Name: <u>Eileen Barrett, MD, M</u> Role: Clinical Guidelines Commit X Performance Measuremer	itee	ACP Staff or Leadership Guest	
High Value Care Committe	е		
ACTIVE (Current)	Belongs to	Description including amount of value or	income†
Facility and the second	Self	University of New Mexico	>100,000
Employment	Household	University of New Mexico	>100,000
Research & Consulting	Self	American Medical Association	<\$5000
Support	Household	None	
Investment & Proprietary	Self	None	
Interests	Household	None	
Committees, Workgroups,	Self	None	\$0
& Advisory Roles	Household	None	
Other Interests	Self	Society of Hospital Medicine (committee member)	\$0
Other interests	Household	Greater Albuquerque Medical Association (board member)	\$0
		New Mexico Health Resources (board member)	\$0
		Thai Burmese Border Health Initiative (board member)	\$0
Please review the list of me	asures in the	attached word document. In the last 3 year	rs, have you or
any household members co competing measure (measure		vards the development of one of these mea	isures or a
competing measure (measure	re on the san	Yes x	No
covered by these measures	?	chold members published on any of the clir	
Please include both peer-rev	newed and no	n-peer-reviewed sources (e.g. newspaper o Yes x	p-ea; blog) No
†To report amount of value o	rincome was the	oso rangos:	<u></u>

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

a) \$0 d) \$10,001 to 50,000 b) ≤\$5,000 e) \$50,001 to 100,000 c) \$5,001 to 10,000 f) ≥\$100,001

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

INACTIVE (Last 3 years)	IACTIVE (Last 3 years) Belongs to Description including amount of value or income†			
	Self	Indian Health Services, Partners in Health		
Employment	Household	Rehoboth McKinley Christian Healthcare, Genesis Home Care, Syrian American Medical Society	>100,000	
Research & Consulting Support	Self	American Medical Association speakers bureau	\$5000-10,000	
	Household	None		
Investment & Proprietary Interests	Self	None		
	Household	None		
Committees, Workgroups, & Advisory Roles	Calf	Accreditation Council for Graduate Medical Education	\$0	
	Self	CMS Quality Measure Development plan technical expert panel (member)	\$0	
	Household	None	\$0	
Other Interests	Self	None		
Other Interests	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.

Eileen Barrett	3/22/19
----------------	---------

Signature Date

RELEVANT PUBLICATIONS

Copy and paste below or send as attachment.

RELEVANT MEASURES

List previous involvement below or highlight in attached document.

†To report amount of value or income, use these ranges: a) \$0 d) \$10,001 to 50,000 b) ≤\$5,000

e) \$50,001 to 100,000

c) \$5,001 to 10,000 f) ≥\$100,001

Name: Peter Basch, MD, MACP

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

ACTIVE (Current)	Belongs to	Description including amount of value or	income†
	Self	MedStar Health	
Employment	Household	Self	
		Investigator for ONC-LEAP grant – looking at feasibility and usability of a FHIR app cardiac risk calculator for EHRs (grant money paid to employer)	\$1000-5000
		Investigator for District of Columbia Dept. of Health grant funding to improve HTN control in District of Columbia (grant money paid to employer)	\$1000-5000
Research & Consulting Support	Self	Consultant to MedStar Human Factors Group on creating visibility within the EHR of Patient Reported Outcome Measures	\$0
		Consultation to a variety of funded research project on HCV screening, connecting HCV patients with appropriate care. My role is helping to re-tool the EHR to provide infrastructure and guidance	\$0
	Household	None	
Investment & Proprietary	Self	None	
Interests	Household	None	<u> </u>
Committees, Workgroups,	Self	Digital Record Locator Service Workgroup – sponsored by ONC and MITRE Corporation	\$0-
& Advisory Roles	Household	None	
Other Interests	Self	Panels, comment letters on health IT proposed regulations on the subjects of electronic health records, health IT, burden reduction, and related matters	\$0

 $\ensuremath{^{\dagger}}\xspace$ 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 5000
- g) ≥\$100,001
- d) \$5,001 to 10,000

Household	None	AND NO.

Please review the list of measures in the attached word document. In 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	X	No

In 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)

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†
	Self	None	
Employment	Household	None	
tte er en unter til er er er en under en under en unter en	gge mag viskgeners viskungs at til bel 17. We sit att at 27. de Silva viskund att et 18 de si	Brookings Institution – health IT policy work with Mark McClellan	\$10,001 to 50,000
Research & Consulting Support		DC Department of Health: blood pressure control/Million hearts work – paid directly to employer, MedStar	\$10,001 to 50,000
	Self	Subcontractor for work with Centers for Disease Control and Prevention on improving immunization capabilities within electronic health records and a voluntary certification program to highlight such capabilities	\$1,001 to 5000
	Household	Future of Privacy Foundation	\$50,001 to 100,000
Investment & Proprietary	Self	None	
Interests	Household	None	
Committees, Workgroups,	Self	None	
& Advisory Roles	Household	None	
PET SECTION OF THE CASE OF THE SECTION OF THE CASE OF	Self	None	
Other Interests	Household	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 5000 g) ≥\$100,001

d) \$5,001 to 10,000

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

)ate

RELEVANT PUBLICATIONS

Copy and paste below or send as attachment.

RELEVANT MEASURES

List previous involvement below or highlight in attached document.

†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 5000

g) ≥\$100,001

d) \$5,001 to 10,000

Name: Robert M. Centor, N	ЛD, MACP				
Role:		☐ ACP Staff or Leadership			
Performance Measuremer		e 📋 Guest			
	e				
ACTIVE (Current)	Belongs to	Description including amount of value or income	1		
Employment	Self	Birmingham VA Hospital	\$50,001 – 100,000	+	-
Employment	Household	Valley Foundation	\$0	+	-
- 100 til	Colf	Medscape (contributor)	Up to \$1,000	+	-
Research & Consulting Roles	Self	Dynamed Plus (reviewer)	Up to \$1,000	+	-
Roles	Household	None		+	-
Investment & Proprietary	Self	None		+	-
Interests	Household	None		+	-
	C. If	MDCalc Advisory Board (member)	\$0	+	-
Committees, Boards, & Workgroups/Panels	Self	The Curbsiders Podcast (contributor)	\$0	+	-
workgroups/Paneis	Household	None		+	-
Other Interests	Self	None		+	-
other affiliations, advocacy, etc.	Household	None		+	-
					_
		usehold members published on any of the followir non-peer-reviewed sources (e.g. newspaper op-ed			
n/a - no clinical to	pic areas or	n upcoming agenda □Yes □ No			
		For staff use: AD	DD NEW RESET	Γ	
		he attached word document. Within the last 3 yea			
(measure on the same topi		ards the development of one of these measures or	a competing measul	re	
☐Yes ☐ No					
	ve vou or an	y household members published on any of the clin	nical tonic areas cove	red	
by these measures?	c you or an	y nousehold members published on any of the em	ilear topic areas cove	·cu	
Please include both peer-re	viewed and	non-peer-reviewed sources (e.g. newspaper op-ed	; blog)		
□Yes □ No					
INACTIVE (Last 3 years)	Belongs to	Description including amount of value or income	<u> </u>		

