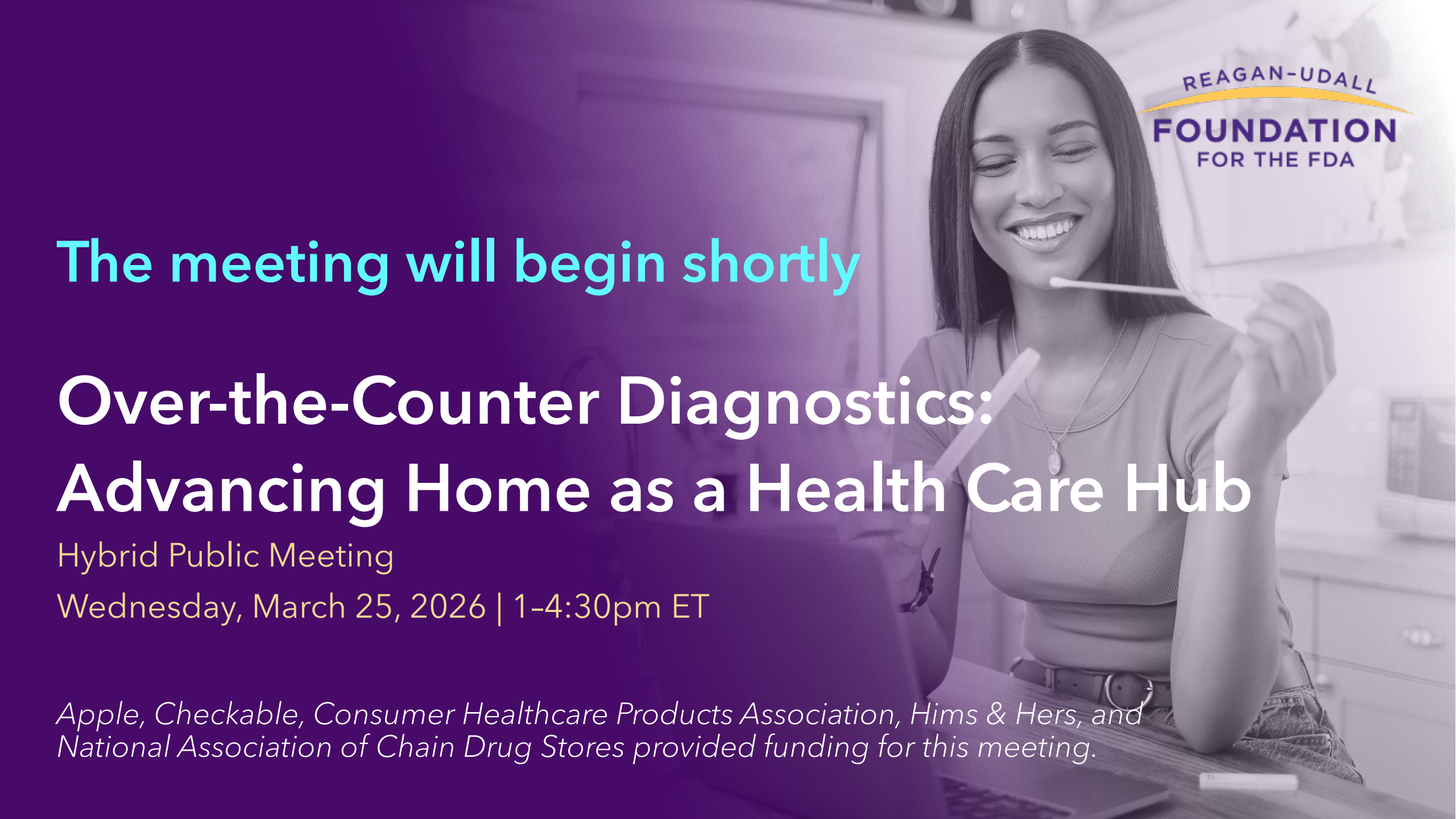


The meeting will begin shortly

Over-the-Counter Diagnostics: Advancing Home as a Health Care Hub

Hybrid Public Meeting

Wednesday, March 25, 2026 | 1–4:30pm ET

Apple, Checkable, Consumer Healthcare Products Association, Hims & Hers, and National Association of Chain Drug Stores provided funding for this meeting.

REAGAN-UDALL FOUNDATION FOR THE FDA

Welcome

Susan C. Winckler, RPh, Esq
Chief Executive Officer
Reagan-Udall Foundation for the FDA

