

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

Name: Elie A. Akl, MD, MPH, PhD

Role:

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

ACTIVE (Current)	Belongs to	Description including amount of value or income			
Employment	Self	American University of Beirut	\$100,001 or more	+	-
	Household	None	--	+	-
Research & Consulting Roles	Self	CO-PI. Grant by: Alliance for Health Policy & Systems Research (AHPSR) at WHO. Title:Hosting Secretariat for the Global Evidence Synthesis Initiative (GESI)	\$10,001 – 50,000	+	-
		Co-I. Grant by: Conseil National De Recherches Scientifiques (CNRS). Title: Applying an impact-oriented approach to support, protect and address the needs of Health Care Workers in Conflict and Post-Conflict Settings	\$10,001 – 50,000	+	-
		PI. conducting systematic reviews for the American College of Rheumatology (ACR) guidelines for Rheumatoid Arthritis	\$50,001 – 100,000	+	-
	Household	None	--	+	-
Investment & Proprietary Interests	Self	None	--	+	-
	Household	None	--	+	-
Committees, Boards, & Workgroups/Panels	Self	GRADE Working Group (member)	\$0	+	-
	Household	None	--	+	-
Other Interests other affiliations, advocacy, etc.	Self	None	--	+	-
	Household	None	--	+	-

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

n/a - no clinical topics on upcoming agenda ☐ Yes ☒ No

For staff use: ADD NEW RESET

INACTIVE (Last 3 years)		Belongs to	Description including amount of value or income			
Employment	Self	None	--	+	-	
	Household	United Nations Development Programme (UNDP)	\$10,001 – 50,000	+	-	
		Mercy Corps (wife)	\$50,001 – 100,000	+	-	

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

Research & Consulting Roles	<i>Self</i>	PI. Grant by: Faculty of Medicine Medical Practice Plan (MPP), American University of Beirut. Title: Intellectual conflict when considering treatment options (IN CONFLICT)	\$10,001 – 50,000	+	-
		CO-PI. Grant by: International League Against Rheumatism (ILAR). Title: Adaptation of the 2015 American College of Rheumatology (ACR) Rheumatoid Arthritis guidelines for the Eastern Mediterranean Region	\$10,001 – 50,000	+	-
		CO-PI. Grant by: World Health Organization Alliance for Health Policy and Systems Research. Title: Establishing a rapid response service to address requests from policymakers for HPSR in LMICs in the Eastern Mediterranean Region	\$100,001 or more	+	-
		CO-PI. Grant by: Global Evidence Synthesis Initiative (GESI). Title: Hosting Secretariat for the Global Evidence Synthesis Initiative (GESI)	\$100,001 or more	+	-
		PI. Grant by: Faculty of Medicine Medical Practice Plan (MPP), American University of Beirut. Title: Developing a methodology for verifying the accuracy and completeness of conflict of interest disclosures in health research	\$10,001 – 50,000	+	-
		PI. Contract to serve as methodologist for the World Health Organizations guidelines	\$5,001 – 10,000	+	-
	<i>Household</i>	None	--	+	-
Investment & Proprietary Interests	<i>Self</i>	None	--	+	-
	<i>Household</i>	None	--	+	-
Committees, Boards, & Workgroups/Panels	<i>Self</i>	None	--	+	-
	<i>Household</i>	None	--	+	-
Other Interests other affiliations, advocacy, etc.	<i>Self</i>	None	--	+	-
	<i>Household</i>	None	--	+	-

DECLARATION

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

Elie A. Akl

Digitally signed by Elie A. Akl
 DN: cn=Elie A. Akl, o, ou, email=ea32@aub.edu.lb, c=US
 Date: 2019.07.26 02:53:03 +03'00'

Jul 26, 2019

Signature

Date

RELEVANT PUBLICATIONS

Copy and paste into box below or send as attachment.

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

Name: Robert M. Centor, MD, MACP

Role:

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

ACTIVE (Current)	Belongs to	Description including amount of value or income		
Employment	Self	Birmingham VA Hospital	\$50,001 – 100,000	+ -
	Household	Valley Foundation	\$0	+ -
Research & Consulting Roles	Self	Medscape (contributor)	Up to \$1,000	+ -
		Dynamed Plus (reviewer)	Up to \$1,000	+ -
	Household	None	--	+ -
Investment & Proprietary Interests	Self	None	--	+ -
	Household	None	--	+ -
Committees, Boards, & Workgroups/Panels	Self	MDCalc Advisory Board (member)	\$0	+ -
		The Curbsiders Podcast (contributor)	\$0	+ -
		NKF performance measure development - screening for CKD in diabetes mellitus (member representing ACP)	\$0	+ -
	Household	None	--	+ -
Other Interests other affiliations, advocacy, etc.	Self	None	--	+ -
	Household	None	--	+ -

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

n/a - no clinical topic areas on upcoming agenda

☐ Yes ☒ No

For staff use:

ADD NEW

RESET

Please review the list of measures in the attached word document. Within the last 3 years, have you or any household members contributed towards the development of one of these measures or a competing measure (measure on the same topic)?

☐ Yes ☒ No

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

☐ Yes ☒ No

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

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

Employment	<i>Self</i>	University of Alabama at Birmingham	\$0	+	-
	<i>Household</i>	None	--	+	-
Research & Consulting Roles	<i>Self</i>	Diatherix, designing a clinical study of their new product for diagnosing bacterial infection in sore throats	\$0	+	-
	<i>Household</i>	None	--	+	-
Investment & Proprietary Interests	<i>Self</i>	None	--	+	-
	<i>Household</i>	None	--	+	-
Committees, Boards, & Workgroups/Panels	<i>Self</i>	None	--	+	-
	<i>Household</i>	None	--	+	-
Other Interests other affiliations, advocacy, etc.	<i>Self</i>	None	--	+	-
	<i>Household</i>	None	--	+	-

DECLARATION

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

Centor, Robert M (Campus) Digitally signed by Centor, Robert M (Campus)
Date: 2019.08.01 08:49:14 -05'00'

Signature _____ Date _____

RELEVANT PUBLICATIONS

Copy and paste into box below or send as attachment.

RELEVANT MEASURES

List in box below or highlight in attached document.

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

Name: Mary Ann Forciea, MD, MACP

Role:

☒ Clinical Guidelines Committee

☐ ACP Staff or Leadership

☐ Performance Measurement Committee

☐ Guest

☐ High Value Care Committee

ACTIVE (Current)	<i>Belongs to</i>	Description including amount of value or income†	
Employment	<i>Self</i>	University of Pennsylvania, Geriatric Medicine Division	--
	<i>Household</i>	Children's Hospital of Philadelphia, University of Pennsylvania School of Medicine	--
Research & Consulting Roles	<i>Self</i>	Health Resources and Services Administration	\$10,001 – 50,000
		Centers for Medicare and Medicaid Services Independence at Home project (lead clinician)	≥\$100,001
		National Institutes of Health grant	≥\$100,001
	<i>Household</i>	National Institute of Mental Health	≥\$100,001
Investment & Proprietary Interests	<i>Self</i>	None	--
	<i>Household</i>	None	--
Committees, Boards, & Workgroups/Panels	<i>Self</i>	National Board of Medical Examiners	Up to \$1,000
		The Ralston Center, Philadelphia Board of Directors	\$0
	<i>Household</i>	National Institutes of Health Advisory Board: Adolescent AIDS Network	\$0
		National Institutes of Health Advisory Board: Pediatric AIDS Network	\$0
Other Interests	<i>Self</i>	None	--
	<i>Household</i>	None	--

