	Value
<b>Recipient Name:</b> Timothy Wilt <b>Grant / Contract Description:</b> Grant <b>Contract Start Date:</b> 10/01/2022 <b>Grant / Contract Amount:</b> \$375,000.00 <b>Additional Information:</b> Funding from VA-HSRD supports our VA Evidence Synthesis Program Center (which i direct) to conduct evidence reports to inform VA practice and policy. I receive no salary		<b>Recipient Type:</b> Individual <b>Grant / Contract Purpose:</b> Research <b>Grant / Contract Valuation Date:</b> 04/07/2023 <b>Contract End Date:</b> 09/30/2026	
VA Preventive Medical Advisory Committee	Consultant	Self	-
<b>Category:</b> Consultant <b>End Date:</b> <b>Compensation Type:</b> Unpaid <b>Compensation:</b> <b>Additional Information:</b>			
<b>Start Date:</b> 01/01/2018			

Intellectual Property

Type	Is Licensed	Interest Held By	Value
Other Intellectual Property - Evidence report written on Genito-urinary Syndrom	-	Other - AHRQ funded evidence report	-
<b>Description:</b> Evidence report written on Genito-urinary Syndrome of Menopause:AHRQ-EPC <b>Additional Information:</b> 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 EPC Director and subcontract PI. I did not receive salary support <b>Income:</b> No <b>Additional Information:</b> 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 EPC Director and subcontract PI. I did not receive salary support			
Other Intellectual Property - Research grants/contracts from VA, AHRQ, and ACP	-	Self	\$650000.00
<b>Description:</b> Research grants/contracts from VA, AHRQ, and ACP to conduct evidence synthesis reports. <b>Additional Information:</b> The funds of payment through home institution are research support for programs NOT personal salary. I receive approximately 5-30,000 annually as additional salary through the University of Minnesota beyond my VA salary for grant support as c-director through AHRQ for Evidence-based Practice Center reports as part of my role as co-director of the MN-EPC <b>Income:</b> Yes			
<b>Income Source:</b> Funds paid to my institution to support work of our evidence review team. AHRQ contracts can support my salary. Others do not.			
Amount	Amount Type	Year	Payment Receipt
\$650,000.00	Estimated	2025	Payment through home institution
<b>Additional Information:</b> The funds of payment through home institution are research support for programs NOT personal salary. I receive approximately 5-30,000 annually as additional salary through the University of Minnesota beyond my VA salary for grant support as c-director through AHRQ for Evidence-based Practice Center reports as part of my role as co-director of the MN-EPC			

Additional Questions

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

There was an erroneous payment reported in Open Payments from 2021. Organon (which purchased Alydia Health the company that submitted the erroneous payment) has submitted a correction noting that no such payment exists or was made to Timothy Wilt. I have contacted CMS Open payments and they informed me that this erroneous payment will be removed once they update their database which will occur in mid-late 2025. The erroneous entry has been removed

2. As part of ACP's disclosure process, ACP requires your annual affirmation to abide by its Disclosure of Interests and Management of Conflicts Policy, Non-Disclosure Agreement, Intellectual Property Policy, Staff Confidentiality Policy and Anti-Harassment Policy as determined by your College involvement.

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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

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Yes

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Clinical Topic Area	Relevant Interests from Last 3 Years <i>If none, write “None”</i>
COVID-19	None beyond what entered last time though am serving as ACP rep on the Vaccine effectiveness Project
Influenza	See above
Prostate Cancer	I have written articles about screening and treatment
RSV	See comments re: COVID and influenza

### 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 above topic areas and that my disclosures are up to date.

Timothy J. Wilt

Name

Timothy J. Wilt (e-signed) 8/5/25

Signature

Date



## PubMed Bibliography:

<https://pubmed.ncbi.nlm.nih.gov/?term=wilt%2C%20tj&filter=years.2022-2025&sort=pubdate&page=3>

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## Prostate Cancer: Moderate

Cooperberg MR, Braun AE, Berlin A, Kibel AS, Eggener SE; CANCER-GG1 Writing Group. When is prostate cancer really cancer? J Natl Cancer Inst. 2025 Mar 1;117(3):402-405. doi: 10.1093/jnci/djae200. PMID: 39350309.

Dahm P, Wilt TJ. Re: Radical Prostatectomy or Watchful Waiting in Early Prostate Cancer. Eur Urol. 2024 Nov 15:S0302-2838(24)02687-3. doi: 10.1016/j.eururo.2024.10.025. Epub ahead of print. PMID: 39550331.

<https://pubmed.ncbi.nlm.nih.gov/39550331/>

Cooperberg MR, Braun AE, Berlin A, Kibel AS, Eggener SE; CANCER-GG1 Writing Group. When is prostate cancer really cancer? J Natl Cancer Inst. 2024 Oct 1:djae200. doi: 10.1093/jnci/djae200. Epub ahead of print. PMID: 39350309.

<https://pubmed.ncbi.nlm.nih.gov/39350309/>

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Wilt TJ, Dahm P. Prostate cancer screening with MRI does not differ from PSA only for detection but reduces biopsies and overdiagnosis. Ann Intern Med. 2024 Aug;177(8):JC94. doi: 10.7326/ANNALS-24-01275-JC. Epub 2024 Aug 6. PMID: 39102726.

<https://pubmed.ncbi.nlm.nih.gov/39102726/>

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With Contemporary Cohorts. *J Urol*. 2024 Aug;212(2):310-319. doi: 10.1097/JU.0000000000004039. Epub 2024 Jun 12. PMID: 38865734; PMCID: PMC11233245.

<https://pubmed.ncbi.nlm.nih.gov/38865734/>

Landsteiner, A., Sowerby, C., Ullman, K., Anthony, M., Kalinowski, C., Ester, E., ... & Wilt, T. J. (2023). Hypofractionation Radiation Therapy for Definitive Treatment of Selected Cancers: A Systematic Review.

<https://www.ncbi.nlm.nih.gov/books/NBK595072/>

Wilt TJ, Vo TN, Langsetmo L, Dahm P, Wheeler T, Aronson WJ, Cooperberg MR, Taylor BC, Brawer MK. Corrigendum to "Radical Prostatectomy or Observation for Clinically Localized Prostate Cancer: Extended Follow-up of the Prostate Cancer Intervention Versus Observation Trial (PIVOT)" [*Eur Urol* 77 (2020) 713-24]. *Eur Urol*. 2022 Feb;81(2):e52. doi: 10.1016/j.eururo.2021.11.009. Epub 2021 Nov 23. Erratum for: *Eur Urol*. 2020 Jun;77(6):713-724. doi: 10.1016/j.eururo.2020.02.009. PMID: 34836682.

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Wilt, T. J., & Dahm, P. (2022). Is Gleason 6 cancer? The answer is more than just a name'. *BJU*

<https://pubmed.ncbi.nlm.nih.gov/36354269/>

## Prostate Cancer: Low

Lamina T, Abdi HI, Behrens K, Parikh R, Call K, Claussen AM, Dill J, Grande SW, Houghtaling L, Jones-Webb R, Nkimbeng M, Rogers EA, Sultan S, Widome R, Wilt TJ, Butler M. Strategies to Address Racial and Ethnic Disparities in Health and Health Care for Chronic Conditions : An Evidence Map of Research From 2017 to 2024. *Ann Intern Med*. 2025 Jan;178(1):88-97. doi: 10.7326/ANNALS-24-01262. Epub 2024 Dec 17. PMID: 39680922; PMCID: PMC11884814.

## COVID: Low

Gustavson, Allison M., et al. "Reimagining How We Synthesize Information to Impact Clinical Care, Policy, and Research Priorities in Real Time: Examples and Lessons Learned from COVID-19." *Journal of general internal medicine* (2024): 1-6.

<https://pubmed.ncbi.nlm.nih.gov/38926318/>

**Disclosure Purpose:** Annual Governance Disclosure 2025-26, ACP FL 2025 Annual Scientific Meeting, 2025 MA ACP Annual Scientific Meeting, Appointee Disclosure, ACP FL 2024 Speakers Annual Scientific Meeting, ACP/Annals Forum, 2025 ACP Ohio/USAF Chapter Annual Meeting Faculty

**Employment Information:** Currently Employed

## Summary of Interests

### Company or Organization

Entity	Type	Interest Held By	Value								
American College of Physicians	Fiduciary Officer	Self	\$165000.00								
<div><div><b>Official Title:</b> President <b>Compensation Type:</b> Other, Cash <b>Start Date:</b> 04/05/2025 <b>Compensation:</b> Yes</div><div><b>Position Description:</b> President of the ACP <b>Other Compensation:</b> stipend and honorarium <b>End Date:</b> 04/18/2026</div></div> <table><thead><tr><th>Year</th><th>Amount</th><th>Amount Type</th><th>Compensation Type</th></tr></thead><tbody><tr><td>2025</td><td>\$165,000.00</td><td>Actual</td><td>Cash</td></tr></tbody></table> <div><b>Additional Information:</b> Fiduciary officer</div>				Year	Amount	Amount Type	Compensation Type	2025	\$165,000.00	Actual	Cash
Year	Amount	Amount Type	Compensation Type								
2025	\$165,000.00	Actual	Cash								
jason m goldman	Employment <b>Current Employment</b>	Self	-								
<div><div><b>Title:</b> president <b>Start Date:</b> 05/01/2002 <b>Additional Information:</b></div><div><b>Position Description:</b> owner of solo medical practice <b>End Date:</b></div></div>											

## Additional Questions

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

2. As part of ACP's disclosure process, ACP requires your annual affirmation to abide by its Disclosure of Interests and Management of Conflicts Policy, Non-Disclosure Agreement, Intellectual Property Policy, Staff Confidentiality Policy and Anti-Harassment Policy as determined by your College involvement.

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?

Annals of Internal Medicine editorial staff?

Other (meeting guests, contractors, authors, speakers, project contributors, peer reviewers, etc.)

Yes (ACP board, committee, council, task force, and/or other governance group, Chapter Council or other Chapter leadership role, Annals of Internal Medicine editorial staff, Other (meeting guests, contractors, authors, speakers, project contributors, peer reviewers, etc.)

