Evidence Review Committee Member Relationships With Industry and Other Entities (Comprehensive)—Interventional Therapy Versus Medical Therapy for Secundum Atrial Septal Defect: A Systematic Review (Part 2) for the 2018 AHA/ACC Guideline for the Management of Adults With Congenital Heart Disease*

Committee Member	Employment	Consultant	Speakers Bureau	Ownership/ Partnership/ Principal	Personal Research	Institutional, Organizational or Other Financial Benefit	Expert Witness
Ariane Marelli (Chair)	McGill University Health Center— MAUDE Unit, Director	None	None	None	None	None	None
Ami B. Bhatt	Massachusetts General Hospital—Adult Congenital Heart Disease Program, Director	None	None	None	None	Actelion†	None
Nandini Dendukuri	McGill University Health Center—Director; McGill University—Associate Professor; Department of Medicine and Department of Epidemiology, Biostatistics and Occupational Health	None	None	None	None	None	None
Matthew Oster	Emory University School of Medicine, Children's Healthcare of Atlanta—Director, Children's Cardiac Outcomes Research Program at Sibley Heart Center	None	None	None	None	None	None
Elisa Zaragoza- Macias	University of Washington School of Medicine— ACHD Senior Fellow	None	None	None	None	None	None

This table represents all relationships of Evidence Review Committee members with industry and other entities that were reported by authors, including those not deemed to be relevant to this document, at the time this document was under development. The table does not necessarily reflect relationships with industry at the time of publication. A person is deemed to have a significant interest in a business if the interest represents ownership of \geq 5% of the voting stock or share of the business entity, or ownership of \geq 55,000 of the fair market value of the business entity; or if funds received by the person from the business entity exceed 5% of the person's gross income for the previous year. Relationships that exist with no financial benefit are also included for the purpose of transparency. Relationships in this table are modest unless otherwise noted. Please refer to http://www.acc.org/guidelines/about-guidelines-and-clinical-documents/relationships-with-industry-policy for definitions of disclosure categories or additional information about the ACC/AHA Disclosure Policy for Writing Committees.

*The ACHD guideline began in March 2014. Over the initial years of the CMS Open Payment System, understandably, there have been issues related to accurate reporting of food and beverage payments. For this reason, the ACC and AHA have not considered these minor charges relevant relationships with industry.

+CMS reported payments to Dr. Bhatt in 2014-2017; however, she disagrees with this report. The sections authored by Dr. Bhatt have been reviewed, and it was affirmed that there was no implication of any influence of industry

ACC indicates American College of Cardiology; ACHD, adult congenital heart disease; AHA, American Heart Association; CMS, Centers for Medicare & Medicaid Services; and MAUDE, McGill Adult Unit for Congenital Heart Disease Excellence.

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