Housekeeping

REAGAN-UDALL FOUNDATION FOR THE FDA

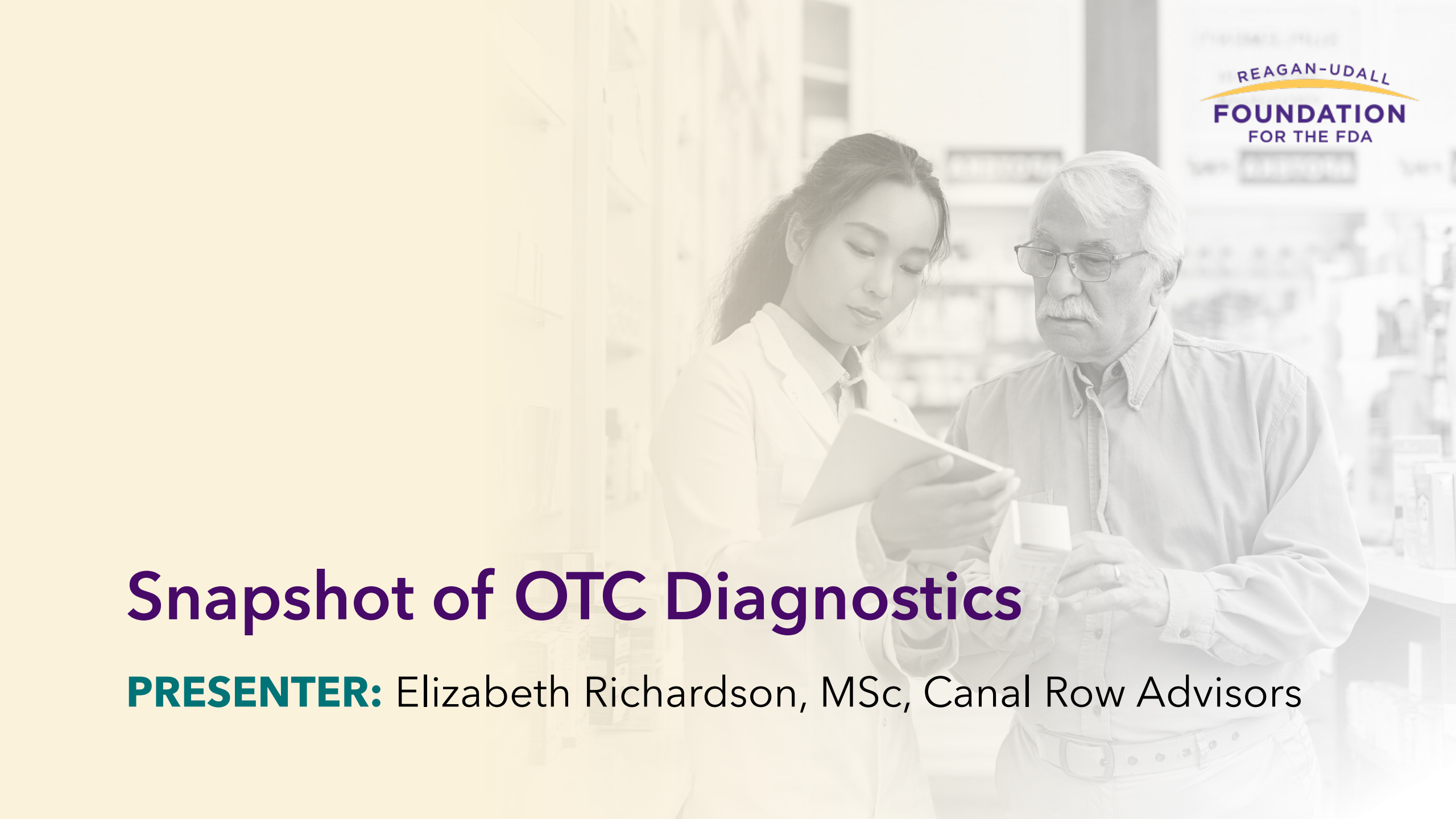
- Due to the meeting size, your microphone and video will remain off during the meeting
- Please share your questions using the Zoom Q&A function
- This public meeting is being recorded.
- The slides, transcript, and video will be available at www.ReaganUdall.org

Agenda

REAGAN-UDALL FOUNDATION FOR THE FDA

1pm	Welcome
1:05pm	Snapshot of OTC Diagnostics
1:20pm	Current Environment for OTC Diagnostics
2:30pm	Integrating OTC Diagnostics into Care Delivery
3:25pm	User Perspective
3:30pm	Next Generation OTC Diagnostics

All times listed in Eastern Time



Snapshot of OTC Diagnostics

PRESENTER: Elizabeth Richardson, MSc, Canal Row Advisors

A Snapshot of the OTC Diagnostics Landscape

Liz Richardson, Canal Row Advisors

Health care is increasingly shifting into the home

OTC diagnostic technologies are integral to this shift

58%

American adults reported using telehealth at some point in 2024 (Rock Health 2024)

72%

of Americans have taken an at-home test of some kind (Rock Health 2023)

53%

of Americans own at least one wearable or connected device (Rock Health 2024)

The Consumer Diagnostics Market is Evolving Rapidly

SENSOR-BASED

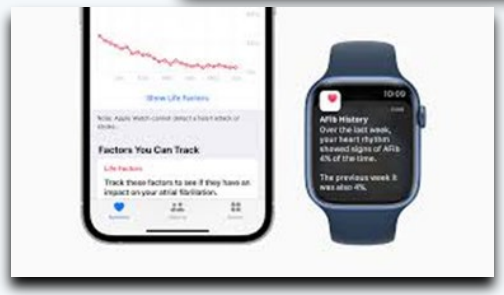
Continuous or episodic physiological data from wearables & biosensors