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

## Relevant Publications and Other Intellectual Interests for Ongoing Projects

### Disclosures of Interests: Supplemental Questions

Please review the following topic areas and report any intellectual or other relevant interests held by you or any household members from the last 3 years that may be relevant to the below 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.

### Topics Currently Under Development

In the table below, please list any relevant intellectual interests (including relevant publications from peer- and non-peer-reviewed sources or other relevant interests not captured in your Convey.

You only need to report interests from the last 3 years and you do not need to report publications developed on behalf of ACP.

You may also share a list of publications via a link to list of your published works (such as ORCID or PubMed) or as an attachment (write “see attachment” in table).

Clinical Topic Area	Relevant Interests from Last 3 Years <i>If none, write “None”</i>
Anxiety	
Breast Cancer	
Cardiovascular disease	
COVID-19	Published several op-Ed's in Annals on vaccines and ACIP
Depression	
Diabetes	
Hyperlipidemia	
Hypertension	
Influenza	
Insomnia	
Kidney health	
Menopausal therapy	
Migraine	
Obesity	
Osteoporosis	
Prostate Cancer	
Rhinosinusitis	
RSV	Published several op-Ed's in Annals on vaccines and ACIP

### 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.

## Relevant Publications and Other Intellectual Interests for Ongoing Projects

- I attest that I have reviewed the above topic areas and that my disclosures are up to date.

Jason M. Goldman, MD, PAC

Name

Signature



07/26/2025

Date

Rebecca Andrews

**Disclosure Purpose:** Annual Governance Disclosure 2025-26 (Expiration Date: 07/16/2026), Appointee Disclosure (Expiration Date: 07/16/2026), AMA Delegation (Expiration Date: 07/16/2026), ACP/ Annals Forum (Expiration Date: 07/16/2026), 2024 ACP-WI Annual Scientific Meeting (Expiration Date: 07/16/2026), Internal Medicine Meeting 2025 Faculty (Expiration Date: 07/16/2026)

**Employment Information:** Currently Employed

Summary of Interests

Company or Organization

Entity	Type	Interest Held By	Value
American College of Physicians	Fiduciary Officer Current Employment	Self	-
<div><div><b>Official Title:</b> Chair- Elect; Chair of the Board of Regents <b>Compensation Type:</b> Cash <b>Start Date:</b> 04/21/2024 <b>Compensation:</b> Yes <b>Additional Information:</b></div><div><b>Position Description:</b> serve 1 year as the Chair-elect of the BOR and 1 as the Chair. Liason b/t governance and organization <b>End Date:</b> 04/12/2026</div></div>			
American College of Physicians	Fiduciary Officer	Self	-
<div><div><b>Official Title:</b> 2024-2025 Chair-elect Board of Regents <b>Compensation Type:</b> Cash <b>Start Date:</b> 04/27/2024 <b>Compensation:</b> <b>Additional Information:</b></div><div><b>Position Description:</b> Liaison b/t Chapter Governors and the executive boards/senior leadership with multiple responsibili <b>End Date:</b></div></div>			
Center for Integrated Healthcare, U.S. Department of Veterans Affairs	Employment Current Employment	Self	-
<div><div><b>Title:</b> Staff physician <b>Start Date:</b> 10/01/2009 <b>Additional Information:</b> Salaried employment</div><div><b>Position Description:</b> Rocky Hill VA in CT - staff physician <b>End Date:</b> Ongoing / No Known End Date</div></div>			
dph	Grant / Contract	Self	\$10000.00
<div><div><b>Recipient Name:</b> UConn Health <b>Grant / Contract Description:</b> Overdose2Action grant for education on safe pain management <b>Contract Start Date:</b> 09/01/2020 <b>Grant / Contract Amount:</b>\$10,000.00 <b>Additional Information:</b> the funds are allotted to the institution, the specific amount is the amount support of my time/salary</div><div><b>Recipient Type:</b> Institution <b>Grant / Contract Purpose:</b> Other - education <b>Grant / Contract Valuation Date:</b> 12/21/2023 <b>Contract End Date:</b></div></div>			
uconn health	Employment Current Employment	Self	-
<div><div><b>Title:</b> Assoc Program Director, Lead physician CCPC and PCMH <b>Start Date:</b> 09/30/2009 <b>Additional Information:</b></div><div><b>Position Description:</b> primary care practitioner also assoc program director for IM residency program and lead clinician for the comprehensive pain center and pcmh <b>End Date:</b> Ongoing / No Known End Date</div></div>			
various entities for expert witness	Expert Witness Current Employment	Self	-
<div><div><b>Category:</b> Expert Witness <b>End Date:</b> Ongoing / No Known End Date <b>Compensation Type:</b> Cash</div><div><b>Start Date:</b> 01/01/2017</div></div>			



Entity	Type	Interest Held By	Value
<b>Compensation:</b> Yes <b>Additional Information:</b> compensation varies year to year 5,000 to 25,000; cases cover general internal medicine care in a primary care setting as well as practice standards, but are not related to ACP work			

## Additional Questions

1. Please specify any additional information which you consider relevant to this disclosure.
2. As part of ACP's disclosure process, ACP requires your annual affirmation to abide by its **Disclosure of Interests and Management of Conflicts Policy**, **Non-Disclosure Agreement**, **Intellectual Property Policy**, **Staff Confidentiality Policy** and **Anti-Harassment Policy** as determined by your College involvement.

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?
- Annals of Internal Medicine editorial staff?
- Other (meeting guests, contractors, authors, speakers, project contributors, peer reviewers, etc.)

Yes (ACP board, committee, council, task force, and/or other governance group, Chapter Council or other Chapter leadership role, Annals of Internal Medicine editorial staff, Other (meeting guests, contractors, authors, speakers, project contributors, peer reviewers, etc.)

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

## Relevant Publications and Other Intellectual Interests for Ongoing Projects

### Disclosures of Interests: Supplemental Questions

Please review the following topic areas and report any intellectual or other relevant interests held by you or any household members from the last 3 years that may be relevant to the below 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.

### Topics Currently Under Development

In the table below, please list any relevant intellectual interests (including relevant publications from peer- and non-peer-reviewed sources or other relevant interests not captured in your Convey.

You only need to report interests from the last 3 years and you do not need to report publications developed on behalf of ACP.

You may also share a list of publications via a link to list of your published works (such as ORCID or PubMed) or as an attachment (write “see attachment” in table).

Clinical Topic Area	Relevant Interests from Last 3 Years <i>If none, write “None”</i>
Anxiety	
Breast Cancer	
Cardiovascular disease	
COVID-19	Only my acp publications that are listed on my orchid
Depression	
Diabetes	
Hyperlipidemia	
Hypertension	
Influenza	
Insomnia	
Kidney health	
Menopausal therapy	
Migraine	
Obesity	
Osteoporosis	
Prostate Cancer	
Rhinosinusitis	
RSV	

### 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.


## Relevant Publications and Other Intellectual Interests for Ongoing Projects

- I attest that I have reviewed the above topic areas and that my disclosures are up to date.

Rebecca Andrews MD

---

Name

A handwritten signature in black ink, appearing to read 'Rebecca Andrews', written over a horizontal line.

8/12/2025

Signature

Date

<b>Discloser Identifier:</b> 01367349	<b>Disclosure Purpose:</b> Staff Disclosure 2025 - 2026	<b>Employment Information:</b> Currently Employed
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Summary of Interests

Company or Organization

Entity	Type	Interest Held By	Value
American College of Physicians	Employment <div>Current Employment</div>	Self	-

**Title:** Director, Public Relations  
**Start Date:** 02/06/2006  
**Additional Information:**

**Position Description:** Oversee public relations activities for ACP  
**End Date:**

Additional Questions

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

2. As part of ACP's disclosure process, ACP requires your annual affirmation to abide by its Disclosure of Interests and Management of Conflicts Policy, Non-Disclosure Agreement, Intellectual Property Policy, Staff Confidentiality Policy and Anti-Harassment Policy as determined by your College involvement.

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?

Annals of Internal Medicine editorial staff?

Other (meeting guests, contractors, authors, speakers, project contributors, peer reviewers, etc.)

Yes (ACP board, committee, council, task force, and/or other governance group, Chapter Council or other Chapter leadership role, Annals of Internal Medicine editorial staff, Other (meeting guests, contractors, authors, speakers, project contributors, peer reviewers, etc.)

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

## Relevant Publications and Other Intellectual Interests for Ongoing Projects

### Disclosures of Interests: Supplemental Questions

Please review the following topic areas and report any intellectual or other relevant interests held by you or any household members from the last 3 years that may be relevant to the below 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.

### Topics Currently Under Development

In the table below, please list any relevant intellectual interests (including relevant publications from peer- and non-peer-reviewed sources or other relevant interests not captured in your Convey.

You only need to report interests from the last 3 years and you do not need to report publications developed on behalf of ACP.

You may also share a list of publications via a link to list of your published works (such as ORCID or PubMed) or as an attachment (write “see attachment” in table).

Clinical Topic Area	Relevant Interests from Last 3 Years <i>If none, write “None”</i>
Anxiety	none
Breast Cancer	none
Cardiovascular disease	none
COVID-19	none
Depression	none
Diabetes	none
Hyperlipidemia	none
Hypertension	none
Influenza	none
Insomnia	none
Kidney health	none
Menopausal therapy	none
Migraine	none
Obesity	none
Osteoporosis	none
Prostate Cancer	none
Rhinosinusitis	none
RSV	none

### 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.

## Relevant Publications and Other Intellectual Interests for Ongoing Projects

- I attest that I have reviewed the above topic areas and that my disclosures are up to date.