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

- | | |
|----------------------|------------------------|
| a) \$0 | e) \$10,001 to 50,000 |
| b) Up to \$1000 | f) \$50,001 to 100,000 |
| c) \$1,001 to 5,000 | g) ≥\$100,001 |
| d) \$5,001 to 10,000 | |

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

n/a – no clinical topics on upcoming agenda

Yes

No

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

INACTIVE (Last 3 years)	Belongs to	Description including amount of value or income†	
Employment	Self	None	--
	Household	None	--
Research & Consulting Roles	Self	Consultant to Agency for Healthcare Research and Quality	Up to \$1,000
		Springer Aging Series Consultant	Up to \$1,000
	Household	None	--
Investment & Proprietary Interests	Self	None	--
	Household	None	--
Committees, Boards, & Workgroups/Panels	Self	None	--
	Household	None	--
Other Interests	Self	None	--
	Household	None	--

DECLARATION

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

Signature



Date

7/24/19

RELEVANT PUBLICATIONS

Copy and paste below or send as attachment.

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

- | | |
|----------------------|------------------------|
| a) \$0 | e) \$10,001 to 50,000 |
| b) Up to \$1000 | f) \$50,001 to 100,000 |
| c) \$1,001 to 5,000 | g) ≥\$100,001 |
| d) \$5,001 to 10,000 | |

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

Name: Raymond A. Haeme

Role:

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

ACTIVE (Current)	Belongs to	Description including amount of value or income		
Employment	Self	Retired	--	+ -
	Household	Retired	--	+ -
Research & Consulting Roles	Self	None	--	+ -
	Household	None	--	+ -
Investment & Proprietary Interests	Self	None	--	+ -
	Household	None	--	+ -
Committees, Boards, & Workgroups/Panels	Self	North American Primary Care Research Group - Patient and Clinician Engagement (PaCE) project	\$0	+ -
	Household	None	--	+ -
Other Interests other affiliations, advocacy, etc.	Self	None	--	+ -
	Household	None	--	+ -

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

n/a - no clinical topics on upcoming agenda ☐ Yes ☒ No

For staff use: ADD NEW RESET

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

DECLARATION

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

Ray Haeme

 Digitally signed by Ray Haeme
Date: 2019.08.01 14:51:12 -04'00'

Aug 1,2019

Signature

Date

RELEVANT PUBLICATIONS

Copy and paste into box below or send as attachment.

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

Name: Peter G. Hamilton, MBBCh, FACP

Role:

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

ACTIVE (Current)	Belongs to	Description including amount of value or income†	
Employment	<i>Self</i>	University of Alberta	≥\$100,001
	<i>Household</i>	None	--
Research & Consulting Roles	<i>Self</i>	None	--
	<i>Household</i>	None	--
Investment & Proprietary Interests	<i>Self</i>	None	--
	<i>Household</i>	None	--
Committees, Boards, & Workgroups/Panels	<i>Self</i>	Royal College of Physicians and Surgeons of Canada Awards committee member	\$0
	<i>Household</i>	None	--
Other Interests	<i>Self</i>	None	--
	<i>Household</i>	None	--

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

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

n/a – no clinical topic areas on upcoming agenda _____ Yes _____ No

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

INACTIVE (Last 3 years)	Belongs to	Description including amount of value or income†	
Employment	<i>Self</i>	None	--
	<i>Household</i>	None	--
Research & Consulting	<i>Self</i>	None	--

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

- | | |
|----------------------|------------------------|
| a) \$0 | e) \$10,001 to 50,000 |
| b) Up to \$1000 | f) \$50,001 to 100,000 |
| c) \$1,001 to 5,000 | g) ≥\$100,001 |
| d) \$5,001 to 10,000 | |

Roles	<i>Household</i>	None	--
Investment & Proprietary Interests	<i>Self</i>	None	--
	<i>Household</i>	None	--
Committees, Boards, & Workgroups/Panels	<i>Self</i>	None	--
	<i>Household</i>	None	--
Other Interests	<i>Self</i>	None	--
	<i>Household</i>	Volunteer at Zebra Society	--

DECLARATION

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

Signature



23 July 2019

Date

RELEVANT PUBLICATIONS

Copy and paste below or send as attachment.

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

- | | |
|----------------------|------------------------|
| a) \$0 | e) \$10,001 to 50,000 |
| b) Up to \$1000 | f) \$50,001 to 100,000 |
| c) \$1,001 to 5,000 | g) ≥\$100,001 |
| d) \$5,001 to 10,000 | |

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

Name: Russell P. Harris, MD, MPH, FACP

Role:

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

ACTIVE (Current)	Belongs to	Description including amount of value or income		
Employment	Self	Retired	--	+ -
	Household	None	--	+ -
Research & Consulting Roles	Self	None	--	+ -
	Household	None	--	+ -
Investment & Proprietary Interests	Self	None	--	+ -
	Household	None	--	+ -
Committees, Boards, & Workgroups/Panels	Self	None	--	+ -
	Household	None	--	+ -
Other Interests other affiliations, advocacy, etc.	Self	None	--	+ -
	Household	None	--	+ -

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

n/a - no clinical topics on upcoming agenda ☐ Yes ☒ No

For staff use: ADD NEW RESET

INACTIVE (Last 3 years)	Belongs to	Description including amount of value or income		
Employment	Self	University of North Carolina	\$100,001 or more	+ -
	Household	None	--	+ -
Research & Consulting Roles	Self	None	--	+ -
	Household	None	--	+ -
Investment & Proprietary Interests	Self	None	--	+ -
	Household	None	--	+ -
Committees, Boards, & Workgroups/Panels	Self	None	--	+ -
	Household	None	--	+ -
Other Interests other affiliations, advocacy, etc.	Self	None	--	+ -
	Household	None	--	+ -

DECLARATION

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

Russell Harris

 Digitally signed by Russell Harris
Date: 2019.08.02 20:29:04 -04'00'

Aug 2, 2019

Signature

Date

RELEVANT PUBLICATIONS

Copy and paste into box below or send as attachment.

