

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

All fields are required.

Contract Number: AS-1307-05420

Award ID 065092

1. Name of Recipient (Awardee Institution):

University of Illinois at Chicago

2. Name of PCORI-Funded Research Project:

The Coordinated Healthcare Interventions for Childhood Asthma Gaps in Outcomes (CHICAGO) Trial

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

Name:	Role:	Recipient (Awardee Institution):
Jerry Krishnan	Principal Investigator	University of Illinois at Chicago

Key Personnel Name:	Institution:
Joell Henry-Tanner	Chicago Asthma Consortium
Kim Erwin	Illinois Institute of Technology (now at University of Illinois at Chicago)
Rajesh Kumar	Ann and Robert H. Lurie Children's Hospital
Zack Pittsenbarger	Ann and Robert H. Lurie Children's Hospital
Joel Africk	Respiratory Health Association
Giselle Mosnaim	Rush University Medical Center (now at Northshore University Health System)

Lynda Powell	Rush University Medical Center
Leslie Zun	Sinai Health System
Helen Margellos-Anast	Sinai Health System
Valerie Press	University of Chicago
S. Margaret Paik	University of Chicago
Molly Martin	University of Illinois at Chicago
Michael Berbaum	University of Illinois at Chicago
Sharmilee Nyenhuis	University of Illinois at Chicago
Trevonne Thompson	University of Illinois at Chicago; John H. Stroger, Jr. Hospital of Cook County Health and Hospitals System

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.

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).

None.

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:

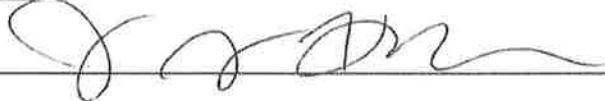
Signed: Mitra Dutta, PhD

Print Name: Mitra Dutta, PhD

Title: Vice Chancellor for Research

Date: 11/30/17

Principal Investigator:

Signed: 

Print Name: Jerry Krishnan, MD, PhD

Title: Professor and Associate Vice Chancellor for Health Affairs

Date: 11/22/2017