---

Name

Laura Baldwin

---

Signature

*Laura Baldwin*

---

Date

7/18/25



<b>Discloser Identifier:</b> 04673221	<b>Disclosure Purpose:</b> Staff Disclosure 2025 - 2026	<b>Employment Information:</b> Currently Employed
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Summary of Interests

Company or Organization

Entity	Type	Interest Held By	Value
ACP	Employment Current Employment	Self	-

**Title:** Senior PR Associate  
**Start Date:** 07/28/2025  
**Additional Information:**

**Position Description:**  
**End Date:** Ongoing / No Known End Date

Additional Questions

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

2. As part of ACP's disclosure process, ACP requires your annual affirmation to abide by its Disclosure of Interests and Management of Conflicts Policy, Non-Disclosure Agreement, Intellectual Property Policy, Staff Confidentiality Policy and Anti-Harassment Policy as determined by your College involvement.

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?

Annals of Internal Medicine editorial staff?

Other (meeting guests, contractors, authors, speakers, project contributors, peer reviewers, etc.)

No (College or chapter staff)

i. I, the undersigned, acknowledge I have read and agree to abide by the American College of Physician's Staff Confidentiality Policy.

Yes

ii. 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

iii. 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

## Relevant Publications and Other Intellectual Interests for Ongoing Projects

### Disclosures of Interests: Supplemental Questions

Please review the following topic areas and report any intellectual or other relevant interests held by you or any household members from the last 3 years that may be relevant to the below 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.

### Topics Currently Under Development

In the table below, please list any relevant intellectual interests (including relevant publications from peer- and non-peer-reviewed sources or other relevant interests not captured in your Convey.

You only need to report interests from the last 3 years and you do not need to report publications developed on behalf of ACP.

You may also share a list of publications via a link to list of your published works (such as ORCID or PubMed) or as an attachment (write “see attachment” in table).

Clinical Topic Area	Relevant Interests from Last 3 Years <i>If none, write “None”</i>
Anxiety	None
Breast Cancer	None
Cardiovascular disease	None
COVID-19	None
Depression	None
Diabetes	None
Hyperlipidemia	None
Hypertension	None
Influenza	None
Insomnia	None
Kidney health	None
Menopausal therapy	None
Migraine	None
Obesity	None
Osteoporosis	None
Prostate Cancer	None
Rhinosinusitis	None
RSV	None

### 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.

## Relevant Publications and Other Intellectual Interests for Ongoing Projects

- I attest that I have reviewed the above topic areas and that my disclosures are up to date.

Lori Bookbinder

---

Name

August 6, 2025

Lori Bookbinder

---

Signature

---

Date

<b>Discloser Identifier:</b> 04227079	<b>Disclosure Purpose:</b> Staff Disclosure 2025 - 2026	<b>Employment Information:</b> Currently Employed
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Summary of Interests

Company or Organization

Entity	Type	Interest Held By	Value
American College of Physicians	Employment <div>Current Employment</div>	Self	-

**Title:** Associate, Performance Measurement  
**Start Date:** 04/04/2022  
**Additional Information:** Full-time exempt

**Position Description:** - Review measurement science work with the PMC  
**End Date:** Ongoing / No Known End Date

Additional Questions

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

2. As part of ACP's disclosure process, ACP requires your annual affirmation to abide by its Disclosure of Interests and Management of Conflicts Policy, Non-Disclosure Agreement, Intellectual Property Policy, Staff Confidentiality Policy and Anti-Harassment Policy as determined by your College involvement.

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?

Annals of Internal Medicine editorial staff?

Other (meeting guests, contractors, authors, speakers, project contributors, peer reviewers, etc.)

Yes (ACP board, committee, council, task force, and/or other governance group, Chapter Council or other Chapter leadership role, Annals of Internal Medicine editorial staff, Other (meeting guests, contractors, authors, speakers, project contributors, peer reviewers, etc.)

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

## Relevant Publications and Other Intellectual Interests for Ongoing Projects

### Disclosures of Interests: Supplemental Questions

Please review the following topic areas and report any intellectual or other relevant interests held by you or any household members from the last 3 years that may be relevant to the below 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.

### Topics Currently Under Development

In the table below, please list any relevant intellectual interests (including relevant publications from peer- and non-peer-reviewed sources or other relevant interests not captured in your Convey.

You only need to report interests from the last 3 years and you do not need to report publications developed on behalf of ACP.

You may also share a list of publications via a link to list of your published works (such as ORCID or PubMed) or as an attachment (write “see attachment” in table).

Clinical Topic Area	Relevant Interests from Last 3 Years <i>If none, write “None”</i>
Anxiety	none
Breast Cancer	none
Cardiovascular disease	none
COVID-19	none
Depression	none
Diabetes	none
Hyperlipidemia	none
Hypertension	none
Influenza	none
Insomnia	none
Kidney health	none
Menopausal therapy	none
Migraine	none
Obesity	none
Osteoporosis	none
Prostate Cancer	none
Rhinosinusitis	none
RSV	none

### 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.



## Relevant Publications and Other Intellectual Interests for Ongoing Projects

- I attest that I have reviewed the above topic areas and that my disclosures are up to date.

Karen Campos

Name

*Karen Campos*

7/18/2025

Signature

Date

<b>Discloser Identifier:</b> 02186486	<b>Disclosure Purpose:</b> Staff Disclosure 2025 - 2026	<b>Employment Information:</b> Currently Employed
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Summary of Interests

Company or Organization

Entity	Type	Interest Held By	Value
American College of Physicians	Employment Current Employment	Self	-
<div><div><b>Title:</b> Director, Clinical Guidelines and Population Health <b>Start Date:</b> 08/26/2013 <b>Additional Information:</b></div><div><b>Position Description:</b> Manage activities related to the development of clinical guidelines and population health clinical policies. <b>End Date:</b> Ongoing / No Known End Date</div></div>			
American College of Physicians	Other Current Employment	Self	-
<div><div><b>Category:</b> Other <b>End Date:</b> Ongoing / No Known End Date <b>Compensation Type:</b> <b>Compensation:</b> <b>Additional Information:</b> I regularly represent ACP in external initiatives related to clinical and medical policies (such as meetings, workgroups, and committees).</div><div><b>Start Date:</b> 08/26/2013</div></div>			

Additional Questions

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

2. As part of ACP's disclosure process, ACP requires your annual affirmation to abide by its Disclosure of Interests and Management of Conflicts Policy, Non-Disclosure Agreement, Intellectual Property Policy, Staff Confidentiality Policy and Anti-Harassment Policy as determined by your College involvement.

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?

Annals of Internal Medicine editorial staff?

Other (meeting guests, contractors, authors, speakers, project contributors, peer reviewers, etc.)

No (College or chapter staff)

i. I, the undersigned, acknowledge I have read and agree to abide by the American College of Physician's Staff Confidentiality Policy.

Yes

ii. 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

iii. 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

## Relevant Publications and Other Intellectual Interests for Ongoing Projects

### Disclosures of Interests: Supplemental Questions

Please review the following topic areas and report any intellectual or other relevant interests held by you or any household members from the last 3 years that may be relevant to the below 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.

### Topics Currently Under Development

In the table below, please list any relevant intellectual interests (including relevant publications from peer- and non-peer-reviewed sources or other relevant interests not captured in your Convey.

You only need to report interests from the last 3 years and you do not need to report publications developed on behalf of ACP.

You may also share a list of publications via a link to list of your published works (such as ORCID or PubMed) or as an attachment (write “see attachment” in table).

Clinical Topic Area	Relevant Interests from Last 3 Years <i>If none, write “None”</i>
Anxiety	None
Breast Cancer	None
Cardiovascular disease	None
COVID-19	None
Depression	None
Diabetes	None
Hyperlipidemia	None
Hypertension	None
Influenza	None
Insomnia	None
Kidney health	None
Menopausal therapy	None
Migraine	None
Obesity	None
Osteoporosis	None
Prostate Cancer	None
Rhinosinusitis	None
RSV	None

### 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.

## Relevant Publications and Other Intellectual Interests for Ongoing Projects

- I attest that I have reviewed the above topic areas and that my disclosures are up to date.

Kate Carroll

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Name

*Kate Carroll*

7/31/2025

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Signature

Date

<b>Discloser Identifier:</b> 04490716	<b>Disclosure Purpose:</b> Staff Disclosure 2025 - 2026	<b>Employment Information:</b> Currently Employed
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Summary of Interests

Company or Organization

Entity	Type	Interest Held By	Value
American College of Physicians	Employment Current Employment	Self	-
<div><div><b>Title:</b> Chief Operating Officer <b>Start Date:</b> 03/04/2024 <b>Additional Information:</b></div><div><b>Position Description:</b> Executive staff officer responsible for organizational operations, business functions, governance and strategy. <b>End Date:</b> Ongoing / No Known End Date</div></div>			
Carol Emmott Foundation	Fiduciary Officer	Self	-
<div><div><b>Official Title:</b> Leadership Council Member <b>Compensation Type:</b> Unpaid <b>Start Date:</b> 04/01/2022 <b>Compensation:</b> No <b>Additional Information:</b></div><div><b>Position Description:</b> Board member and mentor <b>End Date:</b> Ongoing / No Known End Date</div></div>			
Virginia Hospital Center Foundatoin	Fiduciary Officer	Self	-
<div><div><b>Official Title:</b> Advisory Board Co-Chair <b>Compensation Type:</b> Unpaid <b>Start Date:</b> 07/01/2019 <b>Compensation:</b> No <b>Additional Information:</b></div><div><b>Position Description:</b> Womens Health Circle Advisory Board member and co-chair <b>End Date:</b> Ongoing / No Known End Date</div></div>			
Women Business Leaders of the US Healthcare Foundation	Fiduciary Officer	Self	-
<div><div><b>Official Title:</b> Board Member <b>Compensation Type:</b> Unpaid <b>Start Date:</b> 03/01/2023 <b>Compensation:</b> No <b>Additional Information:</b></div><div><b>Position Description:</b> Board Member <b>End Date:</b> Ongoing / No Known End Date</div></div>			

Additional Questions

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

None

2. As part of ACP's disclosure process, ACP requires your annual affirmation to abide by its Disclosure of Interests and Management of Conflicts Policy, Non-Disclosure Agreement, Intellectual Property Policy, Staff Confidentiality Policy and Anti-Harassment Policy as determined by your College involvement.

