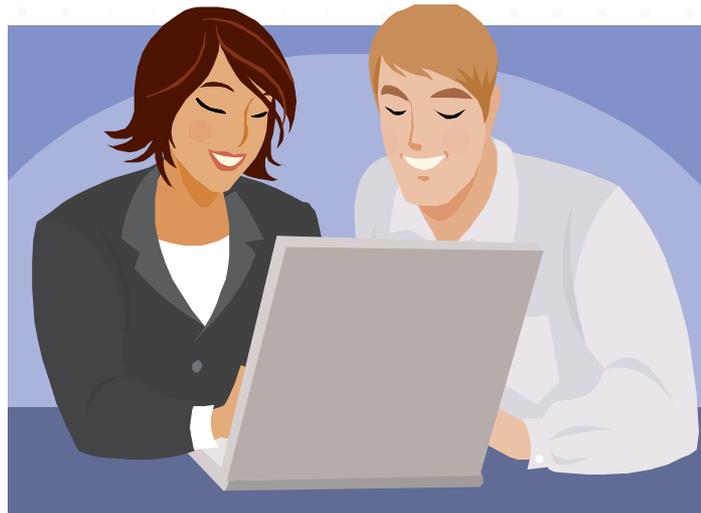




Instructions for eCOI Annual Disclosure

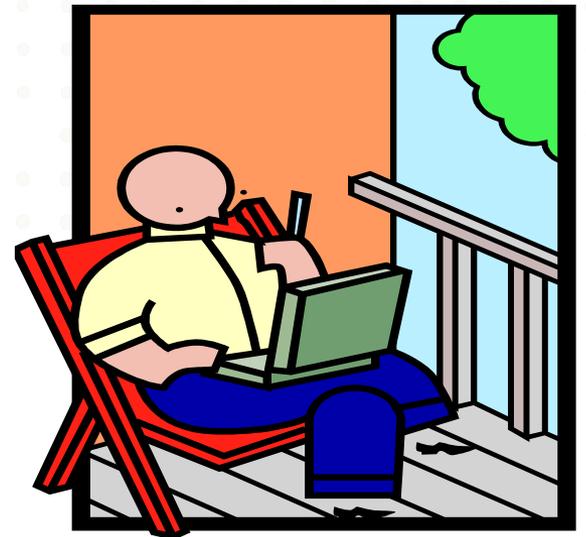
Annual Disclosure

As part of the Wake Forest Baptist Health community, you are required to complete an annual disclosure of outside interests and commitments.

