Ancillary Information Conflicts of Interest Disclosure Form Relating to PCORI-Funded Research Project

All fields are required.  

Contract Number: PCORI/IH-1304-7118

1. Name of Recipient (Awardee Institution):
   Hanan Aboumatar, MD, MPH (The Johns Hopkins University School of Medicine)

2. Name of PCORI-Funded Research Project:
   An Integrative Multilevel Study for Improving Patient-Centered Care Delivery among Patients with Chronic Obstructive Pulmonary Disease (The BREATHE Study): A randomized Controlled Trial

3. Names and Institutions of Principal Investigator (PI) and Key Personnel:

<table>
<thead>
<tr>
<th>Name:</th>
<th>Role:</th>
<th>Recipient (Awardee Institution):</th>
</tr>
</thead>
<tbody>
<tr>
<td>Hanan Aboumatar</td>
<td>Principal Investigator</td>
<td>Armstrong Institute for Patient Safety and Quality, The Johns Hopkins University School of Medicine</td>
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<tr>
<th>Key Personnel Name:</th>
<th>Institution:</th>
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<tr>
<td>Mohammad Naqibuddin</td>
<td>Armstrong Institute for Patient Safety and Quality, The Johns Hopkins University School of Medicine</td>
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<tr>
<td>Suna Chung</td>
<td>Armstrong Institute for Patient Safety and Quality, The Johns Hopkins University School of Medicine</td>
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<tr>
<td>Hina Chaudhry</td>
<td>Armstrong Institute for Patient Safety and Quality, The Johns Hopkins University School of Medicine</td>
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<td>Samuel W. Kim</td>
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<td>Jamia Saunders</td>
<td>Armstrong Institute for Patient Safety and Quality, The Johns Hopkins University School of Medicine</td>
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<tr>
<td>Lee Bone</td>
<td>Department of Health, Behavior, and Society, Bloomberg School of Public Health, Johns Hopkins University</td>
</tr>
<tr>
<td>Ayse P. Gurses</td>
<td>Armstrong Institute for Patient Safety and Quality, The Johns Hopkins University School of Medicine</td>
</tr>
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4. Does Recipient have a Conflicts of Interest Policy or Guidelines that meets the requirements of the federal financial conflicts of interest regulations of the US Public Health Service (http://grants.nih.gov/grants/policy/coi/) that it applies to PCORI-funded research?

☐ YES  ☐ NO (See Question 5)

5. If you checked “No,” Recipient must provide information describing how Recipient will ensure that the PCORI-Funded Research Project is not influenced by conflicts of interest.


6. Report the existence of any financial or personal interests or associations of Recipient, Principal Investigator, and Key Personnel related to the PCORI-Funded Research Project under this Contract that constitute a conflict of interest. Attach the management plan that addresses identified conflicts of interest.
Print “None” if Recipient, Principal Investigator, and Key Personnel have no financial or personal interests or associations that constitute a conflict of interest. (Attach additional documents, if needed).

None


Ancillary Information/COI Disclosure Research Project Form Revised July 24, 2017
7. Please list any direct or indirect links to industry (such as pharmaceutical, medical device, health insurance, and other healthcare-related companies) that Recipient has related to the PCORI-Funded Research Project.
   Print “None” if there are no direct or indirect links to industry as described above. There is no need to include disclosures here that are reported under Question 6 above. (Attach additional documents, if needed).

Dr. Wise reports grants and personal fees from AstraZeneca / Medimmune, grants and personal fees from Boehringer Ingelheim, personal fees from Contrafect, personal fees from Pulmonx, personal fees from Roche, personal fees from Spiration, personal fees from Sunovion, grants from Pearl Therapeutics, personal fees from Merck, personal fees from Circassia, grants and personal fees from GSK, personal fees from Pneuma, personal fees from Verona, personal fees from Bonti, personal fees from Denali, personal fees from Aradigm, outside the submitted work. ⭐⭐⭐

Dr. Hibbard reports personal fees from Insignia Health and equity ownership in Insignia Health. In addition, Dr. Hibbard receives royalties on the PAM paid by Insignia Health through the University of Oregon

8. If Recipient has any additional material information relating to disclosures or management of conflicts of interest, or other protections against bias pertinent to the PCORI-Funded Research Project, please describe it here. Print “None” if there is no additional material information as described above.

None

The undersigned certify that the above information is complete and true to the best of their knowledge and understand that this completed form, with these disclosures, will be made publicly available by PCORI in conjunction with the research findings relating to the Research Project. Both the Administrative Official and Principal Investigator must complete and sign one form.
Administrative Official:

Signed: ____________________________
Print Name: _________________________
Title: ______________________________
Date: _______________________________

Principal Investigator:

Signed: ____________________________
Print Name: _________________________
Title: ______________________________
Date: _______________________________

* Certification for these individuals confirmed by Miye Schmale, Research Compliance Officer, JHU Bloomberg School of Public Health.

** This investigator is affiliated with another university. The JHU School of Medicine Office of Policy Coordination is unable to certify on this individual's behalf.

*** Dr. Wise indicated that these interests are not related to the PCORT funded research project.