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

Name: Gregory Hood, MD, MACP, FRCP

Role:

☐ Clinical Guidelines Committee

☐ ACP Staff or Leadership

☐ Performance Measurement Committee

☐ Guest

☒ High Value Care Committee

ACTIVE (Current)	Belongs to	Description including amount of value or income†	
Employment	Self	MDVIP 400K	Add value/income
	Self	Medscape (columnist) 6K	Add value/income
	Household	None	--
Research & Consulting Roles	Self	Sustainably Health Communities – principal investigator on study to improve smoking cessation and lung cancer screening for PCPs	Add value/income 18K
	Household	None	--
Investment & Proprietary Interests	Self	None	--
	Household	None	--
Committees, Boards, & Workgroups/Panels	Self	PCSS (Providers Clinical Support System) – funded by SAMHSA to train PCPs in evidence-based prevention and treatment of opioid use disorders, Clinical Expert (ACP representative)	Add value/income N/A
	Self	ACP IM annual meeting workshop presenter	Add value/income N/A
	Household	None	--
Other Interests	Self	None	--
	Household	None	--

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

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

n/a – no clinical topic areas on upcoming agenda

Yes

No

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

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

- | | |
|----------------------|------------------------|
| a) \$0 | e) \$10,001 to 50,000 |
| b) Up to \$1000 | f) \$50,001 to 100,000 |
| c) \$1,001 to 5,000 | g) ≥\$100,001 |
| d) \$5,001 to 10,000 | |

INACTIVE (Last 3 years)	Belongs to	Description including amount of value or income†	
Employment	Self	None	
	Household	None	--
Research & Consulting Roles	Self	Expert witness for 2 patients in injury legal proceedings	Add value/income 15,000
	Household	None	--
Investment & Proprietary Interests	Self	None	--
	Household	None	--
Committees, Boards, & Workgroups/Panels	Self	ACP Services PAC – attended congressional fundraiser as ACP representative	--
	Household	None	
Other Interests	Self	None	--
	Household	None	--

DECLARATION

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

Signature

Date

RELEVANT PUBLICATIONS

Copy and paste below or send as attachment.

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

- | | |
|----------------------|------------------------|
| a) \$0 | e) \$10,001 to 50,000 |
| b) Up to \$1000 | f) \$50,001 to 100,000 |
| c) \$1,001 to 5,000 | g) ≥\$100,001 |
| d) \$5,001 to 10,000 | |

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

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

Role:

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

ACTIVE (Current)	<i>Belongs to</i>	Description including amount of value or income			
Employment	<i>Self</i>	Portland VA Medical Center	--	+	-
	<i>Household</i>	Spouse: Cardiologist at Legacy Health System	--	+	-
Research & Consulting Roles	<i>Self</i>	University of Texas grant on harms of breast cancer screening in older women	\$1,001 – 5,000	+	-
	<i>Household</i>	None	--	+	-
Investment & Proprietary Interests	<i>Self</i>	UpToDate royalties	\$1,001 – 5,000	+	-
	<i>Household</i>	None	--	+	-
Committees, Boards, & Workgroups/Panels	<i>Self</i>	None	--	+	-
	<i>Household</i>	None	--	+	-
Other Interests other affiliations, advocacy, etc.	<i>Self</i>	Women's Preventive Services Initiative Committee (member, ACP representative)	\$0	+	-
	<i>Household</i>	None	--	+	-

In the last 3 years, have you or any household members published on any of the following topic areas? Please include both peer-reviewed and non-peer-reviewed sources (e.g. newspaper op-ed; blog)
<u>n/a - no clinical topics on upcoming agenda</u> <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

For staff use: ADD NEW RESET

INACTIVE (Last 3 years)	<i>Belongs to</i>	Description including amount of value or income			
Employment	<i>Self</i>	None	--	+	-
	<i>Household</i>	None	--	+	-
Research & Consulting Roles	<i>Self</i>	US Preventive Services Task Force grant on lung and breast cancer screening	\$1,001 – 5,000	+	-
		Agency for Healthcare Research and Quality grant on lung and breast cancer screening	\$10,001 – 50,000	+	-
		Patient-Centered Outcomes Research Institute peer review (I am an associate editor, so many topics)	\$10,001 – 50,000	+	-
	<i>Household</i>	None	--	+	-

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

Investment & Proprietary Interests	<i>Self</i>	Gilead Sciences 10 shares	Up to \$1,000	+	-
		Stock in Pfizer	\$1,001 – 5,000	+	-
		Stock in Shinogi	\$1,001 – 5,000	+	-
		Stock in Biogen	\$1,001 – 5,000	+	-
	<i>Household</i>	None	--	+	-
Committees, Boards, & Workgroups/Panels	<i>Self</i>	None	--	+	-
	<i>Household</i>	None	--	+	-
Other Interests other affiliations, advocacy, etc.	<i>Self</i>	VA Preventive Medicine Advisory Committee (member)	\$0	+	-
	<i>Household</i>	None	--	+	-

DECLARATION

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

Linda L Humphrey 387759

Digitally signed by Linda L Humphrey 387759
Date: 2019.07.26 15:02:58 -07'00'

Signature

Date

RELEVANT PUBLICATIONS

Copy and paste into box below or send as attachment.

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

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

Role:

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

ACTIVE (Current)		Belongs to	Description including amount of value or income		
Employment	Self		University of Illinois College of Medicine; VA Illiana Healthcare System, Danville, IL	\$100,001 or more	+ -
	Household		Spouse: University of Illinois at Urbana-Champaign	\$100,001 or more	+ -
Research & Consulting Roles	Self		ACP MKSAP 2019 Deputy Editor	\$10,001 – 50,000	+ -
	Household		None	--	+ -
Investment & Proprietary Interests	Self		None	--	+ -
	Household		None	--	+ -
Committees, Boards, & Workgroups/Panels	Self		Association of American Medical Colleges, Entrustable Professional Activities Core Working Group, University of Illinois College of Medicine Team (member)	\$0	+ -
			American Board of Medical Specialties, Committee on Certification (COCERT, member)	\$0	+ -
			Champaign County Audubon Board member	\$0	+ -
			Mississippi Valley Regional Blood Center Board Member	\$0	+ -
	Household		None	--	+ -
Other Interests other affiliations, advocacy, etc.	Self		None	--	+ -
	Household		None	--	+ -

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

n/a - no clinical topics on upcoming agenda ☐ Yes ☐ No

For staff use: ADD NEW RESET

INACTIVE (Last 3 years)		Belongs to	Description including amount of value or income		
Employment	Self		None	--	+ -
	Household		None	--	+ -


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

Research & Consulting Roles	<i>Self</i>	None	--	+	-
	<i>Household</i>	Spouse: National Science Foundation, Broader Impact Initiative; Air Force Office of Scientific Research, real-time decision making under certainty, until 02/2018	\$100,001 or more	+	-
		Spouse: Law firm, expert witness (issue pertaining to pharmaceuticals--I do not know anything further about this due to confidentiality constraints)	\$10,001 – 50,000	+	-
		Spouse: National Science Foundation, pediatric vaccine research, ended August 2017	\$100,001 or more	+	-
Investment & Proprietary Interests	<i>Self</i>	None	--	+	-
	<i>Household</i>	None	--	+	-
Committees, Boards, & Workgroups/Panels	<i>Self</i>	None	--	+	-
	<i>Household</i>	Spouse: National Academy of Medicine, standing committee for the CDC Strategic National Stockpile (member)	\$0	+	-
Other Interests other affiliations, advocacy, etc.	<i>Self</i>	None	--	+	-
	<i>Household</i>	None	--	+	-

DECLARATION

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

Janet A. Jokela, MD

 Digitally signed by Janet A. Jokela, MD
Date: 2019.07.23 11:42:07 -05'00'

Jul 23, 2019

Signature

Date

RELEVANT PUBLICATIONS

Copy and paste into box below or send as attachment.