University of Alabama at Birmingham

Self

Household

None

Employment

	Provided expert opinion for malpractice case related to sore throats		+	-
Self	Diatherix, gave speech related to sore throats		+	-
Scij	Diatherix, designing a clinical study of their new product for diagnosing bacterial infection in sore throats		+	-
Household	None		+	-
Self	None		+	-
Household	None		+	-
Self	None		+	-
Household	None		+	-
Self	None		+	-
Household	None		+	-
	Self Household Self Household Self	Self Diatherix, gave speech related to sore throats Diatherix, designing a clinical study of their new product for diagnosing bacterial infection in sore throats Household None Self None Household None Self None Household None Self None None None None None None	to sore throats Diatherix, gave speech related to sore throats Diatherix, designing a clinical study of their new product for diagnosing bacterial infection in sore throats Household None Self None Household None Self None Household None Self None Self None Self None Self None Self None Self None Self None	to sore throats Diatherix, gave speech related to sore throats Diatherix, designing a clinical study of their new product for diagnosing bacterial infection in sore throats Household None Self None Household None Self None Household None Self None + Self None

DECLARATION

I certify that to my knowledge and belief that I have disclosed my financial and non-financial interests above and I

will promptly disclose any cha	anges.		
Robert Centor	Digitally signed by Robert Centor Date: 2019.03.22 14:08:54 -05'00'	Mar 22, 2019	
Signature		Date	
RELEVANT PUBLICATIONS	5		
Copy and paste into box below	w or send as attachment.		
RELEVANT MEASURES			
List in box below or highlight	in attached document.		

Name: J. Thomas Cross, MI	O, MPH, FAC	CP			
Role:					
Clinical Guidelines Commi	ttoo	□ ACD Staff or Loadorship			
		☐ ACP Staff or Leadership			
Performance Measuremen		e 🔲 Guest			
High Value Care Committe	ee				
ACTIVE (Current)	Relonas to	Description including amount of value or income	<u>.</u>		
Active (Carrent)	Self	A-Cross Medicine Reviews	\$100,001 or more	+	_
	,	St. Mary's High School, Colorado Springs	\$10,001 – 50,000	+	_
		Clark County Public Schools, Las Vegas	\$10,001 – 50,000	+	_
Employment	Household	Wonderland Development Center	\$50,001 – 100,000	+	_
		BNY Mellon	\$100,001 or more	+	_
		Seattle Children's Hospital	\$50,001 – 100,000	+	_
Research & Consulting	Self	None		+	_
Roles	Household	Seattle Children's Hospital TB research	\$50,001 – 100,000	+	_
Investment & Proprietary	Self	Trademark: "Triple F CME: Focused, Fast, Fun"	Up to \$1,000	+	_
		Copyrighted: A-Cross Medicine Reviews PowerPoints	Up to \$1,000	+	_
Interests	Household	None		+	_
		American Academy of Pediatrics, Med-Peds Section		•	
Committees, Boards, &	Self	(member)	\$0	+	-
Workgroups/Panels	Household	None		+	-
Other Interests	Self	None		+	-
other affiliations, advocacy, etc.	Household	None		+	-
			<u>-</u> !		
Please review the list of m	easures in t	he attached word document. Within the last 3 yea	rs, have you or any		
		ards the development of one of these measures or	a competing measur	e	
(different measure on the	same topic)	?			
□Yes ⊠ No					
	ve you or an	ry household members published on any of the cli	nical topic areas cove	red	
by these measures? Please include both neer-re	viewed and	non-peer-reviewed sources (e.g. newspaper op-ec	· hlog)		
☐Yes ⊠ No	.viewea ana	Their peer reviewed sources (e.g. newspaper op ee	, 5105/		

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

Employment	Self	CenseoHealth	\$50,001 – 100,000	+	_
	Household	St. Louis Department of Admissions (dependent)	\$1,001 – 5,000	+	-
Research & Consulting	Self	None		+	-
Roles	Household	None		+	-

Investment & Proprietary	Self	None	 +	_
Interests	Household	None	 +	-
Committees, Boards, &	Self	None	 +	_
Workgroups/Panels	Household	None	 +	_
Other Interests	Self	None	 +	-
other affiliations, advocacy, etc.	Household	None	 +	-

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.

J. Thomas Cross, Jr.

Digitally signed by J. Thomas Cross, Jr. Date: 2019.03.23 19:49:12 -06'00'

Mar 23, 2019

Signature Date

RELEVANT MEASURES

List in box below or highlight in attached document.

2015 or later

RELEVANT PUBLICATIONS

Copy and paste into box below or send as attachment.

2015 or later

Name: Andrew Dunn, MD,	FACP, SFHM	1			
Role: Clinical Guidelines Commi	ttee	☐ ACP Staff or Leadership			
□ Performance Measurement □ Performance Measurement	nt Committee	e ☐ Guest			
☐ High Value Care Committe	ee				
ACTIVE (Current)	Belonas to	Description including amount of value or income	a		
	Self	Mount Sinai School of Medicine		14	
Employment	Household	Mount Sinai Hospital		+	
Research & Consulting Roles	Self	Grant administered by The Joint Commission (funded by Pfizer): Transitions of Care for Venous Thromboembolism	\$100,001 or more	+	
	Household	None	The state of the s	+	7 T
Investment & Proprietary	Self	None		+	
Interests	Household	None	emploration are communicated than the supplication of the supplica	+	
Committees, Boards, & Workgroups/Panels	Self	Advisory Board for ACP's Center for Quality Initiative (chair), ACP Quality Connect: Atrial Fibrillation. Funded by Bristol-Myers Squibb		+	_
Workgroups/Panels	Household	None	and distinct the state of the s	+	
Other Interests	Self	None		+	
other affiliations, advocacy, etc.	Household	None		4	
household members contr (different measure on the s ☐Yes ⊠ No	ibuted towa same topic)	he attached word document. Within the last 3 yea ords the development of one of these measures or ? y household members published on any of the cli	a competing measu		
Please include both peer-re ☐Yes ☑ No		non-peer-reviewed sources (e.g. newspaper op-ed			
	Self	Description including amount of value or income			-9.67
Employment	Household	None		f	
	, .ouschold	TOTAL		1	-