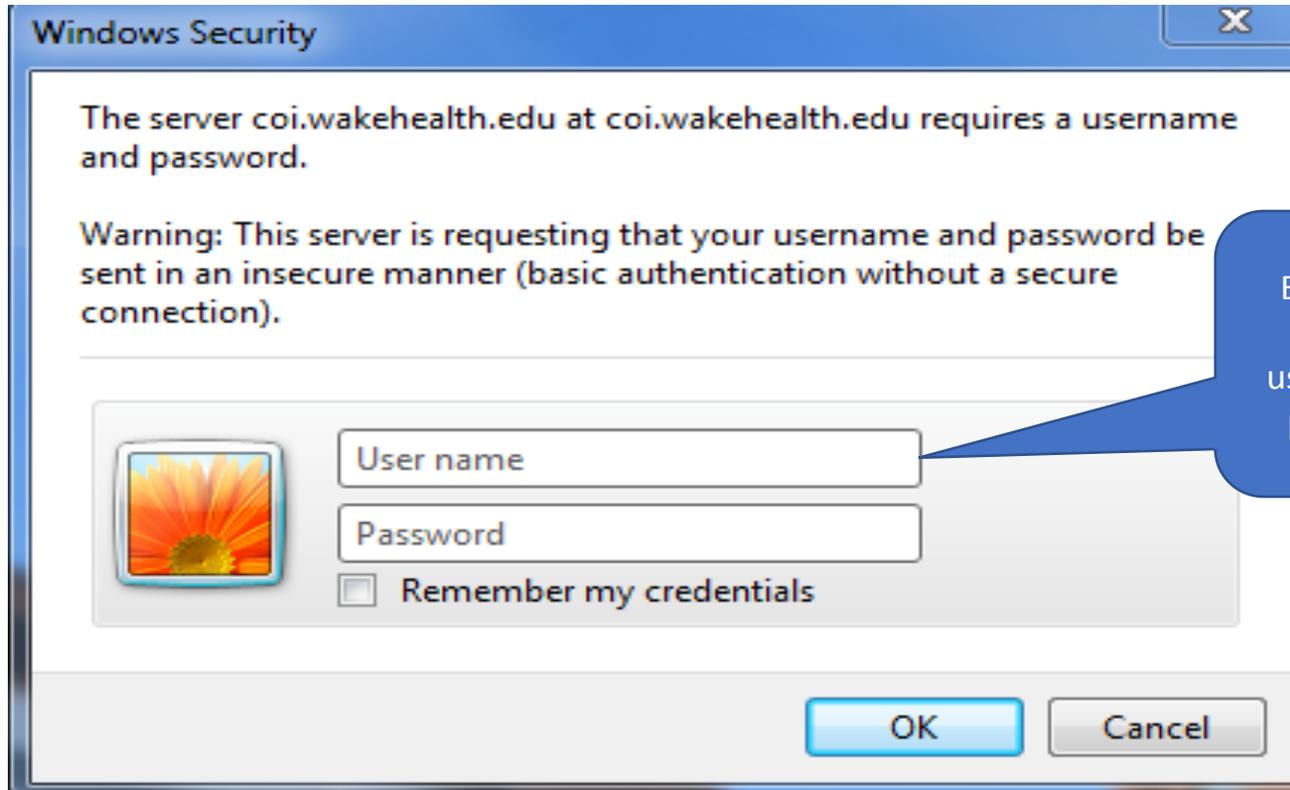


Log into the eCOI System

- The COI Office will send you an email link to eCOI.
- You can access eCOI anywhere outside of the institution without using PORTAL! Simply go to your browser and type in <https://coi.wakehealth.edu>.



Log into the eCOI System



Accessing your Inbox

The screenshot displays the eCOI system interface. At the top left is the Wake Forest Baptist Health logo. To its right is the eCOI logo and the text "Conflict of Interest Office: (336) 716-9300 / coioffice@wakehealth.edu". In the top right corner, there is a user menu with "Marvin Fernfeather", "My Inbox", and "Logoff" options. Below this is a navigation bar with "Home" and "Reports" tabs. A blue callout box points to the "My Inbox" link with the text "Go to your inbox by clicking here". On the left side, there is a "Pages" menu with "Contact Us" and "eCOI User Guides" links. The main content area is titled "Welcome to the eCOI (Electronic Conflict of Interest System)" and lists actions under "Here you can:":

- **Complete an Annual Disclosure**
 - Annual Disclosures are generated in April and upon new hire for exempt and special exempt employees and for all clinical providers.
- **Request Approval for Outside Activities**
 - You may request approval for Outside Employment opportunities.
 - You may request prior approval for Non-Certified Educational Activities that are funded by industry. (Includes attending, organizing, or speaking at an industry funded educational event).
 - The system will electronically route your outside activity request to the appropriate individual for required approval.

On the right side, there is a "Login" box containing the text "Marvin Fernfeather", "My Home", and a "Log Off" button.

To get started, click My Inbox at the top right of your screen

Choose your Role



eCOI

Conflict of Interest Office: (336) 716-9300 / coioffice@wakehealth.edu

Marvin Fernfeather | My Inbox | Logoff

Select "Annual Disclosure Inbox" under "My Roles"

My Roles

[Annual Disclosure Inbox](#)

[Outside Activities Inbox](#)

Page for Marvin Fernfeather

Welcome to your Personal Folder. Choose the correct role (Disclosure or Outside Activity) on the left side of the page to navigate eCOI.

