

## Disclosures

### Personal Commercial (4)

Company Name	Relationship Category	Compensation Level	Topic Area(s)
<b>Self</b>			
Acorai	Research/Research Grants	Modest (< \$5,000)	<a href="#">Heart Failure and Cardiomyopathies</a>
Johnson & Johnson MedTech	Research/Research Grants ‡ Utility of Hemodynamic Markers in Predicting Successful Weaning to Native Recovery from the Impella CP in Cardiogenic Shock	Significant (>= \$5,000)	<a href="#">Heart Failure and Cardiomyopathies</a>
Johnson & Johnson MedTech	Consultant Fees/Honoraria	Significant (>= \$5,000)	<a href="#">Heart Failure and Cardiomyopathies</a>
Precision Cardiovascular	Consultant Fees/Honoraria	Modest (< \$5,000)	<a href="#">Heart Failure and Cardiomyopathies</a>

### Additional Personal Commercial Disclosures for Education Activities (0)

No disclosures on record

### Personal Organizational or Other Non-Commercial (0)

No disclosures on record

### Clinical Trial Enroller (0)

No disclosures on record

### Institutional Financial Decision-Making Role (0)

No disclosures on record

### Expert Witness Testimony (6)

Year	Case Title	Represented	Description	Compensation
<b>Self</b>				
2025	Delayed STEMI diagnosis	Plaintiff	Patient presented to ED with ACS, no ECG was obtained and patient died from STEMI cardiogenic shock.	Modest (< \$5,000)
2025	Impella repositioning	Defendant	Clinician repositioned Impella 5.5 device without proper imaging guidance and patient developed a stroke.	Significant (>= \$5,000)
2025	Atrial fibrillation after assault	Third Party	Patient developed atrial fibrillation after assault. I provided consultation for the homeowner association attorney where the assault took place.	Modest (< \$5,000)
2025	No transplant referral	Plaintiff	Young patient with end stage heart failure died without being referred for heart transplant evaluation	Modest (< \$5,000)
2025	Death during ICU dialysis	Defendant	Patient with end stage amyloidosis died during ICU dialysis session.	Modest (< \$5,000)
2025	Bleeding after AVR	Plaintiff	Severe bleeding after surgical AVR in which no in-house Intensivist was available.	Modest (< \$5,000)

† Commercial Funding Source | ‡ Trial Name

## Agreement

### Certified Education Attestation | Signed on 10/1/2025

[URL for full agreement: http://disclosures.acc.org/Public/Definition/CertifiedEducationAttestationAgreement](http://disclosures.acc.org/Public/Definition/CertifiedEducationAttestationAgreement)

### Confidentiality, Disclosure and Assignment Agreement | Signed on 10/1/2025

[URL for full agreement: http://disclosures.acc.org/Public/Definition/ConfidentialityDisclosureandAssignmentAgreement](http://disclosures.acc.org/Public/Definition/ConfidentialityDisclosureandAssignmentAgreement)

### Embargo | Signed on 10/1/2025

[URL for full agreement: http://disclosures.acc.org/Public/Definition/EmbargoAgreement](http://disclosures.acc.org/Public/Definition/EmbargoAgreement)

### On-Going Obligation Agreement | Signed on 10/23/2025

## **ACC and Disclosures**

ACC is committed to ensuring balance, independence, objectivity, and scientific rigor in their governance, programmatic, educational, chapter, and other activities. Fulfilling this commitment depends on member and public confidence in the College's integrity and objectivity. The College recognizes that the activities of College members in their practice, research, and other volunteer and private endeavors could lead to the development of conflicts of interest. Therefore, the College has established a Disclosure Policy and conflict of interest management process as appropriate. All members involved in College governance, including all committees and task forces, programmatic, certified educational, chapter, and other activities must provide complete, timely, accurate, and signed disclosure statements. Compliance with this process is mandatory for participation in College activities.