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

Name: Devan Kansagara, MD, MCR

Role:

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

ACTIVE (Current)	Belongs to	Description including amount of value or income		
Employment	Self	Portland VA Medical Center	--	+ -
	Household	Rheumatologist in community practice	--	+ -
Research & Consulting Roles	Self	Evidence-based Synthesis Program, Portland VA Source: Department of Veterans Affairs, HSR&D Service PI: Devan Kansagara, MD, MCR Period: 2009-present %Effort: 35	\$10,001 – 50,000	+ -
		Center of Innovation: Center to Improve Veteran Involvement in Care (CIVIC) Source: VA Health Services Research and Development PI: Steven Dobscha, MD Period: 2013-(5 year project) %Effort: 5 (co-investigator)	\$5,001 – 10,000	+ -
	Household	None	--	+ -
Investment & Proprietary Interests	Self	None	--	+ -
	Household	None	--	+ -
Committees, Boards, & Workgroups/Panels	Self	None	--	+ -
	Household	None	--	+ -
Other Interests other affiliations, advocacy, etc.	Self	None	--	+ -
	Household	None	--	+ -

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

Acute pain

High flow nasal oxygen

Point of care ultrasound

☐ Yes ☒ No
☐ Yes ☒ No
☐ Yes ☒ No

For staff use: ADD NEW RESET

INACTIVE (Last 3 years)	Belongs to	Description including amount of value or income		
Employment	Self	None	--	+ -
	Household	None	--	+ -


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

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

DECLARATION

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

Devan Kansagara

 Digitally signed by Devan Kansagara
Date: 2019.08.12 13:43:37 -07'00'

Signature

Date

RELEVANT PUBLICATIONS

Copy and paste into box below or send as attachment.

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

Name: Maura Marcucci, MD, MSc

Role:

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

ACTIVE (Current)	Belongs to	Description including amount of value or income		
Employment	Self	McMaster University, Hamilton, Canada	--	+ -
	Household	MSc Candidate at McMaster University--only part-time research work	--	+ -
Research & Consulting Roles	Self	Co-investigator on a public grant funded by the European Commission on strategies to prevent or delay age-related frailty	\$100,001 or more	+ -
		Principal Investigator on a public grant funded by the Canadian Institutes of Health Research on interventions to reduce postoperative delirium and cognitive outcome	\$100,001 or more	+ -
	Household	None	--	+ -
Investment & Proprietary Interests	Self	None	--	+ -
	Household	None	--	+ -
Committees, Boards, & Workgroups/Panels	Self	None	--	+ -
	Household	None	--	+ -
Other Interests other affiliations, advocacy, etc.	Self	None	--	+ -
	Household	Member of Network of Canadian Emergency Researchers	\$0	+ -

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

n/a - no clinical topic areas on upcoming agenda ☐ Yes ☐ No

For staff use: ADD NEW RESET

INACTIVE (Last 3 years)	Belongs to	Description including amount of value or income		
Employment	Self	University of Milan & Fondazione IRCCS Ca'Granda Ospedale Maggiore Policlinico, Milan, Italy	--	+ -
	Household	Emergency Medicine physician at Fondazione IRCCS Ca'Granda Ospedale Maggiore Policlinico, Milan, Italy	--	+ -
Research & Consulting Roles	Self	None	--	+ -
	Household	None	--	+ -
Investment & Proprietary Interests	Self	None	--	+ -
	Household	None	--	+ -


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

Committees, Boards, & Workgroups/Panels	<i>Self</i>	Member of the European partnership on Active Health and Aging – work groups on Frailty and on Cognitive Decline (an European Commission initiative)	\$0	+	-
		Member of the Scientific Sub-Committee for the International Society of Thrombosis And Haemostasis (ISTH) on Predictors of Venous and Arterial Thromboembolism	\$0	+	-
	<i>Household</i>	Member of the European partnership on Active Health and Aging – work groups on Frailty	\$0	+	-
Other Interests other affiliations, advocacy, etc.	<i>Self</i>	None	--	+	-
	<i>Household</i>	None	--	+	-

DECLARATION

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

Maura Marcucci

 Digitally signed by Maura Marcucci
Date: 2019.08.06 12:14:33 +02'00'

Signature

Date

RELEVANT PUBLICATIONS

Copy and paste into box below or send as attachment.

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

Name: Adam J. Obley, MD

Role:

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

ACTIVE (Current)	Belongs to	Description including amount of value or income		
Employment	Self	Portland VA Medical Center	--	+ -
		Center for Evidence-based Policy, Oregon Health & Science University	--	+ -
	Household	None	--	+ -
Research & Consulting Roles	Self	Oregon Health Evidence Review Commission, Clinical Evidence Consultant	\$0	+ -
		Milbank Memorial Fund Evidence-informed Health Policy workshops (faculty)	\$0	+ -
	Household	None	--	+ -
Investment & Proprietary Interests	Self	None	--	+ -
	Household	None	--	+ -
Committees, Boards, & Workgroups/Panels	Self	None	--	+ -
	Household	None	--	+ -
Other Interests other affiliations, advocacy, etc.	Self	ACP Oregon Chapter Health Policy Committee (chair)	\$0	+ -
		Oregon Medical Association (trustee)	\$0	+ -
		Medical Society of Metropolitan Portland (trustee)	\$0	+ -
	Household	None	--	+ -

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

n/a - no clinical topic areas on upcoming agenda ☐ Yes ☐ No

For staff use: ADD NEW RESET

INACTIVE (Last 3 years)	Belongs to	Description including amount of value or income		
Employment	Self	None	--	+ -
	Household	None	--	+ -
Research & Consulting Roles	Self	None	--	+ -
	Household	None	--	+ -
Investment & Proprietary Interests	Self	None	--	+ -
	Household	None	--	+ -


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

Committees, Boards, & Workgroups/Panels	<i>Self</i>	None	--	+	-
	<i>Household</i>	None	--	+	-
Other Interests other affiliations, advocacy, etc.	<i>Self</i>	None	--	+	-
	<i>Household</i>	None	--	+	-

DECLARATION

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

Adam J. Obley 564252

 Digitally signed by Adam J. Obley 564252
Date: 2019.08.12 16:36:27 -07'00'

Signature

Date

RELEVANT PUBLICATIONS

Copy and paste into box below or send as attachment.

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

Name: Douglas M. DeLong, MD, FACP

Role:

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

ACTIVE (Current)

Belongs to Description including amount of value or income

Employment	<i>Self</i>	Bassett Healthcare	--	+ -
	<i>Household</i>	None	--	+ -
Research & Consulting Roles	<i>Self</i>	None	--	+ -
	<i>Household</i>	None	--	+ -
Investment & Proprietary Interests	<i>Self</i>	None	--	+ -
	<i>Household</i>	None	--	+ -
Committees, Boards, & Workgroups/Panels	<i>Self</i>	New York Medicaid Basic Benefit Review Committee (member)	\$0	+ -
	<i>Household</i>	None	--	+ -
Other Interests other affiliations, advocacy, etc.	<i>Self</i>	ACP Leadership day (participant)	\$0	+ -
		NYACP advocacy day (participant)	\$0	+ -
		Medical Society of the State of New York (member)	\$0	+ -
	<i>Household</i>	None	--	+ -

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

Acute pain ☐ Yes ☒ No
 High flow nasal oxygen ☐ Yes ☒ No
 Point of care ultrasound ☐ Yes ☒ No

For staff use: ADD NEW RESET

Please review the list of measures in the attached word document. Within the last 3 years, have you or any household members contributed towards the development of one of these measures or a competing measure (measure on the same topic)?