**************************************		Cardinal Health E3 Foundation	\$50,001 – 100,000	1+	
	Self	Desai Pharmaceuticals	\$10,001 - 50,000	4	
Research & Consulting Roles		Medline Foundation	\$50,001 - 100,000	+	
		Speaker's bureau: Creative Educational Concepts, Inc. (CECI), an accredited medical, pharmacy, and nursing medical educational company: Preventing avoidable readmissions: strategies to optimize ACS transitions of care (supported by Astra-Zeneca)	\$1,001 – 5,000	#	
	Household	None		+	
Investment & Proprietary	Self	None	m-r	1	
Interests	Household	None			78.50 5.90
		Society for Hospital Medicine, Hospital Quality and Patient Safety Committee (member)		4 0	-
Committees, Boards, & Workgroups/Panels	Self	Lewin Group/Mathematica Measure Development Expert Workgroup on the overutilization of imaging for uncomplicated headache measure (member)		+	
	Household	None		+	
Other Interests	Self	None		+	
other affiliations, advocacy, etc.	Household	None		+	-

DECLARATION I certify that to my knowledge and belief that I have disclosed	my financial and non-financial interests above and
will promptly disclose any changes.	41.19.
Signature	Date
RELEVANT MEASURES	
List in box below or highlight in attached document.	
RELEVANT PUBLICATIONS	
Copy and paste into box below or send as attachment.	

Name: Nick Fitterman MD,	FACP, SFHN	1					
Role: ☑ Clinical Guidelines Commit ☑ Performance Measuremen ☐ High Value Care Committee	nt Committee	☐ ACP Staff or Leadership □ Guest					
ACTIVE (Current)	Belongs to	Description including amount	of value or incom	e			
Fundament	Self	Northwell Health				+	-
Employment	Household	Mount Sinai Health System				+	-
Research & Consulting	Self	None				+	-
Roles	Household	None				+	-
Investment & Proprietary	Self	None				+	-
Interests	Household	None				+	-
Committees, Boards, &	Self	none				+	-
Workgroups/Panels	Household	None				+	-
Other Interests	Self	ACP PAC donation				+	-
other affiliations, advocacy, etc.	Household	None				+	-
	eviewed and	usehold members published or non-peer-reviewed sources (e. Acute pain Yes Invasive ventilation Yes It of care ultrasound Yes	g. newspaper op-ed No No		as?		
			For staff use: A	DD NEW	RESET		
	ributed tow	he attached word document. Wards the development of one o	· · · · · · · · · · · · · · · · · · ·		•	e	
	ve vou or an	y household members publish	ed on any of the cl	inical topic a	reas cove	red	
by these measures?		non-peer-reviewed sources (e.					
□Yes ⊠ No							
INACTIVE (Last 3 years)	Belongs to	Description including amount	of value or incom	e			

Self

Household

Employment

None

None

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

RELEVANT PUBLICATIONS

RELEVANT MEASURES

Copy and paste into box below or send as attachment.

List in box below or highlight in attached document.

Name: Catherine MacLean	, MD, PhD, F	ACP			
Role:					
Clinical Guidelines Commi	ttee	ACP Staff or Leadership			
Performance Measuremen	nt Committee	□ Guest			
High Value Care Committe	e				
ACTIVE (Current)	Belongs to	Description including amount of value or income			
Employment	Self	Hospital for Special Surgery	98 (1995)	+	-
Linployment	Household	MacLean Orthodontics		+	-
Research & Consulting	Self	None		+	-
Roles	Household	None		+	-
Investment & Proprietary	Self	None		+	-
Interests	Household	None		+	-
Committees, Boards, &	Self	None		+	-
Workgroups/Panels	Household	None		+	-
Other Interests	Self	None		+	-
other affiliations, advocacy, etc.	Household	None		+	-
(different measure on the ☐ Yes ☐ No					
by these measures?		y household members published on any of the clir non-peer-reviewed sources (e.g. newspaper op-ed		eo	4.
INACTIVE (Last 3 years)	Belongs to	Description including amount of value or income		<u>Agontife relative</u>	general and
Employment	Self	None		+	-
Linployment	Household	None		+	-
Research & Consulting	Self	None		+	-
Roles	Household	None		+	-
Investment & Proprietary	Self	None		+	_
Interests	Jen	None		+	_
	Household	None		+	-
Committees, Boards, &	Self	Health Care Payment Learning and Action Network: Clinical Episode Payment Group (member)	\$0	+	-
orkgroups/Panels	Household	None	***	+	-

Other Interests	Self	None		+	-
other affiliations, advocacy, etc.	Household	None	H- 1	+	-
DECLARATION					
		lief that I have disclosed my finar	ncial and non-financial interests ab	ove an	d I
will promptly disclose any	changes.		-1 · 1		
will promptly disclose any	changes.	•	5/2/2019		
will promptly disclose any Signature	changes.		5/2/2019 Date		
Muc	changes.		5/2/2019 Date		

RELEVANT PUBLICATIONS

Copy and paste into box below or send as attachment.

c) \$1,001 to 5000

d) \$5,001 to 10,000

g) ≥\$100,001

Name: <u>Danny Allen Newman</u>	<u>, MD, FACP</u>		
Role: Clinical Guidelines Commi X Performance Measuremer Hlgh Value Care Committe	nt Committee	ACP Staff or Leadership Guest	
ACTIVE (Current)	Belongs to	Description including amount of value or	incomet
Employment	Self	University Health Care System	
	Household	None	
Research & Consulting Support	<i>Self</i>	Do consulting for MDVIP training new doctors who begin a concierge practice.	\$1,001 to 5000
	Household	None	
Investment & Proprietary	Self	None	
Interests	Household	None	
Committees, Workgroups,	Self	None	
& Advisory Roles	Household	None	
Other Interests	Self	None	"
	Household	None	
Please review the list of meany household members co- competing measure (measu	ntributed towa	attached word document. In the last 3 year ards the development of one of these mea e topic)? Yes	s, have you or sures or a
covered by these measures? Please include both peer-revi	ewed and non	pold members published on any of the clinit-peer-reviewed sources (e.g. newspaper op Yes V ferences into space provided below or your	-ed; blog) No
as a separate attachment.			nay senu
†To report amount of value or in			
a) \$0 b) Up to \$1000		to 50,000 to 100,000	

INACTIVE (Last 3 years)	Belongs to	Description including amount of value or income?		
Employment	Self	None		
Employment 	Household	None		
Research & Consulting Support	Self	Received honoraria to speak on behalf of ACP to a state chapter	<\$1000	
	Household	None		
Investment & Proprietary	Self	Was an investor in a joint venture hospital, Trinity Hospital of Augusta. Venture was Ilquidated in 2016.	\$10,001 to 50,000	
	Household	None		
Committees, Workgroups,	Self	None		
& Advisory Roles	Household	None		
Other Interests	Self	None		
Orner inferests	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

3/3/119

Date

RELEVANT PUBLICATIONS

Copy and paste below or send as attachment.