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?**
- **Annals of Internal Medicine editorial staff?**
- **Other (meeting guests, contractors, authors, speakers, project contributors, peer reviewers, etc.)**

Yes (ACP board, committee, council, task force, and/or other governance group, Chapter Council or other Chapter leadership role, Annals of Internal Medicine editorial staff, Other (meeting guests, contractors, authors, speakers, project contributors, peer reviewers, etc.)

- 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

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## Relevant Publications and Other Intellectual Interests for Ongoing Projects

### Disclosures of Interests: Supplemental Questions

Please review the following topic areas and report any intellectual or other relevant interests held by you or any household members from the last 3 years that may be relevant to the below 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.

### Topics Currently Under Development

In the table below, please list any relevant intellectual interests (including relevant publications from peer- and non-peer-reviewed sources or other relevant interests not captured in your Convey.

You only need to report interests from the last 3 years and you do not need to report publications developed on behalf of ACP.

You may also share a list of publications via a link to list of your published works (such as ORCID or PubMed) or as an attachment (write “see attachment” in table).

Clinical Topic Area	Relevant Interests from Last 3 Years <i>If none, write “None”</i>
Anxiety	none
Breast Cancer	none
Cardiovascular disease	none
COVID-19	none
Depression	none
Diabetes	none
Hyperlipidemia	none
Hypertension	none
Influenza	none
Insomnia	none
Kidney health	none
Menopausal therapy	none
Migraine	none
Obesity	none
Osteoporosis	none
Prostate Cancer	none
Rhinosinusitis	none
RSV	none

### 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.



## Relevant Publications and Other Intellectual Interests for Ongoing Projects

- I attest that I have reviewed the above topic areas and that my disclosures are up to date.

Bergitta E. Cotroneo

Name



07/30/2025

Signature

Date

<b>Discloser Identifier:</b> 04021574	<b>Disclosure Purpose:</b> Staff Disclosure 2025 - 2026	<b>Employment Information:</b> Currently Employed
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Summary of Interests

Company or Organization

Entity	Type	Interest Held By	Value
American College of Physicians	Employment <b>Current Employment</b>	Self	-

**Title:** Senior Scientist  
**Start Date:** 11/07/2022  
**Additional Information:**

**Position Description:** Senior Scientist  
**End Date:** Ongoing / No Known End Date

Additional Questions

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

2. As part of ACP's disclosure process, ACP requires your annual affirmation to abide by its Disclosure of Interests and Management of Conflicts Policy, Non-Disclosure Agreement, Intellectual Property Policy, Staff Confidentiality Policy and Anti-Harassment Policy as determined by your College involvement.

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?

▪ Annals of Internal Medicine editorial staff?

▪ Other (meeting guests, contractors, authors, speakers, project contributors, peer reviewers, etc.)

No (College or chapter staff)

i. I, the undersigned, acknowledge I have read and agree to abide by the American College of Physician's **Staff Confidentiality Policy**.

Yes

ii. 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

iii. 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

## Relevant Publications and Other Intellectual Interests for Ongoing Projects

### Disclosures of Interests: Supplemental Questions

Please review the following topic areas and report any intellectual or other relevant interests held by you or any household members from the last 3 years that may be relevant to the below 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.

### Topics Currently Under Development

In the table below, please list any relevant intellectual interests (including relevant publications from peer- and non-peer-reviewed sources or other relevant interests not captured in your Convey.

You only need to report interests from the last 3 years and you do not need to report publications developed on behalf of ACP.

You may also share a list of publications via a link to list of your published works (such as ORCID or PubMed) or as an attachment (write “see attachment” in table).

Clinical Topic Area	Relevant Interests from Last 3 Years <i>If none, write “None”</i>
Anxiety	None
Breast Cancer	None
Cardiovascular disease	None
COVID-19	None
Depression	None
Diabetes	None
Hyperlipidemia	None
Hypertension	None
Influenza	None
Insomnia	None
Kidney health	None
Menopausal therapy	None
Migraine	None
Obesity	None
Osteoporosis	None
Prostate Cancer	None
Rhinosinusitis	None
RSV	None

### 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.

## Relevant Publications and Other Intellectual Interests for Ongoing Projects

- I attest that I have reviewed the above topic areas and that my disclosures are up to date.

Itziar Etxeandia Ikobaltzeta

Name



Signature

7/21/2025

Date

<b>Discloser Identifier:</b> 01171611	<b>Disclosure Purpose:</b> Staff Disclosure 2025 - 2026	<b>Employment Information:</b> Currently Employed
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Summary of Interests

Company or Organization

Entity	Type	Interest Held By	Value
American College of Physicians	Employment <b>Current Employment</b>	Self	-

**Title:** Senior Vice President, Marketing & PR  
**Start Date:** 06/10/1996  
**Additional Information:**

**Position Description:** Chief Communications Officer  
**End Date:** Ongoing / No Known End Date

Additional Questions

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

2. As part of ACP's disclosure process, ACP requires your annual affirmation to abide by its Disclosure of Interests and Management of Conflicts Policy, Non-Disclosure Agreement, Intellectual Property Policy, Staff Confidentiality Policy and Anti-Harassment Policy as determined by your College involvement.

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?

▪ Annals of Internal Medicine editorial staff?

▪ Other (meeting guests, contractors, authors, speakers, project contributors, peer reviewers, etc.)

No (College or chapter staff)

i. I, the undersigned, acknowledge I have read and agree to abide by the American College of Physician's **Staff Confidentiality Policy**.

Yes

ii. 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

iii. 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

## Relevant Publications and Other Intellectual Interests for Ongoing Projects

### Disclosures of Interests: Supplemental Questions

Please review the following topic areas and report any intellectual or other relevant interests held by you or any household members from the last 3 years that may be relevant to the below 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.

### Topics Currently Under Development

In the table below, please list any relevant intellectual interests (including relevant publications from peer- and non-peer-reviewed sources or other relevant interests not captured in your Convey.

You only need to report interests from the last 3 years and you do not need to report publications developed on behalf of ACP.

You may also share a list of publications via a link to list of your published works (such as ORCID or PubMed) or as an attachment (write “see attachment” in table).

Clinical Topic Area	Relevant Interests from Last 3 Years <i>If none, write “None”</i>
Anxiety	None
Breast Cancer	None
Cardiovascular disease	None
COVID-19	None
Depression	None
Diabetes	None
Hyperlipidemia	None
Hypertension	None
Influenza	None
Insomnia	None
Kidney health	None
Menopausal therapy	None
Migraine	None
Obesity	None
Osteoporosis	None
Prostate Cancer	None
Rhinosinusitis	None
RSV	None

### 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.



## Relevant Publications and Other Intellectual Interests for Ongoing Projects

- I attest that I have reviewed the above topic areas and that my disclosures are up to date.

Allison Ewing

---

Name

A handwritten signature in black ink that reads "Allison Ewing". The signature is written in a cursive style with a large initial 'A'.

8-5-25

---

Signature

Date

<b>Discloser Identifier:</b> 04354277	<b>Disclosure Purpose:</b> Staff Disclosure 2025 - 2026	<b>Employment Information:</b> Currently Employed
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Summary of Interests

Company or Organization

Entity	Type	Interest Held By	Value
American College of Physicians	Employment <b>Current Employment</b>	Self	-

**Title:** Coordinator, Clinical Policy  
**Start Date:** 02/21/2023  
**Additional Information:**

**Position Description:** Office coordinator for clinical policy division at ACP  
**End Date:** Ongoing / No Known End Date

Additional Questions

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

2. As part of ACP's disclosure process, ACP requires your annual affirmation to abide by its Disclosure of Interests and Management of Conflicts Policy, Non-Disclosure Agreement, Intellectual Property Policy, Staff Confidentiality Policy and Anti-Harassment Policy as determined by your College involvement.

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?

▪ Annals of Internal Medicine editorial staff?

▪ Other (meeting guests, contractors, authors, speakers, project contributors, peer reviewers, etc.)

No (College or chapter staff)

i. I, the undersigned, acknowledge I have read and agree to abide by the American College of Physician's **Staff Confidentiality Policy**.

Yes

ii. 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

iii. 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

## Relevant Publications and Other Intellectual Interests for Ongoing Projects

### Disclosures of Interests: Supplemental Questions

Please review the following topic areas and report any intellectual or other relevant interests held by you or any household members from the last 3 years that may be relevant to the below 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.

### Topics Currently Under Development

In the table below, please list any relevant intellectual interests (including relevant publications from peer- and non-peer-reviewed sources or other relevant interests not captured in your Convey.

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You may also share a list of publications via a link to list of your published works (such as ORCID or PubMed) or as an attachment (write “see attachment” in table).

Clinical Topic Area	Relevant Interests from Last 3 Years <i>If none, write “None”</i>
Anxiety	None
Breast Cancer	None
Cardiovascular disease	None
COVID-19	None
Depression	None
Diabetes	None
Hyperlipidemia	None
Hypertension	None
Influenza	None
Insomnia	None
Kidney health	None
Menopausal therapy	None
Migraine	None
Obesity	None
Osteoporosis	None
Prostate Cancer	None
Rhinosinusitis	None
RSV	None

### 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.

## Relevant Publications and Other Intellectual Interests for Ongoing Projects

- I attest that I have reviewed the above topic areas and that my disclosures are up to date.

Devon Germanovich

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Name



7/30/2025

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Signature

Date

<b>Discloser Identifier:</b> 04119425	<b>Disclosure Purpose:</b> Staff Disclosure 2025 - 2026	<b>Employment Information:</b> Currently Employed
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Summary of Interests

Company or Organization

Entity	Type	Interest Held By	Value
American College of Physicians	Employment <div>Current Employment</div>	Self	-

**Title:** Senior Scientist  
**Start Date:** 05/31/2022  
**Additional Information:**

**Position Description:** I am a methodologist contributing to or leading work on evidence synthesis to inform clinical guidelines.  
**End Date:** Ongoing / No Known End Date

Additional Questions

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

I have worked on a number of evidence reviews concerning internal medicine topics in the past 3 years, and was the senior author on the osteoporosis review for ACP.