☐ Yes ☒ No

Within the last 3 years, have you or any household members published on any of the clinical topic areas covered by these measures?

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

☐ Yes ☒ No

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

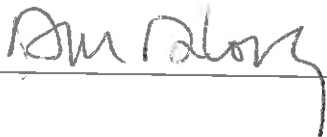
INACTIVE (Last 3 years) *Belongs to* Description including amount of value or income

Employment	<i>Self</i>	Bassett Healthcare	--	+ -
	<i>Household</i>	None	--	+ -
Research & Consulting Roles	<i>Self</i>	None	--	+ -
	<i>Household</i>	None	--	+ -
Investment & Proprietary Interests	<i>Self</i>	None	--	+ -
	<i>Household</i>	None	--	+ -
Committees, Boards, & Workgroups/Panels	<i>Self</i>	ACP Board of Regents	--	+ -
	<i>Household</i>	None	--	+ -
Other Interests other affiliations, advocacy, etc.	<i>Self</i>	AMA	--	+ -
	<i>Household</i>	None	--	+ -

DECLARATION

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

Signature



Date

8/1/19

RELEVANT PUBLICATIONS

Copy and paste into box below or send as attachment.

RELEVANT MEASURES

List in box below or highlight in attached document.

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

Name: Robert M. McLean, MD, FACP

Role:

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

ACTIVE (Current)		Belongs to	Description including amount of value or income		
Employment	Self		Northeast Medical Group	\$100,001 or more	+ -
	Household		None	--	+ -
Research & Consulting Roles	Self		None	--	+ -
	Household		None	--	+ -
Investment & Proprietary Interests	Self		None	--	+ -
	Household		None	--	+ -
Committees, Boards, & Workgroups/Panels	Self		State of Connecticut Healthcare Innovation Steering Committee	\$0	+ -
	Household		None	--	+ -
Other Interests other affiliations, advocacy, etc.	Self		None	--	+ -
	Household		None	--	+ -

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

	Acute pain	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	
	High flow nasal oxygen	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	
	Point of care ultrasound	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	

For staff use: ADD NEW RESET

Please review the list of measures in the attached word document. Within the last 3 years, have you or any household members contributed towards the development of one of these measures or a competing measure (measure on the same topic)?

☐ Yes ☒ No

Within the last 3 years, have you or any household members published on any of the clinical topic areas covered by these measures?

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

☐ Yes ☒ No

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

Employment	Self	None	--	+ -
	Household	None	--	+ -

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

Research & Consulting Roles	<i>Self</i>	None	--	+	-
	<i>Household</i>	None	--	+	-
Investment & Proprietary Interests	<i>Self</i>	None	--	+	-
	<i>Household</i>	None	--	+	-
Committees, Boards, & Workgroups/Panels	<i>Self</i>	ACP PAC, Chair	\$0	+	-
		Committee on Rheumatologic Care of American College of Rheumatology	\$0	+	-
		Advisory Committee to Health Insurance Exchange of Connecticut	\$0	+	-
		ABIM Rheumatology Board	\$1,001 – 5,000	+	-
		Board of Directors of Northeast Medical Group of Yale New Haven Health Systems	\$0	+	-
		Quality of Care Committee - American College of Rheumatology	\$0	+	-
	<i>Household</i>	None	--	+	-
Other Interests other affiliations, advocacy, etc.	<i>Self</i>	None	--	+	-
	<i>Household</i>	None	--	+	-

DECLARATION

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

Signature

Aug 8, 2019

Date

RELEVANT PUBLICATIONS

Copy and paste into box below or send as attachment.

RELEVANT MEASURES

List in box below or highlight in attached document.

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

Name: Wayne H. Bylsma, PhD

Role:

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

ACTIVE (Current)	Belongs to	Description including amount of value or income		
Employment	Self	American College of Physicians	--	+ -
	Household	Ewing Cole	--	+ -
Research & Consulting Roles	Self	None	--	+ -
	Household	None	--	+ -
Investment & Proprietary Interests	Self	None	--	+ -
	Household	None	--	+ -
Committees, Boards, & Workgroups/Panels	Self	None	--	+ -
	Household	None	--	+ -
Other Interests other affiliations, advocacy, etc.	Self	None	--	+ -
	Household	None	--	+ -

In the last 3 years, have you or any household members published on any of the following topic areas? Please include both peer-reviewed and non-peer-reviewed sources (e.g. newspaper op-ed; blog)	
<u>Acute pain</u>	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
<u>High flow nasal oxygen</u>	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
<u>Point of care ultrasound</u>	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

For staff use: ADD NEW RESET

Please review the list of measures in the attached word document. Have you or any household members contributed towards the development of one of these measures or a competing measure (measure on the same topic)?
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Have you or any household members published on any of the clinical topic areas covered by these measures? Please include both peer-reviewed and non-peer-reviewed sources (e.g. newspaper op-ed; blog)
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

INACTIVE (Last 3 years)	Belongs to	Description including amount of value or income		
Employment	Self	None	--	+ -
	Household	None	--	+ -


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

Research & Consulting Roles	<i>Self</i>	None	--	+	-
	<i>Household</i>	None	--	+	-
Investment & Proprietary Interests	<i>Self</i>	None	--	+	-
	<i>Household</i>	None	--	+	-
Committees, Boards, & Workgroups/Panels	<i>Self</i>	None	--	+	-
	<i>Household</i>	None	--	+	-
Other Interests other affiliations, advocacy, etc.	<i>Self</i>	None	--	+	-
	<i>Household</i>	None	--	+	-

DECLARATION

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

Wayne H. Bylsma

 Digitally signed by Wayne H. Bylsma
Date: 2019.08.02 10:17:11 -04'00'

Signature

Date

RELEVANT PUBLICATIONS

Copy and paste into box below or send as attachment.

RELEVANT MEASURES

List in box below or highlight in attached document.

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

Name: Kate Carroll, MPH

Role:

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

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

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

Acute pain

☐ Yes ☒ No

High flow nasal oxygen

☐ Yes ☒ No

For staff use:

ADD NEW

RESET

Please review the list of measures in the attached word document. Have you or any household members contributed towards the development of one of these measures or a competing measure (measure on the same topic)?

☐ Yes ☐ No

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

☐ Yes ☐ No

INACTIVE (Last 3 years)	Belongs to	Description including amount of value or income			
Employment	Self	None	--	+	-
	Household	None	--	+	-
Research & Consulting Roles	Self	None	--	+	-
	Household	None	--	+	-


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

Investment & Proprietary Interests	<i>Self</i>	None	--	+	-
	<i>Household</i>	None	--	+	-
Committees, Workgroups, & Advisory Roles	<i>Self</i>	None	--	+	-
	<i>Household</i>	None	--	+	-
Other Interests other affiliations, advocacy, etc.	<i>Self</i>	None	--	+	-
	<i>Household</i>	None	--	+	-

DECLARATION

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

Kate Carroll

 Digitally signed by Kate Carroll
Date: 2019.08.05 10:13:30 -04'00'

Signature

Date

RELEVANT PUBLICATIONS

Copy and paste into box below or send as attachment.

RELEVANT MEASURES

List in box below or highlight in attached document.