RELEVANT MEASURES

List previous involvement below or highlight in attached document.

†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 5000
- g) ≥\$100,001
- d) \$5,001 to 10,000

Name: Matthew E. Nielsen, MD, MS	
Role:	
☐ Clinical Guidelines Committee	ACP Staff or Leadership
□ Performance Measurement Committee	☐ Guest
☐ High Value Care Committee	

Employment	Self	University of North Carolina School of Medicine	\$100,001 or more	+	-	
Employment	Household	None		+	-	***************************************
Research & Consulting Roles	Self	National Cancer Institute: Enhancing Survivorship Care Planning for Patients with Localized Prostate Cancer Using a Couple-focused Web-based Tailored Symptom Self-management Program	\$100,001 or more	+		**
		Patient-Centered Outcomes Research Institute: Implementation and Dissemination of Novel Approaches to Hematuria Evaluation	\$100,001 or more	+	-	
		National Institute of Nursing Research: Efficacy of a Couple-focused, Tailored, Symptom Self-management mHealth Intervention for Prostate Cancer and Their Partners	\$100,001 or more	+		
	Household	None		+	-	***************************************
Investment & Proprietary	Self	Stock in Grand Rounds	\$1,001 - 5,000	+	-	-
Interests	Household	None		+	-	ì
	Self	American Urological Association: Quality Improvement and Patient Safety (QIPS) Committee	\$0	+	-	
		Physicians' Consortium for Performance Improvement: Representative from the Council for Medical Specialty Societies	\$0	+	-	
Committees, Boards, & Workgroups/Panels		National Cancer Institute, Surveillance, Epidemiology and End Results (SEER) Registry Bladder Cancer Workgroup	\$0	+	-	
		International Society of Geriatric Oncology (SIOG) Task Force on the Treatment of Bladder Cancer in Older Adults: Writing committee member	\$0	+	-	4
	Household	None		+	-	-
Other Interests	Self	None		+	-	-
other affiliations, advocacy, etc.	Household	None		+	-	

Please review the list of r	neasures in the attached word document. Within the last 3 years, have you or any
	ributed towards the development of one of these measures or a competing measure
(different measure on the	same topic)?
□Yes ⊠ No	

☐Yes ⊠ No				
INACTIVE (Last 3 years)) Belongs to	Description including amount of value or income	:	
Employment	Self	None		+
Employment	Household	None		+
Research & Consulting	Self	Bladder Cancer Advocacy Network (scientific advisory board)	\$0	+
Roles	Household	None		+
nvestment & Proprietary	Self	None		+
nterests	Household	None		+
Committees, Boards, &	Self	None		+
Norkgroups/Panels	Household	None		+
Other Interests	Self	None		+
ther affiliations, advocacy, etc.	Household	None		-1.
DECLARATION		lief that I have disclosed my financial and non-fina		ts above an
DECLARATION certify that to my knowle	dge and bel	lief that I have disclosed my financial and non-fina	ncial interes	
DECLARATION certify that to my knowle will promptly disclose any	dge and bel	lief that I have disclosed my financial and non-final	ncial interes	
DECLARATION certify that to my knowle will promptly disclose any	dge and bel	lief that I have disclosed my financial and non-fina	ncial interes	
DECLARATION certify that to my knowle will promptly disclose any Gignature	dge and bel	lief that I have disclosed my financial and non-final	ncial interes	
DECLARATION certify that to my knowle will promptly disclose any disc	dge and bel changes.	lief that I have disclosed my financial and non-final 24 March 20 Date	ncial interes	
DECLARATION certify that to my knowle will promptly disclose any disc	dge and bel changes.	lief that I have disclosed my financial and non-final 24 March 20 Date	ncial interes	
DECLARATION certify that to my knowle will promptly disclose any disc	dge and bel changes.	lief that I have disclosed my financial and non-final 24 March 20 Date	ncial interes	
DECLARATION	dge and bel changes.	lief that I have disclosed my financial and non-final 24 March 20 Date ed document.	ncial interes	

Name: Sameer D. Saini, MI	D, MS				
Role:					
Clinical Guidelines Commi	ttee	☐ ACP Staff or Leadership			
□ Performance Measurement □ Performance Measurement					
☐ High Value Care Committe					
ACTIVE (Current)	Belongs to	Description including amount of value or income)		
Employment	Self	VA Ann Arbor Healthcare System and University of Michigan	\$100,001 or more	+	-
Limpioyment	Household	VA Ann Arbor Healthcare system and University of Michigan	\$100,001 or more	+	-
		Department of Veterans Affairs: Colorectal Cancer Prevention	\$100,001 or more	+	-
Research & Consulting Roles	Self	Department of Veterans Affairs; Performance Measure Development	\$100,001 or more	+	-
		American Journal of Gastroenterology: Co-editor, Red Section	\$5,001 – 10,000	+	-
	Household	None		+	-
Investment & Proprietary	Self	None		+	-
Interests	Household	None		+	-
Committees, Boards, & Workgroups/Panels	Self	American College of Gastroenterology: Research Committee (member)	\$0	+	-
workgroups/ Panels	Household	None		+	-
Other Interests	Self	None		+	-
other affiliations, advocacy, etc.	Household	None		+	-
	ibuted towa	he attached word document. Within the last 3 yea ards the development of one of these measures or ?		re	
by these measures?		ny household members published on any of the cling non-peer-reviewed sources (e.g. newspaper op-ed		ered	
INACTIVE (Last 3 years)	Belongs to	Description including amount of value or income			

Self

Employment

None

Household None

Research & Consulting	Self	FMS, Inc.: Technical consultant on simulation model development	\$10,001 - 50,000	+	-
Roles	Household	None		+	-
Investment & Proprietary	Self	None		+	-
Interests	Household	None		+	-
Committees, Boards, & Workgroups/Panels	Self	American Gastroenterological Association: Quality Measures Committee, Colorectal Cancer Measures Workgroup (lead)	\$0	+	-
0 17	Household	None		+	-
Other Interests other affiliations, advocacy, etc.	Self	National Quality Forum Innovation Award	\$1,001 – 5,000	+	-
	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.