2. As part of ACP's disclosure process, ACP requires your annual affirmation to abide by its Disclosure of Interests and Management of Conflicts Policy, Non-Disclosure Agreement, Intellectual Property Policy, Staff Confidentiality Policy and Anti-Harassment Policy as determined by your College involvement.

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?

■ Annals of Internal Medicine editorial staff?

■ Other (meeting guests, contractors, authors, speakers, project contributors, peer reviewers, etc.)

Yes (ACP board, committee, council, task force, and/or other governance group, Chapter Council or other Chapter leadership role, Annals of Internal Medicine editorial staff, Other (meeting guests, contractors, authors, speakers, project contributors, peer reviewers, etc.)

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

## Relevant Publications and Other Intellectual Interests for Ongoing Projects

### Disclosures of Interests: Supplemental Questions

Please review the following topic areas and report any intellectual or other relevant interests held by you or any household members from the last 3 years that may be relevant to the below 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.

### Topics Currently Under Development

In the table below, please list any relevant intellectual interests (including relevant publications from peer- and non-peer-reviewed sources or other relevant interests not captured in your Convey.

You only need to report interests from the last 3 years and you do not need to report publications developed on behalf of ACP.

You may also share a list of publications via a link to list of your published works (such as ORCID or PubMed) or as an attachment (write “see attachment” in table).

Clinical Topic Area	Relevant Interests from Last 3 Years <i>If none, write “None”</i>
Anxiety	ACP only
Breast Cancer	ACP only
Cardiovascular disease	ACP only
COVID-19	ACP only
Depression	ACP only
Diabetes	ACP only
Hyperlipidemia	ACP only
Hypertension	ACP only
Influenza	ACP only
Insomnia	ACP only
Kidney health	None
Menopausal therapy	ACP only
Migraine	ACP only
Obesity	ACP only
Osteoporosis	<a href="https://www.acpjournals.org/doi/10.7326/M22-0684">https://www.acpjournals.org/doi/10.7326/M22-0684</a>
Prostate Cancer	ACP only
Rhinosinusitis	ACP only
RSV	ACP only

### 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.



## Relevant Publications and Other Intellectual Interests for Ongoing Projects

- I attest that I have reviewed the above topic areas and that my disclosures are up to date.

Curtis Harrod

---

Name

7/21/25

*Curtis Harrod*

---

Signature

Date

<b>Discloser Identifier:</b> 04360194	<b>Disclosure Purpose:</b> Staff Disclosure 2025 - 2026	<b>Employment Information:</b> Currently Employed
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Summary of Interests

Company or Organization

Entity	Type	Interest Held By	Value
American College of Physicians	Employment <div>Current Employment</div>	Self	-

**Title:** Vice President, Marketing and Public Relations  
**Start Date:** 04/10/2023  
**Additional Information:**

**Position Description:**  
**End Date:** Ongoing / No Known End Date

Additional Questions

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

None

2. As part of ACP's disclosure process, ACP requires your annual affirmation to abide by its Disclosure of Interests and Management of Conflicts Policy, Non-Disclosure Agreement, Intellectual Property Policy, Staff Confidentiality Policy and Anti-Harassment Policy as determined by your College involvement.

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?

▪ Annals of Internal Medicine editorial staff?

▪ Other (meeting guests, contractors, authors, speakers, project contributors, peer reviewers, etc.)

Yes (ACP board, committee, council, task force, and/or other governance group, Chapter Council or other Chapter leadership role, Annals of Internal Medicine editorial staff, Other (meeting guests, contractors, authors, speakers, project contributors, peer reviewers, etc.))

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

## Relevant Publications and Other Intellectual Interests for Ongoing Projects

### Disclosures of Interests: Supplemental Questions

Please review the following topic areas and report any intellectual or other relevant interests held by you or any household members from the last 3 years that may be relevant to the below 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.

### Topics Currently Under Development

In the table below, please list any relevant intellectual interests (including relevant publications from peer- and non-peer-reviewed sources or other relevant interests not captured in your Convey.

You only need to report interests from the last 3 years and you do not need to report publications developed on behalf of ACP.

You may also share a list of publications via a link to list of your published works (such as ORCID or PubMed) or as an attachment (write “see attachment” in table).

Clinical Topic Area	Relevant Interests from Last 3 Years <i>If none, write “None”</i>
Anxiety	None
Breast Cancer	None
Cardiovascular disease	None
COVID-19	None
Depression	None
Diabetes	None
Hyperlipidemia	None
Hypertension	None
Influenza	None
Insomnia	None
Kidney health	None
Menopausal therapy	None
Migraine	None
Obesity	None
Osteoporosis	None
Prostate Cancer	None
Rhinosinusitis	None
RSV	None

### 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.

## Relevant Publications and Other Intellectual Interests for Ongoing Projects

- I attest that I have reviewed the above topic areas and that my disclosures are up to date.

Lisa Johnson

---

Name

*Lisa Johnson*

8/5/25

---

Signature

Date

**Disclosure Purpose:** Staff Disclosure 2025 - 2026, Planners and Speakers, AMA Delegation, Annual Governance  
Disclosure 2025-26, ACP/ Annals Forum

**Employment Information:** Currently Employed

Summary of Interests

Company or Organization

Entity	Type	Interest Held By	Value
American College of Physicians	Employment Current Employment	Self	-
<div><div><b>Title:</b> EVP/CEO <b>Start Date:</b> 01/01/2017 <b>Additional Information:</b></div><div><b>Position Description:</b> EVP/CEO <b>End Date:</b> Ongoing / No Known End Date</div></div>			
American Medical Association	Other	Self	-
<div><div><b>Category:</b> Other <b>End Date:</b> Ongoing / No Known End Date <b>Compensation Type:</b> Unpaid <b>Compensation:</b> <b>Additional Information:</b> Member, House of Delegates</div><div><b>Start Date:</b> 01/01/2017</div></div>			
Brigham and Women's Hospital	Other	Self	-
<div><div><b>Category:</b> Other <b>End Date:</b> 07/31/2028 <b>Compensation Type:</b> Unpaid <b>Compensation:</b> No <b>Additional Information:</b> Nonfiduciary Board (Center for Physician Experience and Practice Excellence Advisory)</div><div><b>Start Date:</b> 07/18/2023</div></div>			
Gender Equity in Academic Medicine and Science Alliance	Fiduciary Officer	Self	-
<div><div><b>Official Title:</b> Founding Member and Executive Board Member <b>Compensation Type:</b> Unpaid <b>Start Date:</b> 01/01/2022 <b>Compensation:</b> No <b>Additional Information:</b></div><div><b>Position Description:</b> Member, Board of Directors <b>End Date:</b></div></div>			
Inspira Health Woodbury	Employment	Spouse/Partner	-
<div><div><b>Title:</b> Physician Staff- Inspira Medical Group <b>Start Date:</b> 01/01/2017 <b>Additional Information:</b> Inspira Group Physicians 2950 College Drive Suite 1E Vineland, NJ 08360</div><div><b>Position Description:</b> Salaried Pulmonary Critical Care Sleep Physician <b>End Date:</b> Ongoing / No Known End Date</div></div>			
PCPCC	Fiduciary Officer	Self	-
<div><div><b>Official Title:</b> PCPCC Board Member <b>Compensation Type:</b> Unpaid <b>Start Date:</b> 01/01/2017 <b>Compensation:</b> No <b>Additional Information:</b> PCPCC Board Chair, 1/31/2020-12/31/2021, PCPCC Immediate Past Board Chair, 1/1/2022-12/31/2022</div><div><b>Position Description:</b> PCPCC Board Member <b>End Date:</b> Ongoing / No Known End Date</div></div>			
Temple University	Fiduciary Officer	Self	-

Entity	Type	Interest Held By	Value
<b>Official Title:</b> Lewis Katz School of Medicine at Temple University Medical Alumni Board <b>Compensation Type:</b> Unpaid <b>Start Date:</b> 01/01/2017 <b>Compensation:</b> No <b>Additional Information:</b>			
<b>Position Description:</b> Nonfiduciary Board (MED School AlumniBoard)member <b>End Date:</b> Ongoing / No Known End Date			

## Intellectual Property

Type	Is Licensed	Interest Held By	Value
Other Intellectual Property - Multiple presentations	-	Self	-
<b>Description:</b> Multiple presentations <b>Additional Information:</b> <b>Income:</b> <b>Additional Information:</b>			
Other Intellectual Property - Multiple presentations and publications	-	Self	-
<b>Description:</b> Multiple presentations and publications <b>Additional Information:</b> <b>Income:</b> <b>Additional Information:</b>			

## Additional Questions

1. Please specify any additional information which you consider relevant to this disclosure.
2. As part of ACP's disclosure process, ACP requires your annual affirmation to abide by its Disclosure of Interests and Management of Conflicts Policy, Non-Disclosure Agreement, Intellectual Property Policy, Staff Confidentiality Policy and Anti-Harassment Policy as determined by your College involvement.

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?
- Annals of Internal Medicine editorial staff?
- Other (meeting guests, contractors, authors, speakers, project contributors, peer reviewers, etc.)

No (College or chapter staff)

i. I, the undersigned, acknowledge I have read and agree to abide by the American College of Physician's [Staff Confidentiality Policy](#).

Yes

ii. 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

iii. 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



## Relevant Publications and Other Intellectual Interests for Ongoing Projects

### Disclosures of Interests: Supplemental Questions

Please review the following topic areas and report any intellectual or other relevant interests held by you or any household members from the last 3 years that may be relevant to the below 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.

### Topics Currently Under Development

In the table below, please list any relevant intellectual interests (including relevant publications from peer- and non-peer-reviewed sources or other relevant interests not captured in your Convey.

You only need to report interests from the last 3 years and you do not need to report publications developed on behalf of ACP.

You may also share a list of publications via a link to list of your published works (such as ORCID or PubMed) or as an attachment (write “see attachment” in table).