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

Name: Sarah Dinwiddie, RN, MSN

Role:

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

ACTIVE (Current)	Belongs to	Description including amount of value or income		
Employment	Self	American College of Physicians	\$50,001 – 100,000	+ -
	Household	Town Sports International	\$50,001 – 100,000	+ -
Research & Consulting	Self	None	--	+ -
	Household	None	--	+ -
Investment & Proprietary Interests	Self	None	--	+ -
	Household	None	--	+ -
Committees, Workgroups, & Advisory Roles	Self	Core Quality Measures Workgroup	--	+ -
	Household	None	--	+ -
Other Interests other affiliations, advocacy, etc.	Self	American Nurses Association	\$0	+ -
	Household	None	--	+ -

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

Acute pain	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
High flow nasal oxygen	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Point of care ultrasound	<input type="checkbox"/> Yes	<input type="checkbox"/> No

For staff use: ADD NEW RESET

Please review the list of measures in the attached word document. Have you or any household members contributed towards the development of one of these measures or a competing measure (measure on the same topic)?

☐ Yes ☒ No

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

☒ Yes ☐ No

INACTIVE (Last 3 years)	Belongs to	Description including amount of value or income		
Employment	Self	None	--	+ -
	Household	None	--	+ -


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

Research & Consulting Roles	<i>Self</i>	None	--	+	-
	<i>Household</i>	None	--	+	-
Investment & Proprietary Interests	<i>Self</i>	None	--	+	-
	<i>Household</i>	None	--	+	-
Committees, Workgroups, & Advisory Roles	<i>Self</i>	National Quality Forum, Interoperability Committee (member)	--	+	-
	<i>Household</i>	None	--	+	-
Other Interests other affiliations, advocacy, etc.	<i>Self</i>	None	--	+	-
	<i>Household</i>	None	--	+	-

DECLARATION

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

Sarah J. Dinwiddie

 Digitally signed by Sarah J. Dinwiddie
Date: 2019.08.14 12:08:14 -04'00'

Aug 14, 2019

Signature

Date

RELEVANT PUBLICATIONS

Copy and paste into box below or send as attachment.

https://www.nejm.org/doi/full/10.1056/NEJMp1802595?_ga=2.5533877.723990788.1564498422-638981602.1563892757

RELEVANT MEASURES

List in box below or highlight in attached document.

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

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

Role:

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

ACTIVE (Current)		Belongs to	Description including amount of value or income		
Employment	<i>Self</i>	American College of Physicians	--	+	-
	<i>Household</i>	None	--	+	-
Research & Consulting	<i>Self</i>	Editor (Evidence-based Medicine), DynaMed	\$1,001 – 5,000	+	-
	<i>Household</i>	None	--	+	-
Investment & Proprietary Interests	<i>Self</i>	None	--	+	-
	<i>Household</i>	None	--	+	-
Committees, Workgroups, & Advisory Roles	<i>Self</i>	Guidelines International Network's Board of Trustees (member)	\$0	+	-
		Measures Application Partnership Coordinating Committee (member)	\$0	+	-
		DynaMed Board of Executives (member)	\$0	+	-
		GRADE Working Group (member)	\$0	+	-
		Reporting Items for Guidelines in Health Systems (RIGHT) Working Group (member)	\$0	+	-
		PCPI Board of Directors (member)	\$0	+	-
		National Quality Forum Physician Advisory Committee (member)	\$0	+	-
		PCPI Measures Advisory Committee (chair)	\$0	+	-
		CDC ACIP Methodology Committee (member)	\$0	+	-
		Women's Preventive Services Initiative: ACOG/HRSA (Advisory Committee member)	\$0	+	-
		National Quality Forum Prevention and Population Health Committee (co-chair)	\$0	+	-
		AHRQ EPC VI Selection Group (Member)	Up to \$1,000	+	-
		National Quality Forum's Clinical & Quality Alignment Committee (Member)	\$0	+	-
		National Academy of Medicine's Overcoming Challenges in Validation and Use of Performance Measures (Member)	\$0	+	-
	<i>Household</i>	None	--	+	-
Other Interests other affiliations, advocacy, etc.	<i>Self</i>	Thomas Jefferson University (Adjunct)	\$0	+	-
		Cochrane US Network Affiliate (Director)	\$0	+	-
	<i>Household</i>	None	--	+	-

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

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

Acute pain ☐ Yes ☒ No

High flow nasal oxygen ☐ Yes ☒ No

Point of care ultrasound ☐ Yes ☒ No

For staff use:

ADD NEW

RESET

Please review the list of measures in the attached word document. Have you or any household members contributed towards the development of one of these measures or a competing measure (measure on the same topic)?

☐ Yes ☒ No

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

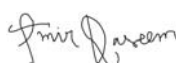
☐ Yes ☒ No

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

Employment	<i>Self</i>	None	--	+	-
	<i>Household</i>	None	--	+	-
Research & Consulting Roles	<i>Self</i>	None	--	+	-
	<i>Household</i>	None	--	+	-
Investment & Proprietary Interests	<i>Self</i>	None	--	+	-
	<i>Household</i>	None	--	+	-
Committees, Workgroups, & Advisory Roles	<i>Self</i>	National Quality Forum's Health and Well Being Standing Committee (Chair)	\$0	+	-
		National Quality Forum's Incubator Partnership and Collaboration Committee (Member)	\$0	+	-
		World Health Organization Special Advisor (Complex Health Interventions)	\$0	+	-
		CMS Next Generation Performance Measures Expert Panel (Member)	\$0	+	-
		MedBiquitous Board of Directors (Member)	\$0	+	-
	<i>Household</i>	None	--	+	-
Other Interests other affiliations, advocacy, etc.	<i>Self</i>	None	--	+	-
	<i>Household</i>	None	--	+	-

DECLARATION

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



Digitally signed by Amir Qaseem
Date: 2019.08.07 12:23:20 -04'00'

Signature

Date

RELEVANT PUBLICATIONS

Copy and paste into box below or send as attachment.

RELEVANT MEASURES

List in box below or highlight in attached document.

Name: Jeffrey Shafiroff, PhD

☐ Clinical Guidelines Committee
 ☒ ACP Staff or Leadership

☐ Performance Measurement Committee
 ☐ Guest

☐ High Value Care Committee

ACTIVE (Current)	Belongs to	Description including amount of value or income			
Employment	Self	American College of Physicians	--	+	-
	Household	None	--	+	-
Research & Consulting	Self	None	--	+	-
	Household	None	--	+	-
Investment & Proprietary Interests	Self	None	--	+	-
	Household	None	--	+	-
Committees, Workgroups, & Advisory Roles	Self	None	--	+	-
	Household	None	--	+	-
Other Interests other affiliations, advocacy, etc.	Self	None	--	+	-
	Household	None	--	+	-

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

Acute pain	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
High flow nasal oxygen	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
Point of care ultrasound	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No

For staff use: ADD NEW RESET

Please review the list of measures in the attached word document. Have you or any household members contributed towards the development of one of these measures or a competing measure (measure on the same topic)?