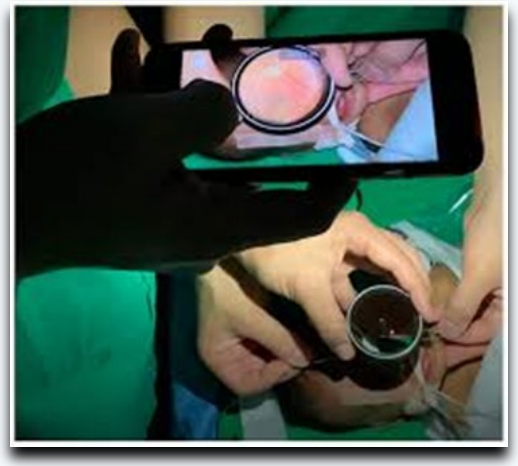
IN VITRO

Biochemical analysis of specimens (blood, urine, saliva) outside the body

IMAGING

Smartphone cameras & AI to capture and analyze visual clinical data





Comparing Testing Paradigms

	OTC *In Vitro* Diagnostic	At-Home Collection Test	Direct to Consumer Testing	Point of Care / CLIA Waived
Sample collection	Self-collection; instructions/platform designed for a lay user. *Typically self-pay.*	At home via test kit (stool, urine, oral fluid, fingerstick) and mailed to a partner lab. *Typically Rx and reimbursed.*	At home via kit or at a blood draw site. *Consumer orders directly, pays out of pocket.*	Collected by/under supervision of trained staff at a CLIA-waived facility. *Typically reimbursed by insurance.*
Analysis	At home	CLIA-Certified Lab (high-complexity)	CLIA-Certified Lab (high-complexity)	At the site of care (pharmacy, mobile unit, school, etc.)
Follow-up	⏱: *within minutes*	⏱ *days–weeks*	⏱ *days–weeks*	⏱ *within minutes*
	Consumer receives results directly and determines next	Results to consumer and/or ordering clinician. Clinician	Results returned digitally; Some offer optional clinician	Results delivered onsite. Follow-up typically available in the same

Snapshot of the OTC Dx market

Mature Core

- Pregnancy & fertility testing (*first OTC test cleared 1978*)
- Blood glucose monitoring *(biggest market share by value*)
- Drug-of-abuse testing
- Infectious disease (*COVID, flu, HIV*)

Rapidly Growing

- STI home testing (syphilis, chlamydia/gonorrhea)
- CGMs for wellness use
- Wearable cardiovascular monitoring
- Hormone panels & reproductive health

Emerging / Frontier

- Microfluidics & CRISPR-based diagnostics
- Smartphone-integrated spectroscopy
- AI/LLM interpretation layer

A Large Overall Market…

~$50–60B

estimated global consumer diagnostics market (2024)*

OTC test kits + diagnostic wearables

Directional estimate combining multiple market research sources

…DOMINATED BY A FEW WELL-ESTABLISHED CATEGORIES

Blood glucose

Test strips, meters & CGM — decades-old category, commodity scale

Infectious disease

COVID, flu, RSV, HIV, etc.—largely lateral flow tests

Cardiac wearables

ECG/AFib, pulse ox, BP — clinically validated consumer devices

All other

Pregnancy, urinalysis, cholesterol, drug screening & more

Segment proportions are directional / illustrative.

COVID Changed Expectations Permanently

78×
Telehealth surge in April 2020 (McKinsey)

38×
Stabilized level by early 2021 vs. pre-pandemic baseline

40%
Americans planned to continue telehealth (up from 11% pre-COVID)

66%
Consumers were willing to share data with a provider (Rock Health 2024)

Behavioral Legacy

72% of respondents report prior at-home test use (Rock Health 2023) — but **64%** exclusively took COVID tests, signaling room for ongoing education

71.4% of physicians report using telehealth in their practices weekly, up from 25.1% in 2018 (AMA 2024)

What Consumers Value in At-Home Diagnostics

Convenience & Speed

Test when and where desired; results in minutes; no appointment needed; smartphone integration

Accuracy & Trust

FDA clearance matters to consumers; brand recognition plays a role; COVID testing built real-world confidence in lateral flow format

Affordability

Price is a key barrier; free government programs (COVIDTests.gov) drove dramatically higher uptake

Privacy & Discretion

Critical for stigmatized conditions (HIV, STIs, mental health); home testing reduces those barriers

Integration with Care

Consumers want results to connect to follow-up — telehealth, prescriptions, referrals (NIH Home Test to Treat model)

Data Privacy & Control

Growing wariness: self-reported willingness to share with health tech companies fell from 25% in 2020 to 14% in 2023 (Rock Health)

Barriers—and opportunities—in OTC diagnostics development

The Friction

- Regulatory hurdles and gaps can be difficult to navigate
- Reimbursement challenges persist
- Digital access growing but unevenly distributed
- OTC products not well-integrated into care delivery

The Momentum

- FDA and CMS policy evolving (ACNU, 2026 wellness guidance, TEMPO, ACCESS)
- Consumer interest and demand remains high
- New technologies under development offer significant promise to address unmet need

The market is evolving rapidly.
Policy is moving.
Consumer expectations are high.

What does the path forward look like?