Clinical Topic Area	Relevant Interests from Last 3 Years <i>If none, write “None”</i>
Anxiety	
Breast Cancer	
Cardiovascular disease	
COVID-19	Multiple Annals pubs after COVID, ACP/Annals Forums
Depression	
Diabetes	
Hyperlipidemia	
Hypertension	
Influenza	
Insomnia	
Kidney health	
Menopausal therapy	
Migraine	
Obesity	Obesity Roundtable Discussion / ACP Strategy & Obesity Initiative
Osteoporosis	
Prostate Cancer	
Rhinosinusitis	
RSV	

### Acknowledgements and Attestations

*By signing this form,*

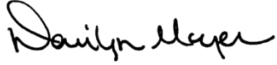
- I acknowledge that in order to maintain transparency, all participants’ disclosure of interests will be publicly available on ACP’s website and a link to the disclosures will be included in each published work.

## Relevant Publications and Other Intellectual Interests for Ongoing Projects

- I attest that I have reviewed the above topic areas and that my disclosures are up to date.

Darilyn V. Moyer, MD, MACP, FRCP, FIDSA, FAMWA, FEFIM

Name



7/22/25

Signature

Date

**Disclosure Purpose:** Staff Disclosure 2025 - 2026 (Expiration Date: 07/18/2026), Faculty (Expiration Date: 07/18/2026), ACP/ Annals Forum (Expiration Date: 07/18/2026), Internal Medicine Meeting 2025 Faculty (Expiration Date: 07/18/2026), Forums (Expiration Date: 07/18/2026)

**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 Science Officer  
**Start Date:** 12/07/2003  
**Additional Information:**

**Position Description:**  
**End Date:**

Additional Questions

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

N/A

2. As part of ACP's disclosure process, ACP requires your annual affirmation to abide by its Disclosure of Interests and Management of Conflicts Policy, Non-Disclosure Agreement, Intellectual Property Policy, Staff Confidentiality Policy and Anti-Harassment Policy as determined by your College involvement.

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?

▪ Annals of Internal Medicine editorial staff?

▪ Other (meeting guests, contractors, authors, speakers, project contributors, peer reviewers, etc.)

No (College or chapter staff)

i. I, the undersigned, acknowledge I have read and agree to abide by the American College of Physician's Staff Confidentiality Policy.

Yes

ii. 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

iii. 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

## Relevant Publications and Other Intellectual Interests for Ongoing Projects

### Disclosures of Interests: Supplemental Questions

Please review the following topic areas and report any intellectual or other relevant interests held by you or any household members from the last 3 years that may be relevant to the below 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.

### Topics Currently Under Development

In the table below, please list any relevant intellectual interests (including relevant publications from peer- and non-peer-reviewed sources or other relevant interests not captured in your Convey.

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You may also share a list of publications via a link to list of your published works (such as ORCID or PubMed) or as an attachment (write “see attachment” in table).

Clinical Topic Area	Relevant Interests from Last 3 Years <i>If none, write “None”</i>
Anxiety	N/A
Breast Cancer	
Cardiovascular disease	
COVID-19	
Depression	
Diabetes	
Hyperlipidemia	
Hypertension	
Influenza	
Insomnia	
Kidney health	
Menopausal therapy	
Migraine	
Obesity	
Osteoporosis	
Prostate Cancer	
Rhinosinusitis	
RSV	

### 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.

## Relevant Publications and Other Intellectual Interests for Ongoing Projects

- I attest that I have reviewed the above topic areas and that my disclosures are up to date.

Amir Qaseem

---

Name

A handwritten signature in black ink that reads "Amir Qaseem". The signature is written in a cursive style with a horizontal line under the name.

7/18/2025

---

Signature

Date

<b>Discloser Identifier:</b> 01975766	<b>Disclosure Purpose:</b> Staff Disclosure 2025 - 2026	<b>Employment Information:</b> Currently Employed
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Summary of Interests

Company or Organization

Entity	Type	Interest Held By	Value
American College of Physicians	Employment <div>Current Employment</div>	Self	-

**Title:** Senior Research Associate  
**Start Date:** 01/13/2021  
**Additional Information:**

**Position Description:** Center for Evidence Reviews  
**End Date:**

Additional Questions

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

None

2. As part of ACP's disclosure process, ACP requires your annual affirmation to abide by its Disclosure of Interests and Management of Conflicts Policy, Non-Disclosure Agreement, Intellectual Property Policy, Staff Confidentiality Policy and Anti-Harassment Policy as determined by your College involvement.

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?

▪ Annals of Internal Medicine editorial staff?

▪ Other (meeting guests, contractors, authors, speakers, project contributors, peer reviewers, etc.)

No (College or chapter staff)

i. I, the undersigned, acknowledge I have read and agree to abide by the American College of Physician's **Staff Confidentiality Policy**.

Yes

ii. 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

iii. 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



## Relevant Publications and Other Intellectual Interests for Ongoing Projects

### Disclosures of Interests: Supplemental Questions

Please review the following topic areas and report any intellectual or other relevant interests held by you or any household members from the last 3 years that may be relevant to the below 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.

### Topics Currently Under Development

In the table below, please list any relevant intellectual interests (including relevant publications from peer- and non-peer-reviewed sources or other relevant interests not captured in your Convey.

You only need to report interests from the last 3 years and you do not need to report publications developed on behalf of ACP.

You may also share a list of publications via a link to list of your published works (such as ORCID or PubMed) or as an attachment (write “see attachment” in table).

Clinical Topic Area	Relevant Interests from Last 3 Years <i>If none, write “None”</i>
Anxiety	None
Breast Cancer	None
Cardiovascular disease	None
COVID-19	None
Depression	None
Diabetes	None
Hyperlipidemia	None
Hypertension	None
Influenza	None
Insomnia	None
Kidney health	None
Menopausal therapy	None
Migraine	None
Obesity	None
Osteoporosis	None
Prostate Cancer	None
Rhinosinusitis	None
RSV	None

### 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.

<b>Discloser Identifier:</b> 03794192	<b>Disclosure Purpose:</b> Staff Disclosure 2025 - 2026	<b>Employment Information:</b> Currently Employed
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Summary of Interests

Company or Organization

Entity	Type	Interest Held By	Value
American College of Physicians	Employment <div>Current Employment</div>	Self	-
<div><div>Title:</div><div>Start Date:</div><div>Additional Information:</div></div> <div><div>Position Description:</div><div>End Date:</div><div></div></div>			
American College of Physicians	Employment <div>Current Employment</div>	Self	-
<div><div>Title:</div><div>Start Date:</div><div>Additional Information:</div></div> <div><div>Position Description:</div><div>End Date:</div><div></div></div>			

Additional Questions

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

None

2. As part of ACP's disclosure process, ACP requires your annual affirmation to abide by its Disclosure of Interests and Management of Conflicts Policy, Non-Disclosure Agreement, Intellectual Property Policy, Staff Confidentiality Policy and Anti-Harassment Policy as determined by your College involvement.

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?

Annals of Internal Medicine editorial staff?

Other (meeting guests, contractors, authors, speakers, project contributors, peer reviewers, etc.)

No (College or chapter staff)

i. I, the undersigned, acknowledge I have read and agree to abide by the American College of Physician's Staff Confidentiality Policy.

Yes

ii. 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

iii. 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

## Relevant Publications and Other Intellectual Interests for Ongoing Projects

### Disclosures of Interests: Supplemental Questions

Please review the following topic areas and report any intellectual or other relevant interests held by you or any household members from the last 3 years that may be relevant to the below 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.

### Topics Currently Under Development

In the table below, please list any relevant intellectual interests (including relevant publications from peer- and non-peer-reviewed sources or other relevant interests not captured in your Convey.

You only need to report interests from the last 3 years and you do not need to report publications developed on behalf of ACP.

You may also share a list of publications via a link to list of your published works (such as ORCID or PubMed) or as an attachment (write “see attachment” in table).

Clinical Topic Area	Relevant Interests from Last 3 Years <i>If none, write “None”</i>
Anxiety	None of the below
Breast Cancer	
Cardiovascular disease	
COVID-19	
Depression	
Diabetes	
Hyperlipidemia	
Hypertension	
Influenza	
Insomnia	
Kidney health	
Menopausal therapy	
Migraine	
Obesity	
Osteoporosis	
Prostate Cancer	
Rhinosinusitis	
RSV	

### 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.

## Relevant Publications and Other Intellectual Interests for Ongoing Projects

- I attest that I have reviewed the above topic areas and that my disclosures are up to date.

Samantha Tierney

\_\_\_\_\_  
Name

\_\_\_\_\_  
Signature

*Sam Tierney*

7/18/2025

\_\_\_\_\_  
Date

<b>Discloser Identifier:</b> 04490696	<b>Disclosure Purpose:</b> Staff Disclosure 2025 - 2026	<b>Employment Information:</b> Currently Employed
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Summary of Interests

Company or Organization

Entity	Type	Interest Held By	Value
ACP	Employment Current Employment	Self	-
<b>Title:</b> Research Associate <b>Start Date:</b> 02/05/2024  <b>Additional Information:</b>		<b>Position Description:</b> Acts as lead staff and project manager for the Population Health and Medical Science Committee. Coordinates timelines, deliverables, logistics, and contracts for manuscripts. Conducts literature searches, creates deliverables as needed. <b>End Date:</b> Ongoing / No Known End Date	
OM1, Inc.	Employment	Self	-
<b>Title:</b> Epidemiologist <b>Start Date:</b> 04/04/2022  <b>Additional Information:</b>		<b>Position Description:</b> Crafted research plans for real-world studies Wrote real-world study reports Worked cross-collaboratively to ensure accurate implementation of real-world studies in pharmacoepidemiology using open claims and EHR data sources <b>End Date:</b> 11/17/2023	