Create

[Outside Activity Request](#)

Resources

[Outside Activities User Guide](#)

[Conflict of Interest Policy](#)

[Conflict of Commitment Policy](#)

My Inbox Pending Dept Review or COI Review My Outside Activities Approver

Complete any items found below. Once complete it will remove the item from your inbox.

Filter by ID [Advanced](#)

| ID | Name | Owner | State | Date Submitted | Requestor | Dept Approver |
|------------|--|---------------------|-------------------------------|----------------|--------------------|---------------|
| OA00000154 | Outside Employment Request Form requested by Marvin Fernfeather Starting March 1, 2019 | McBride, Debra G | Pending Departmental Approval | 2/25/2019 | Marvin Fernfeather | Clark Kent |
| OA00000153 | Attending Industry-Funded Educational Event requested by Peter Parker Starting March 1, 2019 | Fernfeather, Marvin | Draft | | Peter Parker | Clark Kent |

2 items

page 1 of 1

10 / page

Accessing your Annual Disclosure



eCOI

Conflict of Interest Office: (336) 716-9300 / coloffice@wakehealth.edu

Marvin Fernfeather | My Inbox | Logoff

Home Reports

Page for Marvin Fernfeather

My Roles

Annual Disclosure Inbox

Outside Activities Inbox

Page for Marvin Fernfeather

Welcome to your **Personal Folder**. Choose the correct role (Disclosure or Outside Activity) on the left side of the page to navigate eCOI.

Resources

[Conflict of Interest Policy](#)

[Conflict of Commitment Policy](#)

My Inbox | My Report To Status

Complete any items found below. Once complete it will remove the item from your inbox.

Filter by

| Name | Date Created | State | Date Submitted | Supervisor |
|---|-------------------|-------|----------------|-------------|
| Annual Disclosure Certification for Marvin Fernfeather 2019 | 3/26/2019 2:34 PM | Draft | | James Moore |

1 items page 1 of 1 / page

Click on the annual disclosure certification found in your Inbox

Initiating the Disclosure Process

The screenshot displays the Wake Forest eCOI system interface. At the top left is the Wake Forest Baptist Health logo. To its right is the text "eCOI" and "Conflict of Interest Office: (336) 716-9300 / coioffice@wakehealth.edu". In the top right corner, there are links for "Marvin Fernfeather", "My Inbox", and "Logoff". A blue callout box points to the "Edit Disclosures" button in the "Actions" menu, with the text "Select 'Edit Disclosures' to begin the disclosure process". The main content area shows a disclosure card with the following details: "Status: Draft", "Type: Annual Certification", "ID# DC00022421", and "Discloser: Marvin Fernfeather | Phone:". Below the disclosure card are two tabs: "Disclosures" (selected) and "History". On the left side, there is an "Actions" menu with three options: "Edit Disclosures" (highlighted), "Submit Disclosure", and "Log Comment". At the bottom left, there is a breadcrumb trail: "Disclosure Certifications - Draft". Below the disclosure card, there is a section titled "Notes to Discloser" containing a paragraph of text: "WFBH requires that faculty and exempt employees (including trainees, and other healthcare providers) disclose annually all outside interests, both research and non-research related, each April through the online disclosure process. Annual disclosure must be completed within 30 days of receipt of the reminder notification from the Conflict of Interest Office. All annual disclosures will be reviewed by the individual's department chair/section head/ director/ manager as defined by Human Resources. In the case of department chairs, the Dean of the Medical School will perform the review. One must update his/her annual disclosure within 30 days of a substantial change in external activities." Below the notes is a link: "Link: COC/COI Policy".

Wake Forest[®] Baptist Health

eCOI

Conflict of Interest Office: (336) 716-9300 / coioffice@wakehealth.edu

Marvin Fernfeather | My Inbox | Logoff

Marvin Fernfeather 2019

Status: **Draft** Type: Annual Certification | ID# DC00022421 Discloser: **Marvin Fernfeather** | Phone:

Actions

Edit Disclosures

Submit Disclosure

Log Comment

Disclosures History

To Get Started: Click on the "Edit Disclosures" button to the left, under "Actions".