REAGAN-UDALL FOUNDATION FOR THE FDA

Current Environment for OTC Diagnostics

PRESENTER:
Courtney Lias, PhD
U.S. Food and Drug Administration

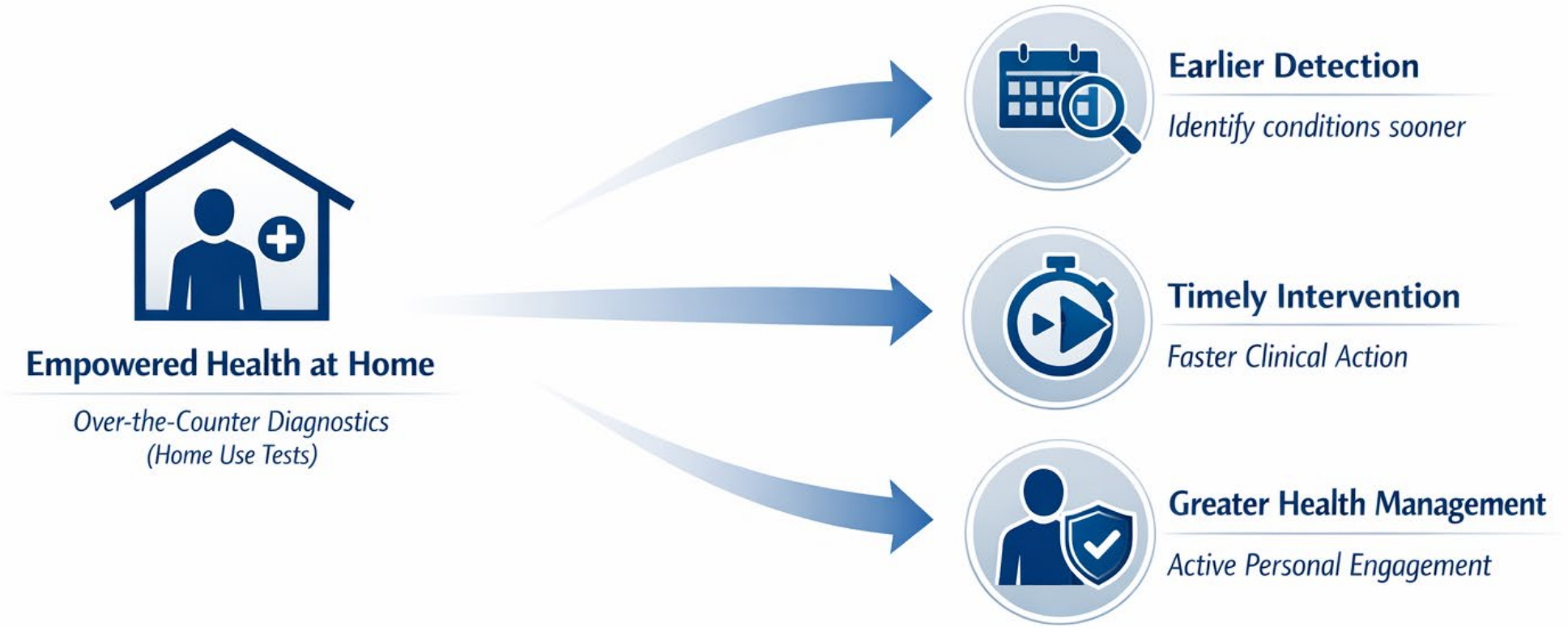
Over-the-Counter Diagnostics: FDA Perspectives

Over-the-Counter Diagnostics:
Advancing Home as a Health Care Hub

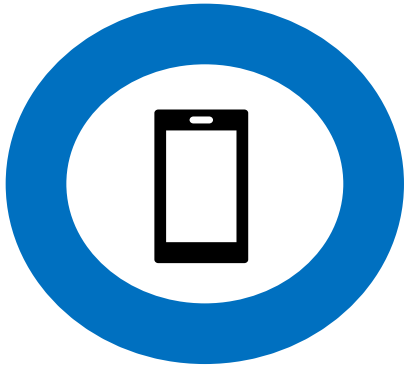
March 25, 2026

Courtney H. Lias, Ph.D.
Office Director
OHT7: Office of In Vitro Diagnostics
Office of Product Evaluation and Quality
CDRH | Food and Drug Administration

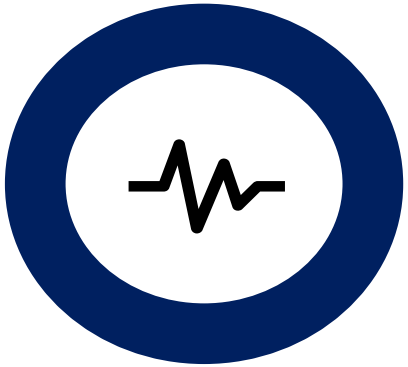
Home Use Tests



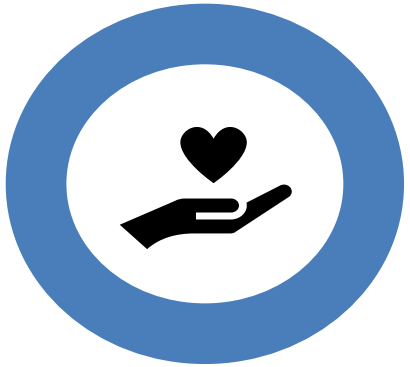
Growing shift toward OTC availability for diagnostics & wearables