Sameer Saini, MD	Digitally signed by Sameer Saini, MD Date: 2019.04.04 10:19:08 -04'00'	4/4/2019
Signature		Date

RELEVANT MEASURES

l	ist in box below or highlight in attached document.

RELEVANT PUBLICATIONS

copy and paste into box below or send as attachment.	

Name: Paul Shekelle, MD,	MPH, PhD, F	FACP			
Role: ☐ Clinical Guidelines Commi ☐ Performance Measureme ☐ High Value Care Committee	nt Committee	☐ ACP Staff or Leadership □ Guest			
ACTIVE (Current)	Belongs to	Description including amount of value or income	e		
Employment	Self	Veterans Affairs; UCLA		+	-
Employment	Household	None		+	-
Research & Consulting Roles	Self	Veterans Affairs: Evidence Synthesis Program: Topics include: Evidence Maps for Complementary and Alternative Medicine Systematic reviews for: Chronic Limb Ischemia - 2018 Spread to Low Performers - 2018 Robotic surgery - 2018 Art therapy - 2018 One-to-one monitoring - 2019 Panel size - 2019	\$100,001 or more	+	-
		AHRQ: Understanding Health Care Delivery Systems PCOR Adoption and System Performance	\$100,001 or more	+	-
	Household	None		+	-
Investment & Proprietary	Self	Royalties: UpToDate chapter on Spinal Manipulation Clinical Practice Guidelines	Up to \$1,000	+	-
Interests	Household	None		+	-
Committees, Boards, &	Self	Committee on Evidence-Based Practices for Public Health Emergency Preparedness and Response	\$0	+	-
Workgroups/Panels	Household	None		+	-
Other Interests	Self	None		+	-
other affiliations, advocacy, etc.	Household	None		+	-
household members contr (different measure on the ☐Yes ☑ No	ibuted towa same topic)	he attached word document. Within the last 3 yeards the development of one of these measures or? The property of the clips of the clip	r a competing measu	ure	1
by these measures?					

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

☐Yes
☐ No

Employment	Self	None		+	-
	Household	None		+	-
		AHRQ: Patient Safety Practices in Ambulatory Care Settings	\$100,001 or more	+	-
		AHRQ (subcontract with Cedars): When is Quality Improvement Cost Saving, Cost Effective, or Not a Good Value?	\$100,001 or more	+	-
		AHRQ: Diagnosis and Management of Gout	\$100,001 or more	+	-
		CMS: Analyses Related to the 2015 National Impact Assessment of Medicare Quality Measures	\$100,001 or more	+	-
Research & Consulting	Self	AHRQ: Effects of Omega-3 Fatty Acids on Child and Maternal Health	\$100,001 or more	+	-
Roles		AHRQ (subcontract with USC): Partnership for Research & Dissemination of Evidence-Based Medicine in Autism	\$100,001 or more	+	_
		ACP Low Bone Density update	\$10,001 – 50,000	+	-
		AHRQ: Treatment of Primary and Secondary Osteoarthritis of the Knee	\$100,001 or more	+	-
		ECRI Institute: Consulting, National Guidelines Clearinghouse	\$1,001 – 5,000	+	-
	Household	None		+	-
Investment & Proprietary	Self	None		+	-
Interests	Household	None		+	-
Committees, Boards, &	Self	Committee on Reproductive Health Services: Assessing the Safety and Quality of Abortion Care	\$0	+	-
Workgroups/Panels	Household	None		+	-
Other Interests	Self	None		+	-
other affiliations, advocacy, etc.	Household	None		+	-

DECLARATION

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

Paul G Shekelle 464369
Digitally signed by Paul G Shekelle 464369
Date: 2019.04.02 15:27:27 -07'00'

Signature
Date

RELEVANT MEASURES

List in box below or highlight in attached document.

RELEVANT PUBLICATIONS

Copy and paste into box below or send as attachment.

Shekelle, PG, Paige, NM, Miake-Lye, IM, Beroes, JM, Booth, MS, Shanman, R. The Effectiveness and Harms of Spinal Manipulative Therapy for the Treatment of Acute Neck and Lower Back Pain: A Systematic Review. VA ESP Project #05-226; 2018. Washington (DC): Department of Veterans Affairs; VA Evidence-based Synthesis Program Reports.

Shekelle PG, Cook I, Miake-Lye IM, Mak S, Booth MS, Shanman R, Beroes JM. The Effectiveness and Risks of Cranial Electrical Stimulation for the Treatment of Pain, Depression, Anxiety, PTSD, and Insomnia: A Systematic Review. VA ESP Project #05-226; 2018. Washington (DC): Department of Veterans Affairs; VA Evidence-based Synthesis Program Reports.

Khandelwal SS, Jun J, Mak S, Shanman R, Suttorp Booth M, Beroes JM, Shekelle P. Comparative Effectiveness of Multifocal, Accommodative, and Monofocal Intraocular Lenses for Cataract Surgery and Lens Replacement. VA-ESP Project #05-226; 2018. Washington (DC): Department of Veterans Affairs; VA Evidence-based Synthesis Program Reports.

Solloway MR, Taylor SL, Shekelle PG, Miake-Lye IM, Beroes JM, Shanman RM, Hempel S. An evidence map of the effect of Tai Chi on health outcomes. Syst Rev. Jul 27 2016;5(1):126. PMID: 27460789

Shekelle P. In adults >/= 75 years of age with hypertension, intensive vs standard BP-lowering treatment reduced CV events. Ann Intern Med. Aug 16 2016;165(4):JC14. PMID: 27538175

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

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

DECLARATION

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

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

RELEVANT PUBLICATIONS

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RELEVANT MEASURES

Ī	List in box below or highlight in attached document.

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

F	Self	None		+	-
Employment	Household	None		+	-
Research & Consulting	Self	None		+	-
Roles	Household	None	229	+	
nvestment & Proprietary	Self	None		+	
nterests	Household	None		+	
Committees, Boards, &	Self	None		+	
Workgroups/Panels	Household	None	-	+	
Other Interests	Self	None	Sec 1	+	
other affiliations, advocacy, etc.	Household	None	and the second s	+	
DECLARATION I certify that to my knowle will promptly disclose any Signature	dge and bel	ief that I have disclosed my financial and no			d

RELEVANT MEASURES

List in box below or highlight in attached document.