Disclosure Certifications - Draft

Notes to Discloser

WFBH requires that faculty and exempt employees (including trainees, and other healthcare providers) disclose annually all outside interests, both research and non-research related, each April through the online disclosure process. Annual disclosure must be completed within 30 days of receipt of the reminder notification from the Conflict of Interest Office. All annual disclosures will be reviewed by the individual's department chair/section head/ director/ manager as defined by Human Resources. In the case of department chairs, the Dean of the Medical School will perform the review. One must update his/her annual disclosure within 30 days of a substantial change in external activities.

[Link: COC/COI Policy](#)

Important Points to Remember

- eCOI works best in Google Chrome or Internet Explorer
- All questions marked with a red asterisk require completion.
- **New questions have been added to the Annual Disclosure.**
Carefully read all questions before you respond.
- Be sure to click the “save” button on the banner if you need to exit the system before completion of the disclosure.



Institutional Responsibilities Page

The screenshot shows the top portion of a web application. On the left is the Wake Baptist logo. In the center, there is a navigation bar with a "You Are Here:" breadcrumb trail and a "Back" button. On the right, there is a "Continue >>" button. Two blue callout boxes are overlaid on the page: one on the left pointing to the "Back" button and one on the right pointing to the "Continue >>" button. The page title "Institutional Responsibilities" is visible in the breadcrumb trail.

Use the "Back" button at the top or bottom of the page to navigate. DO NOT use the "back" button on your browser.

Click "Continue" at the top or bottom of the page(s)

Annual Certification for Marvin Fernfeather : Institutional Responsibilities

The following questions apply to all activities, inpatient or outpatient. References to WFBH include activities at any WFBH space, including but not limited to hospitals, clinics, labs and office space.

- * Are you a Doctor of medicine or osteopathy (excludes residents), dental surgeon, dentist, licensed chiropractor, optometrist, or podiatrist who writes orders and/or prescribes items or services for patients?**
 Yes No [Clear](#)
- * Do you advise on or decide which vendor, manufacturer, service provider, supplier is chosen for purchase, lease, use or acquisition of any items or services at WFBH?**
 Yes No [Clear](#)
- * Do you hold a position of executive leadership at WFBH?**
 Yes No [Clear](#)
- * Are you involved in the teaching, instruction, or education of students or other trainees at WFBH?**
 Yes No [Clear](#)
- * Do your institutional responsibilities include research at WFBH? This includes, but is not limited to, being listed as an investigator on any funding proposal, awarded grant, IRB or IACUC submission.**
 Yes No [Clear](#)

FAMILY OR CONSENSUAL RELATIONSHIPS

- * Is there a family member or individual(s) with whom you have a consensual relationship employed at WFBH or one of its affiliates?** ⓘ
 Yes No [Clear](#)

*** Please click "Add" and complete form for each person that meets this criteria:**

| Relationship Type | Name of Person with Relationship | Supervisor Or Collaborator with | Description of Supervisory or Collaboration |
|-------------------------------|----------------------------------|---------------------------------|---|
| There are no items to display | | | |

EXPERT WITNESS

- * Have you been an expert witness or medical legal consultant (not contracted through WFBH or its affiliates) for the previous calendar year (January-December)?**
 Yes No [Clear](#)

Blue Help Buttons

Blue help buttons are scattered throughout the system. Click the button once to open the purple help box, and click it again to close the box.

FAMILY OR CONSENSUAL RELATIONSHIPS

6. * Is there a family member or individual(s) with whom you have a consensual relationship employed at WFBH or one of its affiliates?