Intellectual Property

Type	Is Licensed	Interest Held By	Value
Other Intellectual Property - Published Manuscript: External Control Arms and I	-	Self	-
<b>Description:</b> Published Manuscript: External Control Arms and Innovative Tools to Enrich Clinical Trial Data <b>Income Source:</b> None <b>Additional Information:</b> Published on March 25, 2024. Funded by Viatris. Related to my employment at Medidata. Involvement ended as of January 23, 2024. <a href="https://link.springer.com/article/10.1007/s43441-024-00627-4">https://link.springer.com/article/10.1007/s43441-024-00627-4</a> <b>Income:</b> No <b>Additional Information:</b> Published on March 25, 2024. Funded by Viatris. Related to my employment at Medidata. Involvement ended as of January 23, 2024. <a href="https://link.springer.com/article/10.1007/s43441-024-00627-4">https://link.springer.com/article/10.1007/s43441-024-00627-4</a>			
Other Intellectual Property - CRSwNP Abstract	-	Self	-
<b>Description:</b> CRSwNP Abstract <b>Income Source:</b> None <b>Additional Information:</b> Included in acknowledgements only, not as an author. Funded by a pharmaceutical company. Involvement ended as of January 26, 2024. Topic: CRSwNP <b>Income:</b> No <b>Additional Information:</b> Included in acknowledgements only, not as an author. Funded by a pharmaceutical company. Involvement ended as of January 26, 2024. Topic: CRSwNP			
Other Intellectual Property - CRSwNP abstract accepted for presentation	-	Self	-
<b>Description:</b> CRSwNP abstract accepted for presentation <b>Income Source:</b> None <b>Additional Information:</b> Funded by a pharmaceutical company. Related to employment at OM1, Inc. Involvement ended as of December 19, 2023. Topic: CRSwNP <b>Income:</b> No			

Type	Is Licensed	Interest Held By	Value
<b>Additional Information:</b> Funded by a pharmaceutical company. Related to employment at OM1, Inc. Involvement ended as of December 19, 2023. Topic: CRSwNP			
Other Intellectual Property - CRSwNP Abstract	-	Self	-
<b>Description:</b> CRSwNP Abstract <b>Additional Information:</b> Funded by a pharmaceutical company. Related to employment at OM1, Inc. Involvement ended as of January 10, 2024. Topic: CRSwNP <b>Income:</b> No <b>Additional Information:</b> Funded by a pharmaceutical company. Related to employment at OM1, Inc. Involvement ended as of January 10, 2024. Topic: CRSwNP			
Other Intellectual Property - CRSwNP abstract accepted for presentation	-	Self	-
<b>Description:</b> CRSwNP abstract accepted for presentation <b>Additional Information:</b> Funded by a pharmaceutical company. Related to employment at OM1, Inc. Involvement ended as of January 5, 2024. Topic: CRSwNP <b>Income:</b> No <b>Additional Information:</b> Funded by a pharmaceutical company. Related to employment at OM1, Inc. Involvement ended as of January 5, 2024. Topic: CRSwNP			
Other Intellectual Property - CRSwNP Abstract	-	Self	-
<b>Description:</b> CRSwNP Abstract <b>Additional Information:</b> Included in the acknowledgements only, not as an author. Funded by a pharmaceutical company. Related to employment at OM1, Inc. Involvement ended as of January 23, 2024. Topic: CRSwNP <b>Income:</b> No <b>Additional Information:</b> Included in the acknowledgements only, not as an author. Funded by a pharmaceutical company. Related to employment at OM1, Inc. Involvement ended as of January 23, 2024. Topic: CRSwNP			
Other Intellectual Property - Published Manuscript: Incidental Adrenal Mass Fol	-	Self	-
<b>Description:</b> Published Manuscript: Incidental Adrenal Mass Follow-Up <b>Additional Information:</b> Published on January 31, 2023. Funded by Boston Medical Center. Related to my employment at Boston Medical Center. Involvement ended as of February 11, 2022. <a href="https://pubmed.ncbi.nlm.nih.gov/36521629/">https://pubmed.ncbi.nlm.nih.gov/36521629/</a> <b>Income:</b> No <b>Additional Information:</b> Published on January 31, 2023. Funded by Boston Medical Center. Related to my employment at Boston Medical Center. Involvement ended as of February 11, 2022. <a href="https://pubmed.ncbi.nlm.nih.gov/36521629/">https://pubmed.ncbi.nlm.nih.gov/36521629/</a>			

Additional Questions

1. Please specify any additional information which you consider relevant to this disclosure.
2. As part of ACP's disclosure process, ACP requires your annual affirmation to abide by its Disclosure of Interests and Management of Conflicts Policy, Non-Disclosure Agreement, Intellectual Property Policy, Staff Confidentiality Policy and Anti-Harassment Policy as determined by your College involvement.

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?

■ Annals of Internal Medicine editorial staff?

■ Other (meeting guests, contractors, authors, speakers, project contributors, peer reviewers, etc.)

No (College or chapter staff)

i. I, the undersigned, acknowledge I have read and agree to abide by the American College of Physician's [Staff Confidentiality Policy](#).

Yes

ii. 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

iii. **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



## Relevant Publications and Other Intellectual Interests for Ongoing Projects

### Disclosures of Interests: Supplemental Questions

Please review the following topic areas and report any intellectual or other relevant interests held by you or any household members from the last 3 years that may be relevant to the below 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.

### Topics Currently Under Development

In the table below, please list any relevant intellectual interests (including relevant publications from peer- and non-peer-reviewed sources or other relevant interests not captured in your Convey.

You only need to report interests from the last 3 years and you do not need to report publications developed on behalf of ACP.

You may also share a list of publications via a link to list of your published works (such as ORCID or PubMed) or as an attachment (write “see attachment” in table).

Clinical Topic Area	Relevant Interests from Last 3 Years <i>If none, write “None”</i>
Anxiety	None
Breast Cancer	None
Cardiovascular disease	None
COVID-19	None
Depression	None
Diabetes	None
Hyperlipidemia	None
Hypertension	None
Influenza	None
Insomnia	None
Kidney health	None
Menopausal therapy	None
Migraine	None
Obesity	None
Osteoporosis	None
Prostate Cancer	None
Rhinosinusitis	See Convey for contributions on CRSwNP real-world studies related to employment at OM1, Inc.
RSV	None

### 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.

## Relevant Publications and Other Intellectual Interests for Ongoing Projects

- I attest that I have reviewed the above topic areas and that my disclosures are up to date.

Chelsea Vigna

---

Name

7/18/2025

*Chelsea Vigna*

---

Signature

Date

**Discloser Identifier:** 03994247

**Disclosure Purpose:** Staff Disclosure 2025 - 2026, Annual Staff Disclosure 2024 - 2025

**Employment Information:** Currently Employed

Summary of Interests

Company or Organization

Entity	Type	Interest Held By	Value																
American College of Physicians	Consultant	Self	-																
<div><div><b>Category:</b> Consultant</div><div><b>End Date:</b> Ongoing / No Known End Date</div><div><b>Compensation Type:</b> Other</div><div><b>Compensation:</b> Yes</div></div> <div><div><b>Start Date:</b> 04/01/2019</div><div><b>Other Compensation:</b> % of salary &amp; benefits to current employer</div></div>																			
<table><tr><th>Year</th><th>Amount</th><th>Amount Type</th><th>Compensation Type</th></tr><tr><td>2025</td><td></td><td>Unknown</td><td>Other</td></tr><tr><td>2024</td><td></td><td>Unknown</td><td>Other</td></tr><tr><td>2023</td><td></td><td>Unknown</td><td>Other</td></tr></table>				Year	Amount	Amount Type	Compensation Type	2025		Unknown	Other	2024		Unknown	Other	2023		Unknown	Other
Year	Amount	Amount Type	Compensation Type																
2025		Unknown	Other																
2024		Unknown	Other																
2023		Unknown	Other																
<b>Additional Information:</b> Senior Scientist																			
COVID-END	Other	Self	-																
<div><div><b>Category:</b> Other</div><div><b>End Date:</b> 05/31/2023</div><div><b>Compensation Type:</b> Unpaid</div><div><b>Compensation:</b> No</div><div><b>Additional Information:</b></div></div> <div><div><b>Start Date:</b> 05/01/2020</div></div>																			
European Cooperation in Science and Technology	Other	Self	-																
<div><div><b>Category:</b> Other</div><div><b>End Date:</b> 04/16/2023</div><div><b>Compensation Type:</b> Unpaid</div><div><b>Compensation:</b> No</div><div><b>Additional Information:</b> Member of Program Management Group for COST Action grant: <a href="https://www.cost.eu/actions/CA17117/">https://www.cost.eu/actions/CA17117/</a></div></div> <div><div><b>Start Date:</b> 10/17/2018</div></div>																			
Evidence Based Research Network	Fiduciary Officer	Self	-																
<div><div><b>Official Title:</b> Steering Committee Member</div><div><b>Compensation Type:</b> Unpaid</div><div><b>Start Date:</b> 10/01/2016</div><div><b>Compensation:</b> No</div><div><b>Additional Information:</b></div></div> <div><div><b>Position Description:</b></div><div><b>End Date:</b> Ongoing / No Known End Date</div></div>																			
Evidence Synthesis Infrastructure Collaborative	Other	Self	\$5000.00																
<div><div><b>Category:</b> Other</div><div><b>End Date:</b> 06/26/2025</div><div><b>Compensation Type:</b> Other</div><div><b>Compensation:</b> Yes</div></div> <div><div><b>Start Date:</b> 12/18/2024</div><div><b>Other Compensation:</b> Stipend + Travel</div></div>																			

Entity		Type	Interest Held By	Value
Year	Amount	Amount Type	Compensation Type	
2025	\$5,000.00	Estimated	Other	
Additional Information:				
Evidence Synthesis International		Fiduciary Officer	Self	-
<div>Official Title: Secretariat</div> <div>Compensation Type: Unpaid</div> <div>Start Date: 03/01/2018</div> <div>Compensation: No</div> <div>Additional Information:</div> <div>Position Description: Organize and support activities of the organisation</div> <div>End Date: Ongoing / No Known End Date</div>				
McMaster University		Other	Self	-
<div>Category: Other</div> <div>End Date: 06/30/2023</div> <div>Compensation Type: Unpaid</div> <div>Compensation: No</div> <div>Additional Information: Assistant Clinical Faculty</div> <div>Start Date: 07/01/2017</div>				
Sigma Theta Tau International		Fiduciary Officer	Self	-
<div>Official Title: Immediate Past President</div> <div>Compensation Type: Unpaid</div> <div>Start Date: 10/01/2021</div> <div>Compensation: No</div> <div>Additional Information:</div> <div>Position Description:</div> <div>End Date: 09/30/2022</div>				
Villanova University		Employment <div>Current Employment</div>	Self	-
<div>Title: Professor</div> <div>Start Date: 08/22/2017</div> <div>Additional Information:</div> <div>Position Description:</div> <div>End Date: Ongoing / No Known End Date</div>				
Villanova University		Grant / Contract	Self	\$50000.00
<div>Recipient Name: M. Louise Fitzpatrick College of Nursing</div> <div>Grant / Contract Description: COVID-19 Caring About Health for All Study (CHAMPS)</div> <div>Contract Start Date: 03/31/2020</div> <div>Grant / Contract Amount:\$50,000.00</div> <div>Additional Information: Principal Investigators: Kaufman, P., Havens, D., Mensinger, J.; Co-Investigators: Bradley, P., Brom, H., Copel, L., Maldonado, L., Smeltzer, S., Yost, J.</div> <div>Recipient Type: Institution</div> <div>Grant / Contract Purpose: Research</div> <div>Grant / Contract Valuation Date: 03/31/2020</div> <div>Contract End Date: 02/01/2024</div>				

Additional Questions

1. Please specify any additional information which you consider relevant to this disclosure.
- N/A
2. As part of ACP's disclosure process, ACP requires your annual affirmation to abide by its Disclosure of Interests and Management of Conflicts Policy, Non-Disclosure Agreement, Intellectual Property Policy, Staff Confidentiality Policy and Anti-Harassment Policy as determined by your College involvement.
- 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?