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

Research & Consulting	Self	None		+	-
Roles	Household	None		+	-
Investment & Proprietary	Self	None		+	-
Interests	Household	None	Postavalencia co consecutivo con estrato a casacción co co con esta casacción de la consecución del la consecución del la consecución de l	+	-
	м менен при	ACP PAC, Chair	\$0	+	-
		Committee on Rheumatologic Care of American College of Rheumatology	\$0	+	-
Committees Decade 0	6-16	Advisory Committee to Health Insurance Exchange of Connecticut	\$0	+	-
Committees, Boards, & Workgroups/Panels	Self	ABIM Rheumatology Board	\$1,001 – 5,000	+	-
Trongroups, runers		Board of Directors of Northeast Medical Group of Yale New Haven Health Systems	\$0	+	-
		Quality of Care Committee - American College of Rheumatology	\$0	+	-
	Household	None		+	-
Other Interests	Self	None		+	-
other affiliations, advocacy, etc.	Household	None		+	-

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

American College of Physicians Disclosure of Interests

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

1. EMPLOYMENT Use the summary table to report any employment that you or any household members have held during the last 3 years in Row 1 (for self) and Row 6 (for household members). 2. RESEARCH AND CONSULTING SUPPORT Within the last 3 years, have you or any household members. . . 2a. . . . received research support for a topic related to health or healthcare? Yes X No E.g., grants, contracts, sponsorships, and other research support **2b.** . . . participated on a speaker's bureau, received honoraria, or consulted or Yes X No advised for a topic related to health or healthcare? 2c. . . . provided expert opinion or testimony related to health or healthcare as Yes X No part of regulatory, legislative, or judicial process? ALL YES RESPONSES, 2a-2c Use the summary table to report details in Row 2 (for self) and Row 7 (for household members). 3. INVESTMENT AND PROPRIETARY INTERESTS Within the last 3 years, have you or any household members. . . **3a.** . . . held any investments related to health or healthcare? Yes X No E.g., stocks, bonds, stock options, or other securities. Please include trusts or holding companies. You may exclude broadly diversified investments such as mutual or pension funds. **3b.** . . . held any commercial business interests related to health or healthcare? X No Yes E.g., board membership, proprietorship, joint ventures, controlling interest **3c.** . . .held any patents, trademarks, or copyrights related to health or Yes X No healthcare? Please include pending. ALL YES RESPONSES, 3a-3c Use the summary table to report details in Row 3 (for self) and Row 8 (for household members). 4. INTELLECTUAL INTERESTS Within the last 3 years, have you or any household members. . . 4a. . . . participated in workgroups, panels, or committees through other Yes X No

medical societies or healthcare organizations?

American College of Physicians Disclosure of Interests

	4b. participated in any advocacy or lobbying activities related to health or healthcare, including any roles or relationships with disease advocacy organizations?	Yes	<u>X</u> No
	4c spoken publicly on topics related to health or healthcare?	Yes	<u>X</u> No
5.	OTHER INTERESTS Is there any other aspect of your background or present interests not addressed above that might be perceived as affecting your objectivity or independence?	Yes	<u>X</u> No

ALL YES RESPONSES, 4a-4c

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

ALL YES RESPONSES, 5

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



American College of Physicians Disclosure of Interests

Date

Signature

- - -

Name: Wayne H. Bylsma, PhD								
Role:		□ ACP Staff or Leadership						
Clinical Guidelines Commit								
Performance Measuremer		e 🔝 Guest						
☐ High Value Care Committe	e							
ACTIVE (Current)	Belongs to)					
Employment	Self	American College of Physicians		+	_			
	Household	Ewing Cole		+	-			
Research & Consulting	Self	None		+	_			
Roles	Household	None		+	-			
Investment & Proprietary	Self	None		+	-			
Interests	Household	None		+	-			
Committees, Boards, &	Self	None		+	-			
Workgroups/Panels	Household	None		+	-			
Other Interests	Self	None		+	-			
other affiliations, advocacy, etc.	Household	None		+	-			
Please include both peer-re	Non	non-peer-reviewed sources (e.g. newspaper op-ed Acute pain	; blog)					
	FUIII							
		For staff use:	DD NEW RESE	Т				
Diago raviou the list of m	aggurag in t	he attached word document. Have you or any hou	resheld members					
		of one of these measures or a competing measure		me				
□Yes □ No								
		published on any of the clinical topic areas covered non-peer-reviewed sources (e.g. newspaper op-ed		?				
□Yes □ No	viewea arra	non peer rememed sources (e.g. nemspaper op ea	, 2.26,					
INACTIVE (Last 3 years)	Relonas to	Description including amount of value or income	.					
	Self	None		+	_			
Employment	Household			+	_			

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

Name: Kate Carroll, MPH					
Role: Clinical Guidelines Commit Performance Measuremen High Value Care Committe	nt Committee	✓ ACP Staff or LeadershipGuest			
ACTIVE (Current)	Belongs to	Description including am	ount of value or inc	ome	
	Self	American College of Physicia	ns		+ -
Employment	Household	The Beasley Firm (personal in malpractice)	njury and medical		+ -
Possarch & Consulting	Self	None			+ -
Research & Consulting	Household	None			+ -
Investment & Proprietary	Self	None			+ -
Interests	Household	None			+ -
Committees, Workgroups,	Self	None			+ -
& Advisory Roles	Household	None			+ -
Other Interests	Self	None			+ -
other affiliations, advocacy, etc.	Household	None			+ -
In the last 3 years, have yo Please include both peer-re	eviewed and				s?
			For staff use:	ADD NEW	RESET
Please review the list of mocontributed towards the detopic)? ☐ Yes ☑ No Have you or any household Please include both peer-re ☐ Yes ☑ No	evelopment d members	of one of these measures	or a competing mea	esure (measure o	on the same
INACTIVE (Last 3 years)	Belongs to	Description including am	ount of value or inc	ome	