Yes No [Clear](#)

| | |
|--------------------------------|---|
| Family member | Spouse, domestic partner, child, grandchild, grandparent, parent, brother, sister, those in a 'step', 'half' or 'in-law' relationship, aunt, uncle, niece, nephew, or first cousin. |
| Consensual Relationship | A dating, sexual, or cohabitating relationship. |

Remember

All questions regarding income on the annual disclosure pertain to the previous calendar year (January-December).

2018



Definitions appear when your cursor hovers over underlined words

Annual Certification for Marvin Fernfeather : What to Disclose

The following question relates to any entities with which you (or a family member) own equity or intellectual property rights, had fiduciary relationships or received income or transfers of value in the previous calendar year (January-December).

Only report a family member's outside relationship if you know that the entity does business with WFBH.



What to Disclose



eCOI

Conflict of Interest Office: (336) 716-9300 / coioffice@wakehealth.edu

Edit: Disclosure Certification - DC00022421

You Are Here: Annual Disclosure Certificatio...

<< Back

Save | Exit | Hide/Show Errors | Print... | Jump To: What to Disclose ▾

Continue >>

Annual Certification for Marvin Fernfeather : What to Disclose

The following question relates to any [entities](#) with which you (or a [family member](#)) own equity or intellectual property rights, had fiduciary relationships or received income or transfers of value in the previous calendar year (January-December).

Only report a family member's outside relationship if you know that the entity does business with WFBH.

- **Income** - Disclose any income or honoraria earned in the previous calendar year from providing [labor or services](#) to an outside [entity](#) (including speaking, consulting, editorials, serving on paid boards, etc.) **Do not report** writing, membership on peer review panels, visiting professorships or lectureships at academic medical centers, federal and non-federal study section membership, grant review panels, or textbook editorships.
- **Equity holdings or ownership** - Disclose entities founded or owned. Disclose any shares of equity owned, including stock options, warrants or promises of such, etc., whether the company is privately or publicly held and even if there is no current value. This includes equity in start-up companies. **Do not report** stocks or other investments in which you have no day to day control.
- **Intellectual Property Rights/License Agreements**- Disclose intellectual property, license agreements and/or royalties received, including those paid to you by WFBH.
- **Fiduciary responsibility** - Disclose fiduciary responsibilities in the previous calendar year with any outside entities (for-profit and not-for-profit), including but not limited to board memberships, company officer role or executive management role, **whether paid or unpaid**. This includes scientific advisory boards.
- **Unrestricted Gifts** - Disclose any unrestricted gift received in the previous calendar year for research or educational support, including equipment, supplies, etc.
- **Fellowship or scholarship** - Disclose any fellowship (ACGME or Non-ACGME) or scholarship sponsored by a healthcare product or service company, professional organization or a medical school department.

* Are there any entities with which you have an outside relationship or a [family member](#) has a financial or fiduciary relationship, as defined above?

Yes No [Clear](#)

Be sure to answer the question at the bottom

If you answer yes, skip to slide 16

<< Back

Save | Exit | Hide/Show Errors | Print... | Jump To: What to Disclose ▾

Continue >>

Assurance and Certification



eCOI

Conflict of Interest Office: (336) 716-9300 / coioffice@wakehealth.edu

Edit: Disclosure Certification - DC00022421

You Are Here: Annual Disclosure Certificatio...

<< Back

Save | Exit | Hide/Show Errors | Print... | Jump To: Assurance and Certification

Finish

Annual Certification for Marvin Fernfeather : Assurance and Certification

- I hereby acknowledge that I have read and understand the WFBMC [Conflict of Commitment and Conflict of Interest Policy](#)
- I affirm that the information provided is to the best of my knowledge true and complete and does not misstate any facts.
- I will provide any additional information as requested by the Conflict of Interest Office.
- I agree to cooperate in the development of any needed *Management Plan* as required per the Federal Regulations to manage, reduce, or eliminate existing conflicts of interest related to my research. I agree to comply with the terms and conditions contained in any *Management Plan*.

* Check Yes to confirm that you understand and agree with the above statements, and all your disclosures are up-to-date. After choosing yes, click "[Finish](#)" to submit your disclosure.

