Joint Task Force on Practice Parameters Conflict of Interest Policy 2020

In order to preserve the integrity of Allergy and Immunology Practice Parameter documents, the Joint Task Force on Practice Parameters (JTFPP) requires all individuals involved with the development of a practice parameter to complete a COI Form. Disclosure of potential COI should reflect all current commercial, non-commercial, intellectual, institutional, and patient/public activities.

Disclosure by **JTFPP Members** must be made in writing prior to the commencement of their service to the JTF and must be updated whenever circumstances require or once per calendar year, whichever is sooner.

Disclosure by a Parameter **Work Group Chair** candidate must be made in writing prior to forming the Parameter **Work Group** and must be updated whenever circumstances require or once per calendar year, whichever is sooner.

Disclosure by a Parameter **Work Group Member** candidate must be made in writing prior to forming the Parameter **Work Group** and must be updated whenever circumstances require or once per calendar year, whichever is sooner.

Examples of **potential conflicts of interest** that should be disclosed include, but are not limited to, remuneration received by the individual for any activities performed (such as grants, clinical trials, honoraria, legal or medical consulting fees, etc.), research funding sources, investments, gifts, and organizational affiliations. If the individual's employer fits the definition of **a commercial interest***, the individual should describe the scope of his or her work responsibilities (such as administration of specific programs or the topic of research activities). If the individual's employer receives remuneration from a commercial interest for the individual's activities, this relationship should also be disclosed. Non-financial COI should also be declared (office holder, published works, competing interests or academic commitments).

All information disclosed will be reviewed to identify potential conflicts of interest and to guide the resolution of those conflicts. Reviewing the disclosures of JTFPP members will be the responsibility of the sponsoring organization that nominated the JTFPP member (i.e. the ACAAI and the AAAAI). The JTFPP Co-Chairs will review and manage the disclosed COI of potential Work Group Chairs and Work Group Members, with possible assistance of the JTFPP.

Financial information obtained from this disclosure form is confidential and will only be used by the JTFPP and its sponsoring societies for the purpose of determining potential conflicts of interest.

Examples of **potential conflicts of interest** include:

- 1. Financial relationship with a commercial interest (e.g. received salary, income, gifts, or other assets for performing clinical trials, speaking, and consulting/advising)
- 2. Financial relationship with MedEd Company.
- 3. Financial relationship with any organization that provides commercial support to the ACAAI or the AAAAI.
- 4. Research funding sources (e.g. grants from NIH, Pharma-sponsored investigator initiated research, or other sources of research support).
- 5. Organizational affiliations, including both volunteer and paid positions held with organizations that may create or be perceived as a conflict of interest.

*A <u>commercial interest</u> is defined as any entity producing, marketing, re-selling, or distributing health care goods or services consumed by, or used on, patients.

POTENTIAL CONFLICT OF INTEREST DISCLOSURE FORM Joint Task Force on Practice Parameters

Name:	Caroline Horner	
Role in	Practice Parameter Development:	
X	Task Force Member	
	Work Group Chair	
	Work Group Member. Workgroup:	
	Other:	
Date Co	mpleted: 10/8/20	
A. EM	PLOYMENT	
My emp	loyer is: Washington University School of Medicine	
My job	itle is: Associate Professor	

If this employer is defined as a commercial interest ("any entity producing, marketing, re-selling, or distributing health care goods or services consumed by, or used on, patients"), please attach a brief description of job responsibilities.

	B. COMPETING REI	LATIONS	omips (imanci	ai, research, a	ma/or legal):	•			
	(X) NONE. In the proceeding relationships					hold or imm	ediate famil	y, have ı	10
	COMPETING REI	LATIONS	SHIPS totaling	less than \$5,0	000				
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l									
	C. COMPETING RI () I, or a member of received \$5,000 or more	my house	ehold or imme	diate family,	have 1 or mo	•	,	ips fron	a which I
	Please also include any oby a majority of my peer Please place a checkma	s to be mo	ore than casual a	and/or likely to	impact my a	bility to exer	cise independ	dent judg	gment.
	1. \$5,000 - \$25,00	00							
	Name of Organizatio topic of Testimony of Consultation		N	ature of Relat	ionship		Ongoing? Yes/No		

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Name of Organization / topic of Testimony or Consultation	Nature of Relationship	Ongoing? Yes/No
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3. \$50,000 or more

Name of Organization / topic of Testimony or Consultation	Nature of Relationship	Ongoing? Yes/No

D. NON-FINANCIAL AND ORGANIZATIONAL INTERESTS

I have disclosed below information about volunteer positions I have held during the **previous 12 months** including organizations published works, competing interests or academic commitments that may create or be perceived as a conflict of interest Please note, any personal financial gain from these relationships should be disclosed in section B, "Financial Interests".

Please place a checkmark in the "Ongoing" column, if this relationship is still in effect at the time of this disclosure.

Name of Organization or Competing Interest	Nature of Relationship	Ongoing? Yes/No
AAAAI	Chair of several committees	Yes

[] I have no such non-financial or organizational interests to disclose.	[] I refuse to disclose.

E. COMPETING INTERESTS MOST LIKELY TO REPRESENT REAL OR PERCEIVED CONFLICT

I feel that the following are most likely to constitute a real or perceived conflict of interest:
F. CONFLICT RESOLUTION
I have taken the following steps to limit bias from my potential conflicts as disclosed above (please attach additional pagif necessary).
[X] I have no conflicts to resolve. [] I refuse to disclose.
I hereby acknowledge that I occupy a position of trust and that I am expected to act at all times in good faith, and to act in such a manner as to avoid even the appearance of using my position to advance, in a way inconsistent with the purposes and interests of the Joint Task Force on Practice Parameters, any private interest of mine or of any individual or entity with whom I have a significant relationship.
I certify that the statements I have made above are true, complete, and correct to the best of my knowledge and belief, an agree to report to the Joint Task Force on Practice Parameters any interests or relationships which may subsequently develop or dissolve that would alter these statements in any substantive way.
Signature: Caroline Horner MD Date: 10/8/20