Self

Household

Employment

None

None

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

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

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

Name: Shari Maguire Ericks	on				
Role: Clinical Guidelines Commit Performance Measuremen High Value Care Committe	t Committee	 ☑ ACP Staff or Leadership ☐ Guest 			
ACTIVE (Current)	Belongs to	Description including amount of value or income			
Employment	•	American College of Physicians Security Industry Association	\$100,001 or more \$100,001 or more	+	-
Research & Consulting	Self Household	None None		+ +	
Investment & Proprietary Interests	Self Household	None None		+	
Committees, Workgroups, & Advisory Roles	Self Household	None None		+	-
Other Interests other affiliations, advocacy, etc.	Self Household	Spoken publicly at Annual and other meetings on behalf of the American College of Physicians None	\$0 	+	_
		ne attached word document. Have you or any close ese measures or a competing measure (measure o		9	
		ned on any of the clinical topic areas covered by the non-peer-reviewed sources (e.g. newspaper op-ed			
INACTIVE (Last 3 years)	Belongs to	Description including amount of value or income		postonena	-
Employment	Self Household	None None		+	-
Research & Consulting Roles	Self Household	None None		+	-
Investment & Proprietary Interests	Self Household	None None		+	-
Committees, Workgroups, & Advisory Roles	Self Household	None None		+	-
Other Interests	Self	None	Service (Control Control Contr	+	-

other affiliations, advocacy, etc. Household

None

DECLARATION I certify that to my knowledge and belief that I have disclosed will promptly disclose any changes.	my financial and non-financial interests above and I
Signature Signature	5/2/ 19 Date
RELEVANT MEASURES List in box below or highlight in attached document.	
RELEVANT PUBLICATIONS Copy and paste into box below or send as attachment.	

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

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

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

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

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

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

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

RELEVANT PUBLICATIONS

Copy and paste into box below or send as attachment.

Name: <u>Jeffrey Shafiroff, Ph</u>	D						
Role: Clinical Guidelines Commit Performance Measuremer High Value Care Committe	nt Committee						
ACTIVE (Current)	Belongs to	Description including amou	nt of value or incon	1е			
Employment	Self	American College of Physicians				+	-
	Household	None				+	-
Research & Consulting	Self	None				+	-
	Household	None				+	-
Investment & Proprietary	Self	None				+	-
Interests	Household	None				+	-
Committees, Workgroups,	Self	None				+	-
& Advisory Roles	Household	None				+	-
Other Interests	Self	None				+	-
other affiliations, advocacy, etc.	Household	None				+	-
	eviewed and	invasive ventilation Yes	e.g. newspaper op-e] No] No		as?		
	POIIII] No				
			For staff use:	ADD NEW	RESET		
contributed towards the detopic)? ☐ Yes ☑ No Have you or any household Please include both peer-re ☐ Yes ☑ No	evelopment d members peviewed and	ne attached word document. of one of these measures or published on any of the clinical non-peer-reviewed sources (expenses on the clinical non-peer-reviewed sources).	a competing measual topic areas coveres.g. newspaper op-e	red by these med; blog)	on the san		
Terret (Last 5 years)	Delongs to	Haves Inc	The value of fileon			+	

Kaiser Permanente Medical Group

--

Self

Household

None

Employment

Research & Consulting	Self	None				+
Roles	Household	None				+
nvestment & Proprietary	Self	None				+
nterests	Household	None				+
Committees, Workgroups	, Self	None				+
& Advisory Roles	Household	None				+
Other Interests	Self	None				+
other affiliations, advocacy, etc	Household	None				+
certify that to my knowl	_	lief that I have disclosed my financial ar	nd non-fina	ncial interes	ts above a	nd
certify that to my knowl will promptly disclose any	_	Digitally signed by Jeff2 Shafiroff Dix. crn=Jeff2 Shafiroff, c=American College of Physicians, ou, email=jshafiroff@acponline.org, c=US Date: 2019.03.28 1226.24 -04-00	nd non-fina March 28 20		ts above a	nd
l certify that to my knowl will promptly disclose any Jeff2 Shafiroff	_	Digitally signed by Jeff2 Shafiroff DN: cn=Jeff2 Shafiroff, o=American College of Physicians, ou, email=jshafiroff@acponline.org, c=US			ts above a	nd
I certify that to my knowl will promptly disclose any Jeff2 Shafiroff Signature	r changes.	Digitally signed by Jeff2 Shafiroff DN: cn=Jeff2 Shafiroff, o=American College of Physicians, ou, email=jshafiroff@acponline.org, c=US	March 28 20		ts above a	nd
certify that to my knowl will promptly disclose any Jeff2 Shafiroff Signature RELEVANT PUBLICATION	changes.	Digitally signed by Jeff2 Shafiroff DN: cn=Jeff2 Shafiroff, o=American College of Physicians, ou, email=jshafiroff@acponline.org, c=US Date: 2019.03.28 12:26:24-04'00'	March 28 20		ts above a	nd
certify that to my knowl will promptly disclose any Jeff2 Shafiroff Signature RELEVANT PUBLICATION	changes.	Digitally signed by Jeff2 Shafiroff DN: cn=Jeff2 Shafiroff, o=American College of Physicians, ou, email=jshafiroff@acponline.org, c=US Date: 2019.03.28 12:26:24-04'00'	March 28 20		ts above a	nd
certify that to my knowl will promptly disclose any Jeff2 Shafiroff Signature RELEVANT PUBLICATION	changes.	Digitally signed by Jeff2 Shafiroff DN: cn=Jeff2 Shafiroff, o=American College of Physicians, ou, email=jshafiroff@acponline.org, c=US Date: 2019.03.28 12:26:24-04'00'	March 28 20		ts above a	nd
DECLARATION I certify that to my knowl will promptly disclose any Jeff2 Shafiroff Signature RELEVANT PUBLICATION Copy and paste into box is	changes.	Digitally signed by Jeff2 Shafiroff DN: cn=Jeff2 Shafiroff, o=American College of Physicians, ou, email=jshafiroff@acponline.org, c=US Date: 2019.03.28 12:26:24-04'00'	March 28 20		ts above a	3