Yes No [Clear](#)

After reading the bullet points above, select "yes" to confirm agreement

Save | Exit | Hide/Show Errors | Print... | Jump To: Assurance and Certification

Select "Finish" at the top or bottom of the page to submit your annual disclosure

Finish

Entity Details

Wake Forest University Baptist Health Center

Annual Disclosure

Entity Details

Entity: Disclosure Certification - DC00022421

You Are Here: Annual Disclosure

<< Back

Continue >>

If you indicated that you have relationships with outside entities to report, then the "Entity Details" page will automatically appear so that you can provide details.

Annual Certification for Marvin Fernfeather : Entity Details

Reminder Only - Entities Reported on Last Year's Annual Disclosure:

| Entity | Disclosure Type(s) |
|-------------------|---|
| Baxter Healthcare | Consulting, advisory boards, or speaking activities |

IMPORTANT: Entities reported on last year's annual disclosure are informational only and DO NOT carry over. You must re-enter all current relationships for this annual disclosure period.

How to Add Entities for this Annual Disclosure:

Click the "Add Entity" button to report a relationship for this annual disclosure.

Click the "Add Entity" button to report a relationship for this annual disclosure period

DID YOU REMEMBER ALL ENTITIES FOR THIS ANNUAL DISCLOSURE?

Review this list for accuracy before you continue. The Edit button on the left column allows you to revise details.

| View/Edit | Entities | Relationships | Disc Types (Self) | Value (self) | Disc Types (Family) | Value (family) | Last Updated | Remove |
|-------------------------------|----------|---------------|-------------------|--------------|---------------------|----------------|--------------|--------|
| There are no items to display | | | | | | | | |

<< Back

Save | Exit | Hide/Show Errors | Print... | Jump To: Entity Details

Continue >>

New Entity Details

Enter the first three letters of the new entity name . A dropdown menu will automatically appear. Choose the correct entity and click "OK." **Do not use the "Select" button.**

The screenshot shows a web browser window titled "Execute 'New Entity Details' on DC00021953 - Internet Explorer". The page has a yellow header with the text "New Entity Details". Below the header, the instruction "Select the outside entity with which you have a relationship:" is followed by a text input field and a "Select..." button. A blue callout bubble points to the input field with the text: "Enter the first three letters of the new entity name . A dropdown menu will automatically appear. Choose the correct entity and click 'OK.' **Do not use the 'Select' button.**". Below the input field, the text reads: "If outside entity does not appear in list above, please contact coidisclosures@wakehealth.edu". At the bottom of the form, there are "OK" and "Cancel" buttons. A second blue callout bubble points to the "OK" button with the text: "If your entity is not listed, use the email link to request the addition of the entity."

Entity Information



eCOI

Conflict of Interest Office: (336) 716-9300 / coioffice@wakehealth.edu

Edit: Disclosure - FI00002174

You Are Here: Annual Disclosure Certificatio... Disclosure FI00002174 for Marv...

<< Back

Save | Exit | Hide/Show Errors | Print... | Jump To: - Disclosure General Information ▾

Continue >>

Disclosure for Marvin Fernfeather : Entity Information Baxter Healthcare

1. * Which individual has a relationship with this entity?

Self

Family Member

Spouse, domestic partner, child, grandchild, grandparent, parent, brother, sister, those in a 'step', 'half' or 'in-law' relationship, aunt, uncle, niece, nephew, or first cousin

If you select both self and family member, you will be directed to answer questions about your own outside relationships FIRST.

<< Back

Continue >>

Self Entity Relationships



Conflict of Interest Office: (336) 716-9300 / coioffice@wakehealth.edu

Edit: Disclosure - FI0002174

You Are Here: [Annual Disclosure Certificatio...](#) > [Disclosure FI0002174 for Marv...](#)

<< Back

Save | Exit | Hide/Show Errors | Print... | Jump To: - Self Cover Page ▾

Continue >>

Disclosure for Marvin Fernfeather : Self Entity Relationships Baxter Healthcare

Welcome to the **Self** portion of your disclosure

You have indicated a relationship with this entity. The following pages will ask for additional information related to your interest.