Increasing comfort with **self-monitoring**

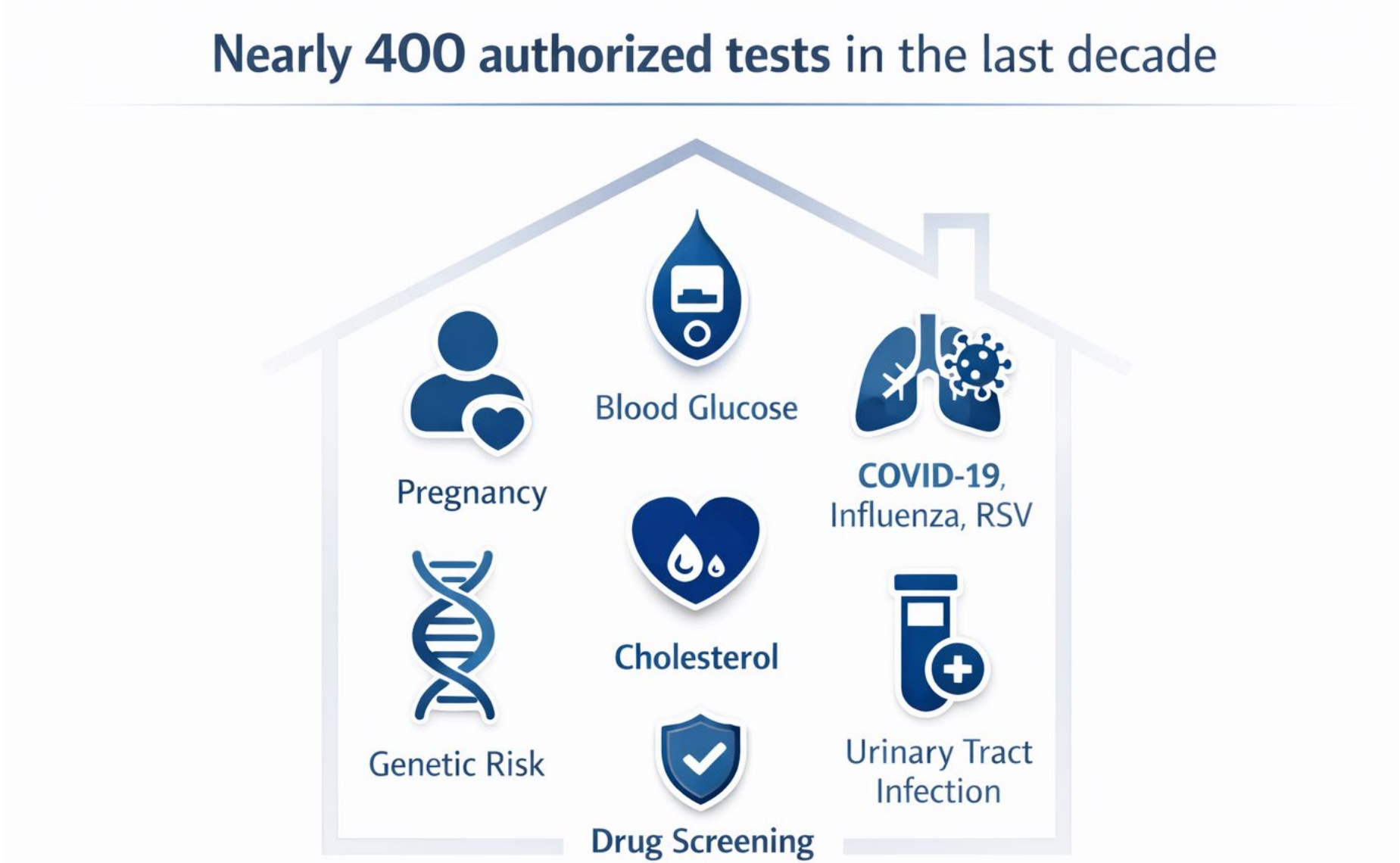


Desire for **real-time health data**

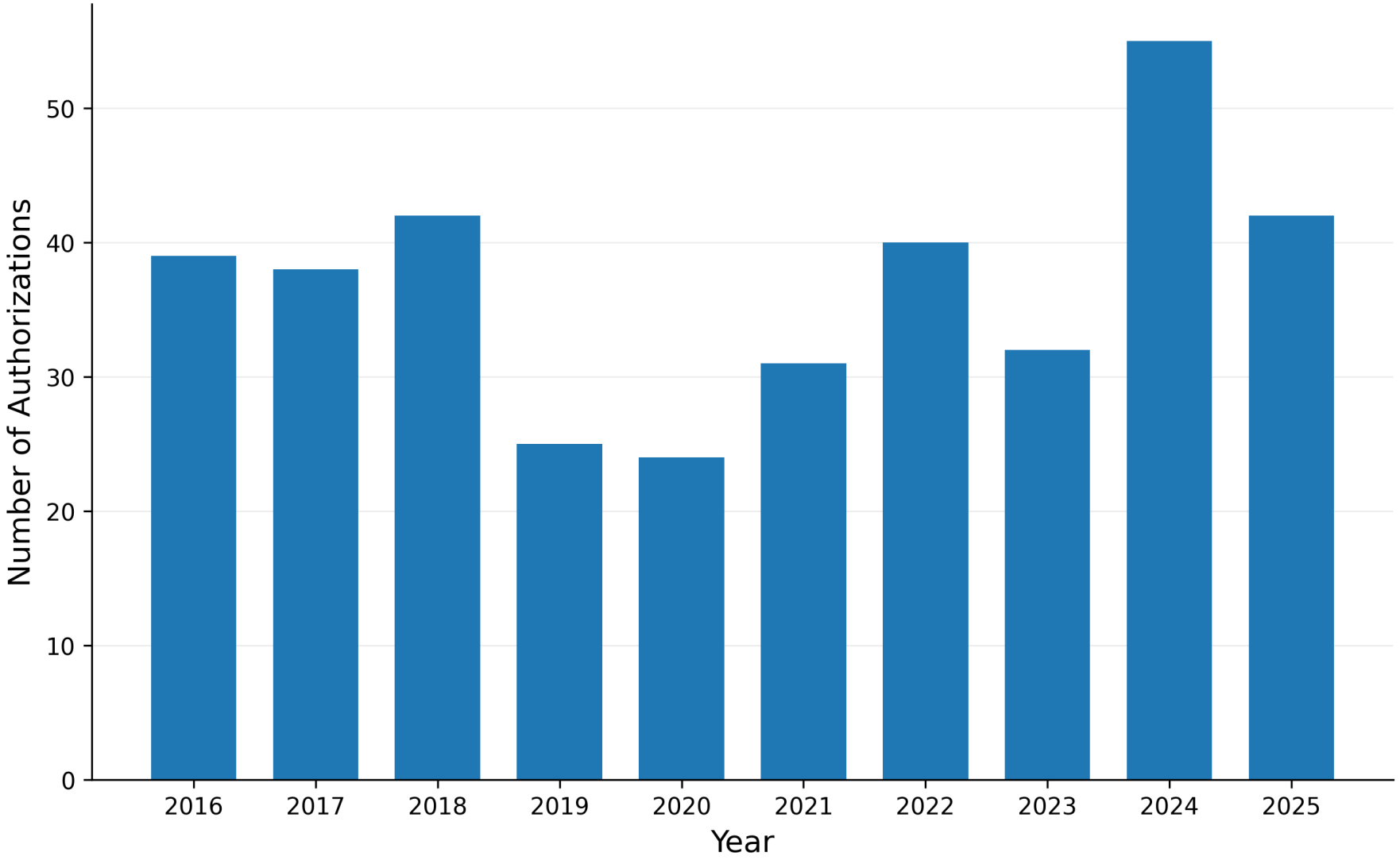


Stronger consumer focus on **prevention & wellness**

Growing shift toward OTC availability for diagnostics & wearables



Home Use Test Authorizations



Infectious Disease Testing at Home

50+

COVID-19 Tests

~20

Multianalyte Respiratory Panels

(Flu, RSV, etc.)

Growing availability of tests for HIV, UTIs, and STIs

Usability

- Accessible packaging for arthritis or limited dexterity
- Easy-to-read results for users including those with color blindness
- Simple, lay language instructions

Robustness

- Withstands drops and rough handling
- Functions in humid or poorly lit areas
- Labeling withstands wear and tear

Device Design

Environment

- Functions safely in hot, humid, or cold storage conditions
- Provides clear limits for temperature and humidity

Safety

- Reagents safe for household use
- Needle-safe or non-toxic
- Child-resistant packaging

Stability

- Shelf-life suits retail and supply chain logistics
- Clear instructions on expiration date

Can I break it?

IF

Insufficient sample

THEN

Error message:
"Insufficient Sample"