Name: Patricia Siemion, MS	S				
Role:					
Clinical Guidelines Commit	ttoo	□ ACP Staff or Leadership			
Performance Measuremer		e 🔝 Guest			
High Value Care Committe	ee				
ACTIVE (Current)	Belongs to	Description including amount of value or income	<u>!</u>		
	Self	American College of Physicians	\$50,001 – 100,000	+	_
Employment	Household	International Association of Bridge, Structural, Ornamental and Reinforcing Iron Workers (Local 401)	\$50,001 – 100,000	+	-
Decearsh & Consulting	Self	None		+	-
Research & Consulting	Household	None		+	-
Investment & Proprietary	Self	None		+	-
Interests	Household	None		+	-
Committees, Workgroups,	Self	None		+	-
& Advisory Roles	Household	None		+	-
Other Interests	Self	None		+	-
other affiliations, advocacy, etc.	Household	None		+	-
		usehold members published on any of the followir			
Please include both peer-re	eviewed and	non-peer-reviewed sources (e.g. newspaper op-ed	; blog)		
		Acute pain ☐ Yes ☒ No			
	Non	invasive ventilation ☐Yes ☒ No			
	Point	of care ultrasound Yes 🖂 No			
		For staff use: AD	DD NEW RESE	ET	
			"		
		he attached word document. Have you or any hou			
topic)?	evelopment	of one of these measures or a competing measure	e (measure on the sa	ame	
□Yes ⊠ No					
	_	published on any of the clinical topic areas covered non-peer-reviewed sources (e.g. newspaper op-ed		?	
	.vicwca ana	Tion peer reviewed sources (e.g. newspaper op ed	, 510g/		
□Yes ⊠ No					
INACTIVE (Last 3 years)	Belongs to	Description including amount of value or income	<u>:</u>		
Fuels and	Self	None		+	-

Employment

Household None

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

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

+ -

Household

None

Research & Consulting	Self	None				+
Roles	Household	None				+
nvestment & Proprietary	Self	None				+
nterests	Household	None				+
Committees, Workgroups,	Self	Guidelines International Network Members Committee member	ship	\$0		+
& Advisory Roles	Household	None				+
Other Interests	Self	None				+
other affiliations, advocacy, etc.	Household	None				+
certify that to my knowle		ief that I have disclosed my financial an	d non-fina	ancial inter	ests above a	ınd
will promptly disclose any	changes.	ief that I have disclosed my financial and Digitally signed by Melissa Starkey, PhD DN: cn-Melissa Starkey, PhD, o-American College of Physicians, ou, email=mstarkey@acponline.org, cc-US	d non-fina Mar 28, 20		ests above a	ınd
I certify that to my knowle	changes.	Digitally signed by Melissa Starkey, PhD DN: cn=Melissa Starkey, PhD, 0=American College of Physicians, ou, email=mstarkey@acponline.org,			ests above a	ınd
I certify that to my knowle will promptly disclose any Melissa Starkey, Ph	changes.	Digitally signed by Melissa Starkey, PhD DN: cn=Melissa Starkey, PhD, o=American College of Physicians, ou, email=mstarkey@acponline.org, c=US	Mar 28, 20		ests above a	ınd
certify that to my knowle will promptly disclose any Melissa Starkey, Phagignature RELEVANT PUBLICATION	nD NS	Digitally signed by Melissa Starkey, PhD DN: cn=Melissa Starkey, PhD, o=American College of Physicians, ou, email=mstarkey@acponline.org, c=US Date: 2019.03.28 11:50:38 -04'00'	Mar 28, 20		ests above a	ind
certify that to my knowle will promptly disclose any Melissa Starkey, Phagignature RELEVANT PUBLICATION	nD NS	Digitally signed by Melissa Starkey, PhD DN: cn=Melissa Starkey, PhD, o=American College of Physicians, ou, email=mstarkey@acponline.org, c=US Date: 2019.03.28 11:50:38 -04'00'	Mar 28, 20		ests above a	ind
certify that to my knowle will promptly disclose any Melissa Starkey, Phagignature RELEVANT PUBLICATION	nD NS	Digitally signed by Melissa Starkey, PhD DN: cn=Melissa Starkey, PhD, o=American College of Physicians, ou, email=mstarkey@acponline.org, c=US Date: 2019.03.28 11:50:38 -04'00'	Mar 28, 20		ests above a	ind
I certify that to my knowle will promptly disclose any Melissa Starkey, Ph	nD NS	Digitally signed by Melissa Starkey, PhD DN: cn=Melissa Starkey, PhD, o=American College of Physicians, ou, email=mstarkey@acponline.org, c=US Date: 2019.03.28 11:50:38 -04'00'	Mar 28, 20		ests above a	ind

Name: Farah Sultan, MD, N	1S			
Role:				
☐ Clinical Guidelines Commit	tee			
Performance Measuremer		-		
☐ High Value Care Committe		ducst		
riigii value care committe				
ACTIVE (Current)	Belongs to	Description including amount of value or income		
Employment	Self	American College of Physicians \$50,001 – 100,000	+	-
Employment	Household	None	+	-
December 9 Consulting	Self	Sigma Health Consulting, LLC \$5,001 – 10,000	+	-
Research & Consulting	Household	None	+	-
Investment & Proprietary	Self	None	+	-
Interests	Household	None	+	-
Committees, Workgroups,	Self	None	+	-
& Advisory Roles	Household	None	+	-
Other Interests	Self	None	+	-
other affiliations, advocacy, etc.	Household	None	+	-
		usehold members published on any of the following topic areas? I non-peer-reviewed sources (e.g. newspaper op-ed; blog)		
		Acute pain ☐Yes ☒ No		
	Non	invasive ventilation		
	Point	t of care ultrasound Yes No		
		For staff use: ADD NEW RESE		
		he attached word document. Have you or any household members t of one of these measures or a competing measure (measure on the sa	me	
□Yes ⊠ No				
		published on any of the clinical topic areas covered by these measures? I non-peer-reviewed sources (e.g. newspaper op-ed; blog)		
□Yes ⊠ No				
INACTIVE (Last 3 years)	Relonas to	Description including amount of value or income		

Fox Chase Cancer Center

University of Pennsylvania

Peripheral Vascular Institute Of Philadelphia

\$10,001 - 50,000

\$10,001 - 50,000

Self

Household

Employment

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

		Christiana Care Hospital	\$10,001 - 50,000	+	_
Research & Consulting	Self	None		+	-
Roles	Household	None		+	-
Investment & Proprietary	Self	None		+	-
Interests	Household	None		+	-
Committees, Workgroups,	Self	None		+	-
& Advisory Roles	Household	None		+	-
Other Interests	Self	None		+	-
other affiliations, advocacy, etc.	Household	None		+	-

DECLARATION I certify that to my knowledge and belief that I have disclosed my financial and non-financial interests above and I will promptly disclose any changes.							
Farah Sultan	Digitally signed by Farah Sultan Date: 2019.05.01 10:55:29 -04'00'	5/1/2019					
Signature		Date					
RELEVANT PUBLICATION	NS						
Copy and paste into box bel	ow or send as attachment.						
RELEVANT MEASURES							
List in how holow or highligh	t in attached document						

List	ist in box below or highlight in attached document.						