☐ Yes ☒ No

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

☐ Yes ☒ No

INACTIVE (Last 3 years) <i>Belongs to</i>		Description including amount of value or income			
Employment	<i>Self</i>	Kaiser Permanente Medical Group	--	+	-
	<i>Household</i>	None	--	+	-

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


Research & Consulting Roles	<i>Self</i>	None	--	+	-
	<i>Household</i>	None	--	+	-
Investment & Proprietary Interests	<i>Self</i>	None	--	+	-
	<i>Household</i>	None	--	+	-
Committees, Workgroups, & Advisory Roles	<i>Self</i>	None	--	+	-
	<i>Household</i>	None	--	+	-
Other Interests other affiliations, advocacy, etc.	<i>Self</i>	None	--	+	-
	<i>Household</i>	None	--	+	-

DECLARATION

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

Jeff Shafiroff

Signature

 Digitally signed by Jeff Shafiroff
Date: 2019.08.02 09:42:54 -04'00'

August 2, 2019

Date

RELEVANT PUBLICATIONS

Copy and paste into box below or send as attachment.

RELEVANT MEASURES

List in box below or highlight in attached document.

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

Name: Patricia Siemion, MS

Role:

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

ACTIVE (Current)

	<i>Belongs to</i>	Description including amount of value or income		
Employment	<i>Self</i>	American College of Physicians	\$50,001 – 100,000	+ -
	<i>Household</i>	International Association of Bridge, Structural, Ornamental and Reinforcing Iron Workers (Local 401)	\$50,001 – 100,000	+ -
Research & Consulting	<i>Self</i>	None	--	+ -
	<i>Household</i>	None	--	+ -
Investment & Proprietary Interests	<i>Self</i>	None	--	+ -
	<i>Household</i>	None	--	+ -
Committees, Workgroups, & Advisory Roles	<i>Self</i>	None	--	+ -
	<i>Household</i>	None	--	+ -
Other Interests other affiliations, advocacy, etc.	<i>Self</i>	None	--	+ -
	<i>Household</i>	None	--	+ -

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

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

	Acute pain	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
	High flow nasal oxygen	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
	Point of care ultrasound	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No

For staff use: ADD NEW RESET

Please review the list of measures in the attached word document. Have you or any household members contributed towards the development of one of these measures or a competing measure (measure on the same topic)?

☐ Yes ☒ No

Have you or any household members published on any of the clinical topic areas covered by these measures?

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

☐ Yes ☒ No

INACTIVE (Last 3 years)

	<i>Belongs to</i>	Description including amount of value or income		
Employment	<i>Self</i>	None	--	+ -
	<i>Household</i>	None	--	+ -


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

Research & Consulting Roles	<i>Self</i>	None	--	+	-
	<i>Household</i>	None	--	+	-
Investment & Proprietary Interests	<i>Self</i>	None	--	+	-
	<i>Household</i>	None	--	+	-
Committees, Workgroups, & Advisory Roles	<i>Self</i>	None	--	+	-
	<i>Household</i>	None	--	+	-
Other Interests other affiliations, advocacy, etc.	<i>Self</i>	None	--	+	-
	<i>Household</i>	None	--	+	-

DECLARATION

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

Trish Siemion

 Digitally signed by Trish Siemion
Date: 2019.08.02 08:26:33 -04'00'

8/2/2019

Signature

Date

RELEVANT PUBLICATIONS

Copy and paste into box below or send as attachment.

RELEVANT MEASURES

List in box below or highlight in attached document.

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

Name: Farah Sultan, MD, MS

Role:

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

ACTIVE (Current)	Belongs to	Description including amount of value or income		
Employment	Self	American College of Physicians	\$50,001 – 100,000	+ -
		Sigma Health Consulting LLC (Systematic Review on Generalized Anxiety Disorder)	\$5,001 – 10,000	+ -
	Household		--	+ -
Research & Consulting Roles	Self		--	+ -
	Household		--	+ -
Investment & Proprietary Interests	Self		--	+ -
	Household		--	+ -
Committees, Boards, & Workgroups/Panels	Self		--	+ -
	Household		--	+ -
Other Interests other affiliations, advocacy, etc.	Self		--	+ -
	Household		--	+ -

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

Acute pain

☐ Yes ☒ No

High flow nasal oxygen

☐ Yes ☒ No

Point of care ultrasound

☐ Yes ☒ No

For staff use:

ADD NEW

RESET

Please review the list of measures in the attached word document. Within the last 3 years, have you or any household members contributed towards the development of one of these measures or a competing measure (measure on the same topic)?

☐ Yes ☒ No

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

☐ Yes ☒ No

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


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

Employment	<i>Self</i>	Fox Chase Cancer Center	--	+	-
	<i>Household</i>	Peripheral Vascular Institute Of Philadelphia	\$10,001 – 50,000	+	-
		University of Pennsylvania	\$10,001 – 50,000	+	-
		Christiana Care Hospital	\$10,001 – 50,000	+	-
Research & Consulting Roles	<i>Self</i>		--	+	-
	<i>Household</i>		--	+	-
Investment & Proprietary Interests	<i>Self</i>		--	+	-
	<i>Household</i>		--	+	-
Committees, Boards, & Workgroups/Panels	<i>Self</i>		--	+	-
	<i>Household</i>		--	+	-
Other Interests other affiliations, advocacy, etc.	<i>Self</i>		--	+	-
	<i>Household</i>		--	+	-

DECLARATION

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

Farah Sultan

 Digitally signed by Farah Sultan
Date: 2019.08.05 12:24:29 -04'00'

08/05/2019

Signature

Date

RELEVANT PUBLICATIONS

Copy and paste into box below or send as attachment.

RELEVANT MEASURES

List in box below or highlight in attached document.

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

Name: Itziar Etxeandia Ikobaltzeta

Role:

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

ACTIVE (Current)	Belongs to	Description including amount of value or income		
Employment	Self	Self-employed	\$50,001 – 100,000	+ -
	Household		--	+ -
Research & Consulting Roles	Self	Consultant contracts for CPG developmetn projects with MacGRADE Center, McMaster University	\$50,001 – 100,000	+ -
	Household		--	+ -
Investment & Proprietary Interests	Self		--	+ -
	Household		--	+ -
Committees, Boards, & Workgroups/Panels	Self	Participated in work groups related to CPG development projects, as part of consultancy work	\$1,001 – 5,000	+ -
	Household		--	+ -
Other Interests other affiliations, advocacy, etc.	Self		--	+ -
	Household		--	+ -

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

Acute pain	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
High flow nasal oxygen	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
Point of care ultrasound	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No

For staff use: ADD NEW RESET

INACTIVE (Last 3 years)	Belongs to	Description including amount of value or income		
Employment	Self		--	+ -
	Household		--	+ -
Research & Consulting Roles	Self	Travel grant to participate in GRADE working froup meetings in Rome (2017)	\$1,001 – 5,000	+ -
		Teaching workshops in the Basque office of occupational health - Osalan	\$1,001 – 5,000	+ -
	Household		--	+ -
Investment & Proprietary Interests	Self		--	+ -
	Household		--	+ -

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

Committees, Boards, & Workgroups/Panels	<i>Self</i>		--	+	-
	<i>Household</i>		--	+	-
Other Interests other affiliations, advocacy, etc.	<i>Self</i>		--	+	-
	<i>Household</i>		--	+	-

DECLARATION

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



2019.08.01 20:09:13 +02'00'

Signature

Date

RELEVANT PUBLICATIONS

Copy and paste into box below or send as attachment.