1. * **Did you engage in research that is sponsored or supported by this entity during the previous calendar year (Jan-Dec)?**

Yes No [Clear](#)

2. * **Did you engage in travel during the previous calendar year (January-December) that was directly paid or reimbursed by this entity?**

Yes No [Clear](#)

3. * **Do you engage in or provide investment advice to this entity?**

Yes No [Clear](#)

4. * **What type of interest do you have with the outside entity?**

- Owner, founder, equity (shares / stocks)
- Consulting, advisory boards, or speaking activities
- Paid Editorial activities
- Board of directors, company officer, or executive management
- Employee
- Intellectual Property Rights (license / royalties)
- Unrestricted Gifts
- Fellowship

Based on your answers on this page, you will be directed to answer more questions about the outside relationships you selected. These detailed pages are self explanatory and are not displayed in these instructions.

5. * **How many days did you work at the entity during the previous calendar year (Jan-Dec).**

6. * **Provide your best estimate of the number of days you will work at this entity during the current calendar year (Jan-Dec).**

<< Back

Save | Exit | Hide/Show Errors | Print... | Jump To: - Self Cover Page ▾

Continue >>

Family Member Entity Information

Wake Forest[®] Baptist Health

eCOI
Conflict of Interest Office: (336) 716-9300 / coioffice@wakehealth.edu

Edit: Disclosure - FI00002174

You Are Here: [Annual Disclosure Certificatio...](#) > [Disclosure FI00002174 for Marv...](#)

<< Back Save | Exit | Hide/Show Errors | Print... | Jump To: - General Information Family - Continue >>

Disclosure for Marvin Fernfeather : Family Member Entity Information
Baxter Healthcare

1. * What type of interest does your family member have with the outside entity?

Relationship

Owner, founder, equity (shares / stocks)

Board of directors, company officer, or executive management

Employee

Intellectual Property Rights (license / royalties)

Other

<< Back Save | Exit | Hide/Show Errors | Print... | Jump To: - General Information Family - Continue >>

This page shows if you selected family member.

Remember: Only report a family member's outside relationship if you know that the entity does business with WFBH or the entity is involved in your research.

Disclosure Summary

Disclosure for Marvin Fernfeather in Baxter Healthcare: Disclosure Summary

| Compensation Type | Dollar Value |
|--|-------------------|
| Owner, founder, equity (shares) | |
| Consulting, advisory boards and speaking | \$5,000.00 |
| Editorial | |
| Intellectual property rights | |
| Board of directors, company officer, executive mgmt. | |
| Employee | |
| Unrestricted Gifts | |
| Fellowship | |
| Total Value | \$5,000.00 |
| Total Days Previous Year | 5 |
| Total Days Current Year | 5 |

Review the disclosure summary for the outside relationship you have reported with each entity. Then click "Finish" at the top or bottom right.

Entity Details

Wake Forest[®] Baptist Health **eCOI** Conflict of Interest Office: (336) 716-9300 / coloffice@wakehealth.edu

Edit: Disclosure Certification - DC00022421

You Are Here: Annual Disclosure Certification...

<< Back Save | Exit | Hide/Show Errors | Print... | Jump To: Entity Details >> Continue >>

Annual Certification for Marvin Fernfeather : Entity Details

Reminder Only - Enter your 2019 Annual Disclosure:

Entity Type(s)
Baxter Healthcare Consulting, advisory boards, or speaking activities

If you have another new entity to report, click here

How to Add Entities to your Annual Disclosure:

Click the "Add Entity" button to report a relationship for this annual disclosure.

Add Entity

DID YOU REMEMBER ALL ENTITIES FOR THIS ANNUAL DISCLOSURE?