IF

Test outside temperature range

THEN

Warning:
Check Temperature

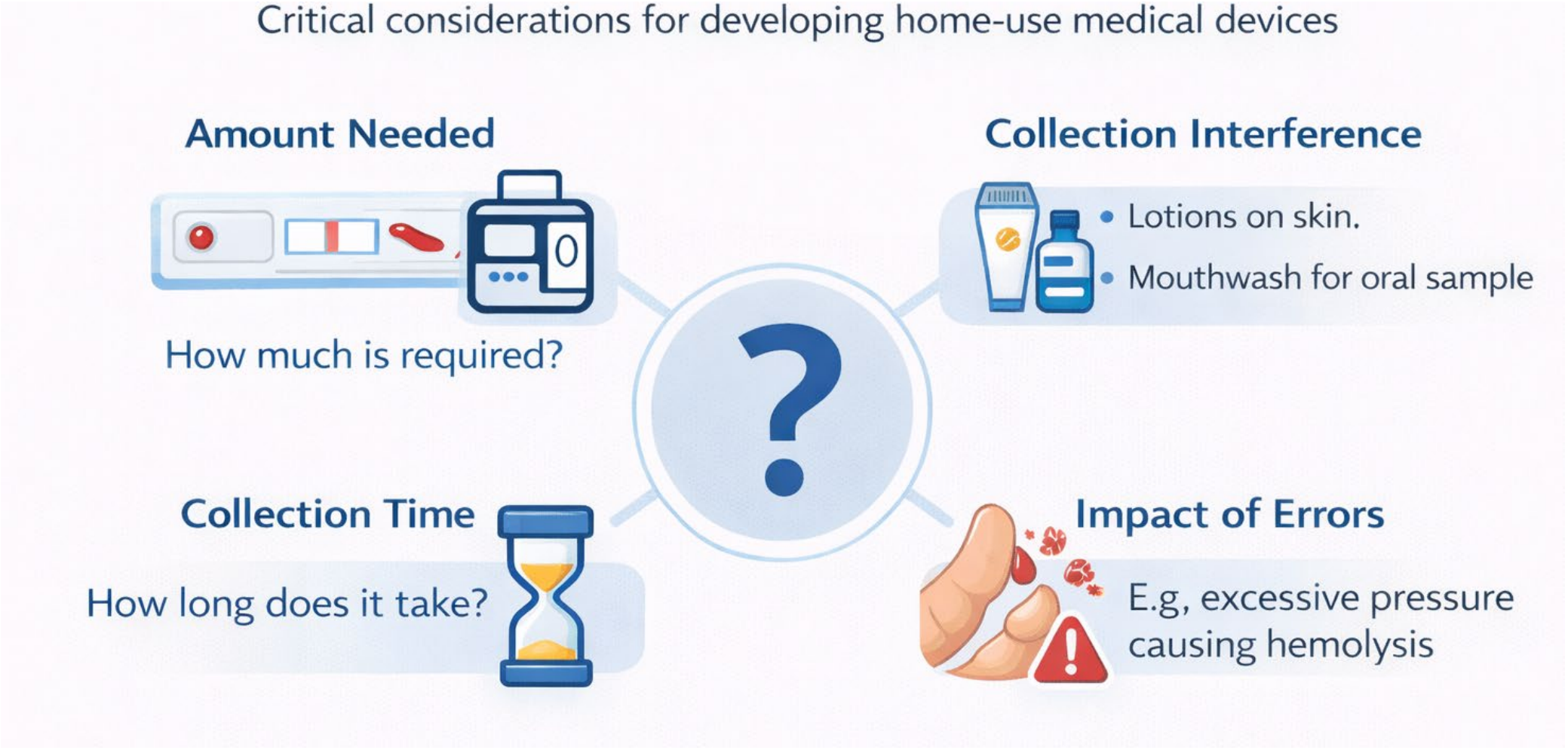
IF

Control line is missing

THEN

Result =
Invalid

Home Use Specimens

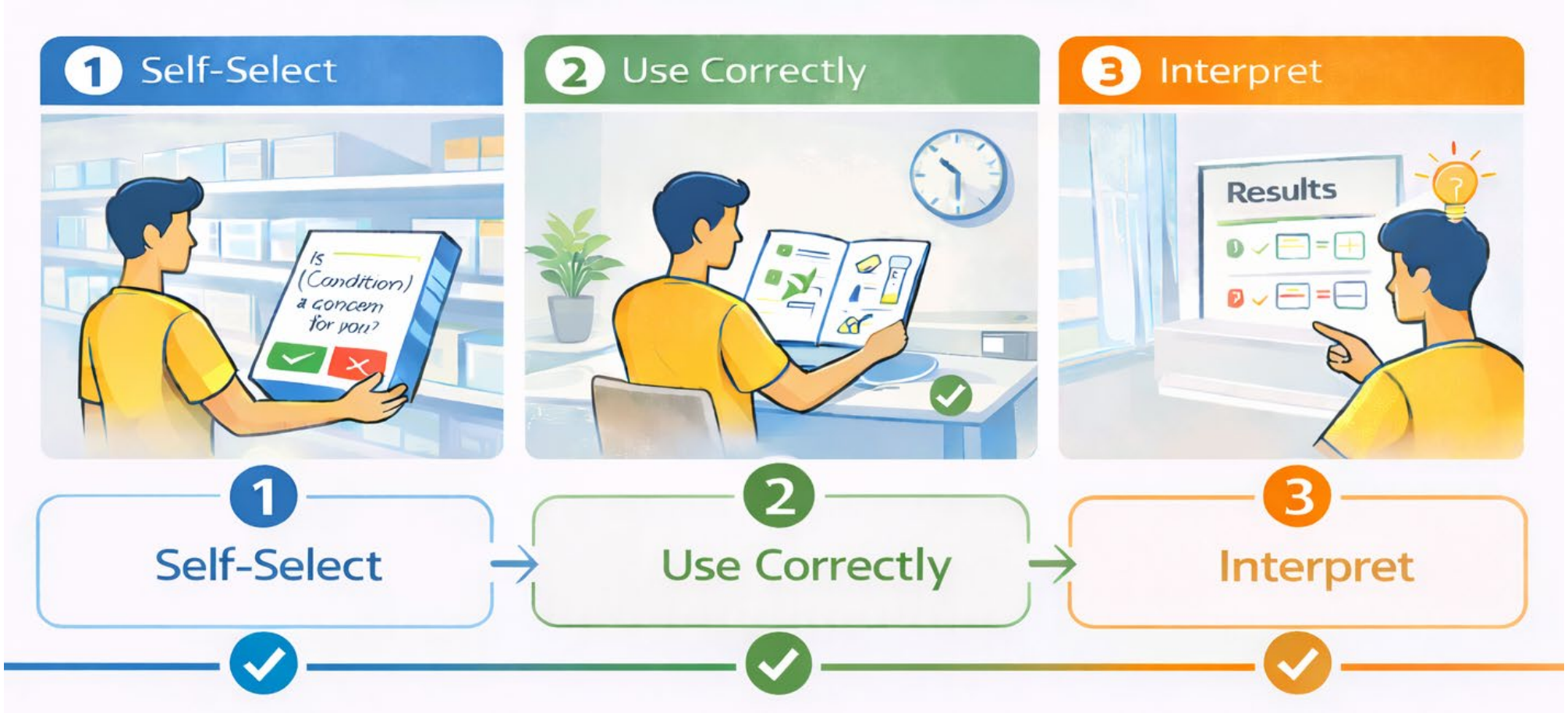


Which Specimen Type?

	Urine	Capillary Blood	Dried Blood Spot	Oral Fluid
				
	✔ Easier	⚠ Tricky	⚠ Moderate	✔ Easier
Ease of Collection	• Variable concentration	• Direct circulation access	• Good stability	• Lower concentration
Biomarker Availability	• Less stable	• Hemolysis risk	• Hemolysis risk	• Small volumes
Key Considerations	• Concentration varies	• Technique & hemolysis risk	• Add reconstitution step	• Volume & availability

Validating Home Use Tests

Home Use Labeling



Innovation

Guidances & Templates

Clarifying Expectations

ITAP Program

Independent Test Assessment Program

Industry Outreach

Conferences & Workshops

1-on-1 Engagement

Q-Submission Program