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

Name: Francesco Nonino

Role:

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

ACTIVE (Current)	Belongs to	Description including amount of value or income			
Employment	Self	Italian National Health Service (Local Health Care Trust of Bologna)	\$100,001 or more	+	-
	Household		--	+	-
Research & Consulting Roles	Self		--	+	-
	Household		--	+	-
Investment & Proprietary Interests	Self		--	+	-
	Household		--	+	-
Committees, Boards, & Workgroups/Panels	Self	Member of the Technical Team of the Regional Drug and Therapeutic Committee (Emilia-Romagna Region)	\$0	+	-
		Director, WHO Collaborating Centre in Evidence-Based Research Synthesis and Guideline Development	\$0	+	-
		Director, Unit of Epidemiology and Biostatistics Institute of Neurological Science, IRCCS, Bologna	\$0	+	-
	Household		--	+	-
Other Interests other affiliations, advocacy, etc.	Self		--	+	-
	Household		--	+	-

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

Acute pain	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
High flow nasal oxygen	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
Point of care ultrasound	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No

For staff use: ADD NEW RESET

Please review the list of measures in the attached word document. Within the last 3 years, have you or any household members contributed towards the development of one of these measures or a competing measure (measure on the same topic)?

☐ Yes ☒ No

Within the last 3 years, have you or any household members published on any of the clinical topic areas covered by these measures?

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

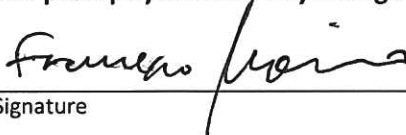
☐ Yes ☒ No

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

Employment	<i>Self</i>	Italian National Health Service (Local Health Care Trust of Modena)	\$50,001 – 100,000	+	-
	<i>Household</i>		--	+	-
Research & Consulting Roles	<i>Self</i>	Montecatone Rehabilitation Institute (Private Hospital); Role: consultant as methodologist of the Drug and Therapeutic Board. Topic area: hospital drug formulary, guideline implementation on appropriate use of drugs	\$1,001 – 5,000	+	-
		Member of AVEN Ethical Committee (North Emilia-Romagna Region); Role: neurologist	\$1,001 – 5,000	+	-
	<i>Household</i>		--	+	-
Investment & Proprietary Interests	<i>Self</i>		--	+	-
	<i>Household</i>		--	+	-
Committees, Boards, & Workgroups/Panels	<i>Self</i>	Member of the Technical Team of the Regional Drug and Therapeutic Committee (Emilia-Romagna Region)	\$0	+	-
		Director, WHO Collaborating Centre in Evidence-Based Research Synthesis and Guideline Development	\$0	+	-
	<i>Household</i>		--	+	-
Other Interests other affiliations, advocacy, etc.	<i>Self</i>		--	+	-
	<i>Household</i>		--	+	-

DECLARATION

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


Signature

Aug 5, 2019

Date

RELEVANT PUBLICATIONS

Copy and paste into box below or send as attachment.

RELEVANT MEASURES

List in box below or highlight in attached document.

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

Name: Jennifer Marie Yost, PhD, RN

Role:

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

ACTIVE (Current)	Belongs to	Description including amount of value or income		
Employment	Self	Villanova University	\$50,001 – 100,000	+ -
	Household		--	+ -
Research & Consulting Roles	Self	Canadian Institutes for Health Research; Co-Principal Investigator; Transition Interventions for Adults undergoing Cardiac and Vascular Surgery	\$0	+ -
	Household		--	+ -
Investment & Proprietary Interests	Self		--	+ -
	Household		--	+ -
Committees, Boards, & Workgroups/Panels	Self		--	+ -
	Household		--	+ -
Other Interests other affiliations, advocacy, etc.	Self	Sigma Theta Tau International; President-Elect, Alpha Nu Chapter; Nursing Scholarship	\$0	+ -
		Evidence Synthesis International; Secretariat Member; Production and Use of Systematic Reviews (Note: Salary support to Villanova provided by Western Norway University of Applied Sciences; no additional income received)	\$0	+ -
		Evidence-Based Research Network; Steering Committee Member; Evidence-Based Research/ Research Redundancy	\$0	+ -
		Centre for Evidence-Based Implementation, Hamilton Health Sciences Centre; Advisory Committee Member; Implementation Science in Healthcare	\$0	+ -
	Household		--	+ -

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

Acute pain ☐ Yes ☒ No
 High flow nasal oxygen ☐ Yes ☒ No
 Point of care ultrasound ☐ Yes ☒ No

For staff use: ADD NEW RESET

Please review the list of measures in the attached word document. Within the last 3 years, have you or any household members contributed towards the development of one of these measures or a competing measure (measure on the same topic)?

☐ Yes ☒ No

Within the last 3 years, have you or any household members published on any of the clinical topic areas covered by these measures?

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

☐ Yes ☒ No

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

Employment	<i>Self</i>	McMaster University	\$50,001 – 100,000	+	-
	<i>Household</i>		--	+	-
Research & Consulting Roles	<i>Self</i>	Canadian Institutes for Health Research; Co-Principal Investigator; Patient Engagement in Research	\$0	+	-
		Canadian Institutes for Health Research; Co-Principal Investigator; Transition Interventions for Adults undergoing Cardiac and Vascular Surgery	\$0	+	-
		Population Health Research Institute, McMaster University; Co-Principal Investigator; Patient Engagement in Reserach	\$0	+	-
		School of Nursing, McMaster University; Co-Investigator; Knowledge User Engagement in Research	\$0	+	-
		Canadian Institutes for Health Research; Co-Principal Investigator; Knowledge Translation in Cancer Prevention	\$0	+	-
		Grand Challenges Canada; Co-Investigator; Maternal-Child Health Outcomes in Haiti	\$0	+	-
		University of Bologna; Taught course in the Master of EBP and Methodology of Clinical and Therapeutic Research Program; Systematic Review Methods	\$5,001 – 10,000	+	-
	<i>Household</i>		--	+	-
Investment & Proprietary Interests	<i>Self</i>		--	+	-
	<i>Household</i>		--	+	-
Committees, Boards, & Workgroups/Panels	<i>Self</i>		--	+	-
	<i>Household</i>		--	+	-
Other Interests other affiliations, advocacy, etc.	<i>Self</i>	Cochrane; Author; Effective Practice and Organisation of Care	\$0	+	-
		Australian Clinical Trials Network; Presenter; Evidence-Based Research/Research Redundancy	\$0	+	-
		National Health and Medical Research Council; Presenter; Evidence-Based Research/Research Redundancy	\$0	+	-
		Helene Fuld Health Trust National Summit; Presenter; Evidence-Based Practice in Nursing	\$0	+	-
		Global Evidence Summit; Presenter; Evidence-Based Research/Research Redundancy	\$0	+	-


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

		The Ontario Public Health Association; Presenter; Evidence-Informed Decision Making in Public Health	\$0	+	-
	<i>Household</i>		--	+	-

DECLARATION

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

Jennifer Yost

 Digitally signed by Jennifer Yost
Date: 2019.08.06 16:01:54 -04'00'

6 Aug 2019

Signature

Date

RELEVANT PUBLICATIONS

Copy and paste into box below or send as attachment.

RELEVANT MEASURES

List in box below or highlight in attached document.