Review this list for accuracy before you continue. The Edit button on the left column allows you to revise details.

| View/Edit | Entities | Relationships | Disc Types (Self) | Value (self) | Disc Types (Family) | Value (family) | Last Updated | Remove |
|-----------|-------------------|---------------|---|--------------|---------------------|----------------|-------------------|--------|
| | Baxter Healthcare | Self | Consulting, advisory boards, or speaking activities | \$5,000.00 | none specified | | 4/2/2019 10:56 AM | |

If you have no more relationships with outside entities to report, click "Continue" at the top or bottom of the page.

<< Back Continue >>

Hide/Show Errors



eCOI

Conflict of Interest Office: (336) 716-9300 / coioffice@wakehealth.edu

Edit: Disclosure Certification - DC00022421

You Are Here: Annual Disclosure Certificatio...

<< Back

Save | Exit | [Hide/Show Errors](#) | Print... | Jump To:

Continue >>

Annual Certification for Marvin Fernfeather

Click the "[Hide/Show Errors](#)" link above to review your disclosure and verify all required content has been completed

- A window will appear below to display any missing information and a link (**Jump To**) to the page where it can be found
- The refresh button may be used to update the error list
- If no errors are detected you can continue to the final page and submit your Annual Disclosure

<< Back

Save | Exit | [Hide/Show Errors](#) | Print... | Jump To:

Continue >>

Assurance and Certification

Wake Forest®
Baptist Health

eCOI
Conflict of Interest Office (950) 734-3333 | eci@wakehealth.edu

Edit: Disclosure Certification - DC00022421

You Are Here: Annual Disclosure Certificatio...

<< Back Save | Exit | Hide/Show Errors | Print... | Jump To: Assurance and Certification ▾ Finish

If you are waiting for the addition of a missing entity, save your work but do NOT proceed with this page.

Annual Certification for Marvin Fernfeather : Assurance and Certification

- I hereby acknowledge that I have read and understand the WFBMC Conflict of Commitment and Conflict of Interest Policy
- I affirm that the information provided is to the best of my knowledge true and complete and does not misstate any facts.
- I will provide any additional information as requested by the Conflict of Interest Office.
- I agree to cooperate in the development of any needed *Management Plan* as required per the Federal Regulations to manage, reduce, or eliminate existing conflicts of interest related to my research. I agree to comply with the terms and conditions contained in any *Management Plan*.

* Check Yes to confirm that you understand and agree with the above statements, and all your disclosures are up-to-date. After choosing yes, click "Finish" to submit your disclosure.

Yes No [Clear](#)

After reading the bullet points above, check the "yes" box to confirm agreement.

Click "Finish" to submit your disclosure.

Save | Exit | Hide/Show Errors | Print... | Jump To: Assurance and Certification ▾ Finish

Disclosure Completion

Wake Forest[®] Baptist Health

eCOI
Conflict of Interest Office: (336) 716-9300 / coioffice@wakehealth.edu

Marvin Fernfeather | My Inbox | Logoff

Home Reports

COI > Annual Disclosure Certification for Marvin Fernfeather 2019

Actions

View Disclosures

Printer Version

Log Comment

Status: **Supervisor Review** Type: Annual Certification

Discloser: **Marvin Fernfeather** | Phone:

Summary History Disclosure Reviews

Notes to Discloser

Congratulations! You have successfully submitted your COI certification.
Your disclosures are currently under review. Please check your email account, listed in the system as bmaynard@wakehealth.edu, for any communication regarding the status of review. If further action is required, you will be notified at the above listed email address, and will have to log back into this system.

Summary

Snapshot:
Date Submitted: 4/2/2019

Routing Information

Discloser has a Significant Financial Interest: Yes
Discloser involved in Research: Yes
Discloser has Institutional Responsibilities: Yes
Needs Review: Yes

Disclosure Certifications - In Process

Note that you have successfully completed your annual COI disclosure!

Contact Information

- <http://intranet.wakehealth.edu/Departments/COI/>
- coioffice@wakehealth.edu
- (336)716-9300