- **Annals of Internal Medicine editorial staff?**
- **Other (meeting guests, contractors, authors, speakers, project contributors, peer reviewers, etc.)**

Yes (ACP board, committee, council, task force, and/or other governance group, Chapter Council or other Chapter leadership role, Annals of Internal Medicine editorial staff, Other (meeting guests, contractors, authors, speakers, project contributors, peer reviewers, etc.)

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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- 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

## Relevant Publications and Other Intellectual Interests for Ongoing Projects

### Disclosures of Interests: Supplemental Questions

Please review the following topic areas and report any intellectual or other relevant interests held by you or any household members from the last 3 years that may be relevant to the below topic areas.

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- Examples of types of intellectual interests include publications, unpaid participation on workgroups, panels, or committees, or membership in special interest groups.

### Topics Currently Under Development

In the table below, please list any relevant intellectual interests (including relevant publications from peer- and non-peer-reviewed sources or other relevant interests not captured in your Convey.

You only need to report interests from the last 3 years and you do not need to report publications developed on behalf of ACP.

You may also share a list of publications via a link to list of your published works (such as ORCID or PubMed) or as an attachment (write “see attachment” in table).

Clinical Topic Area	Relevant Interests from Last 3 Years <i>If none, write “None”</i>
Anxiety	
Breast Cancer	
Cardiovascular disease	
COVID-19	See ORCID ID: 0000-0002-3170-1956
Depression	See ORCID ID: 0000-0002-3170-1956
Diabetes	See ORCID ID: 0000-0002-3170-1956
Hyperlipidemia	
Hypertension	
Influenza	
Insomnia	
Kidney health	
Menopausal therapy	
Migraine	
Obesity	
Osteoporosis	
Prostate Cancer	
Rhinosinusitis	
RSV	

### 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.

## Relevant Publications and Other Intellectual Interests for Ongoing Projects

- I attest that I have reviewed the above topic areas and that my disclosures are up to date.

Jennifer Yost

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Name



29 July 2025

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Signature

Date

<b>Discloser Identifier:</b> 03994908	<b>Disclosure Purpose:</b> Contributor Disclosure	<b>Employment Information:</b> Currently Employed
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Summary of Interests

Company or Organization

Entity	Type	Interest Held By	Value
University for Continuing Education	Employment <b>Current Employment</b>	Self	-

**Title:** Head of Department  
**Start Date:** 01/13/2008  
**Additional Information:**

**Position Description:** Head of Department for Evidence-Based Medicine and Evaluation  
**End Date:** Ongoing / No Known 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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- 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



**Discloser** 04095851  
**Identifier:****Disclosure** Contributor Disclosure  
**Purpose:****Employment** Currently Employed  
**Information:**

## Summary of Interests

### Company or Organization

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

<b>Discloser Identifier:</b> 04351087	<b>Disclosure Purpose:</b> Contributor Disclosure	<b>Employment Information:</b> Currently Employed
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Summary of Interests

Company or Organization

Entity	Type	Interest Held By	Value
Danube University for Continuing Education Krems	Employment Current Employment	Self	-
<b>Title:</b> PhD student in Applied Evidence Synthesis in Health Research <b>Start Date:</b> 09/01/2021 <b>Additional Information:</b>			
<b>Position Description:</b> <b>End Date:</b> Ongoing / No Known End Date			
Karl Landsteiner University	Other	Self	-
<b>Category:</b> Other <b>End Date:</b> 08/01/2024 <b>Compensation Type:</b> Unpaid <b>Compensation:</b> No <b>Additional Information:</b> Student			
<b>Start Date:</b> 10/01/2018			
Vanguard S and P 500 ETF	Stock	Self	\$8000.00
<b>Percentage Ownership:</b> 0 <b>Estimated Value:</b> \$8,000.00 <b>Divestment Date:</b> Ongoing / No Known Divestment Date <b>Additional Information:</b>			
<b>Valuation Date:</b> 07/17/2025			

Additional Questions

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

I do not have an affiliation with an investment firm, but have some retirement in an ETF of Vanguard S and P 500 through my bank (Revolut)

2. As part of ACP's disclosure process, ACP requires your annual affirmation to abide by its Disclosure of Interests and Management of Conflicts Policy, Non-Disclosure Agreement, Intellectual Property Policy, Staff Confidentiality Policy and Anti-Harassment Policy as determined by your College involvement.

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?

Annals of Internal Medicine editorial staff?

Other (meeting guests, contractors, authors, speakers, project contributors, peer reviewers, etc.)

Yes (ACP board, committee, council, task force, and/or other governance group, Chapter Council or other Chapter leadership role, Annals of Internal Medicine editorial staff, Other (meeting guests, contractors, authors, speakers, project contributors, peer reviewers, etc.)

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

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- 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

<b>Discloser Identifier:</b> 04670213	<b>Disclosure Purpose:</b> Contributor Disclosure	<b>Employment Information:</b> Currently Employed
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### Summary of Interests

Company or Organization

Entity	Type	Interest Held By	Value
Universität für Weiterbildung Krems	Employment Current Employment	Self	-

**Title:** Research Assistant  
**Start Date:** 03/01/2016  
**Additional Information:**

**Position Description:**  
**End Date:** Ongoing / No Known 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

<b>Discloser Identifier:</b> 04387934	<b>Disclosure Purpose:</b> Contributor Disclosure	<b>Employment Information:</b> Currently Employed
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Summary of Interests

Company or Organization

Entity	Type	Interest Held By	Value
University for Continuing Education Krems	Employment Current Employment	Self	-

**Title:** Department for Evidence-Based Medicine and Evaluation  
**Start Date:** 09/01/2022  
**Additional Information:** Projects: Evidence-based Nursing Centre (Cochrane Austria) and JBI Austria, ACP, projects of the department for Evidence-based Medicine and Evaluation: 28h/week; conducting evidence synthesis; teaching: Master degree programme for applied health sciences and bachelor degree programme for midwifery; MA BSc

**Position Description:** Research Associate  
**End Date:** 12/31/2026

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

**Discloser Identifier:** 04630099**Disclosure Purpose:** Contributor Disclosure**Employment Information:** Currently Employed

## Summary of Interests

### Company or Organization

Entity	Type	Interest Held By	Value
American College of Physicians	Employment <b>Current Employment</b>	Self	-
<b>Title:</b> <b>Start Date:</b> 02/13/2025 <b>Additional Information:</b>			
<b>Position Description:</b> <b>End Date:</b> Ongoing / No Known End Date			
PLOS ONE	Other	Self	-
<b>Category:</b> Other <b>End Date:</b> Ongoing / No Known End Date <b>Compensation Type:</b> Unpaid <b>Compensation:</b> No <b>Additional Information:</b> I hold a voluntarily role as an academic editor at PLOS ONE.			
<b>Start Date:</b> 01/28/2025			

## 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

**Discloser Identifier:** 04243050

**Disclosure Purpose:** Contributor Disclosure

**Employment Information:** Currently Employed

### Summary of Interests

#### Company or Organization

Entity	Type	Interest Held By	Value
European Health a	Grant / Contract	Self	\$2160000.00
<div><div><b>Recipient Name:</b> University of Freiburg <b>Grant / Contract Description:</b> Service Contract for Systematic Reviews of Scientific Evidence on Vaccines and Capacity Building Act <b>Contract Start Date:</b> 09/12/2022 <b>Grant / Contract Amount:</b>\$2,160,000.00 <b>Additional Information:</b></div><div><b>Recipient Type:</b> Institution <b>Grant / Contract Purpose:</b> Research <b>Grant / Contract Valuation Date:</b> 08/16/2024 <b>Contract End Date:</b> 09/12/2026</div></div>			
University for Continuing Education Krems	Employment Current Employment	Self	-
<div><div><b>Title:</b> Associate Professor <b>Start Date:</b> 12/01/2023 <b>Additional Information:</b></div><div><b>Position Description:</b> Systematic Reviewer, Methodologist <b>End Date:</b> Ongoing / No Known End Date</div></div>			

### Certification

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

- Research and consulting support (e.g., grants, contracts, sponsorships, honoraria, or any other fees related to role as consultant, speaker's bureau participation, or expert as part of regulatory, legislative, or judicial process)
- Investments and proprietary interests excluding broadly diversified investments such as mutual or pension funds (e.g., stocks, bonds, stock options, commercial business interests, patents, trademarks, copyrights)
- Membership on boards, workgroups, panels, or committees through other medical societies or healthcare organizations
- Participation in advocacy or lobbying activities, including any roles or relationships with disease advocacy organizations
- Other aspects of my background or present interests not addressed above that might be perceived as affecting my objectivity or independence