Federal Partnerships

Collaboration with NIH & CDC

Home Use Tests – Resources

- **Websites**:
  - Over-the-Counter (OTC) Medical Devices: Considerations for Device Manufacturers | FDA
  - Home Use Tests | FDA
  - OTC – Over The Counter database for IVD Home Use Lab Tests (Over The Counter) Tests
- **Guidance Documents:**
  - Design Considerations for Devices Intended for Home Use
  - Applying Human Factors and Usability Engineering to Medical Devices
  - Labeling Requirements - Over-The-Counter (Non-Prescription) Medical Devices.
  - Guidance on Medical Device Patient Labeling

U.S. FOOD & DRUG ADMINISTRATION

Thank You

REAGAN-UDALL FOUNDATION FOR THE FDA

Current Environment for OTC Diagnostics

PRESENTER:
Ramy Arnaout, MD
Beth Israel Deaconess Medical Center

Over-the-Counter Diagnostics:

Advancing Home as a Health-Care Hub

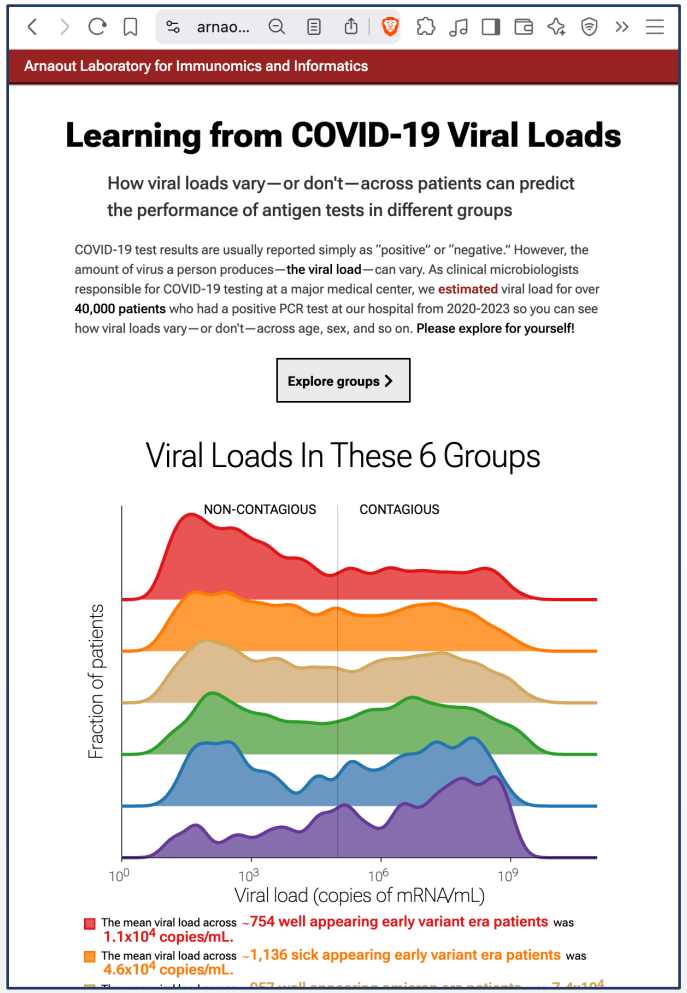
Ramy Arnaout, MD, DPhil

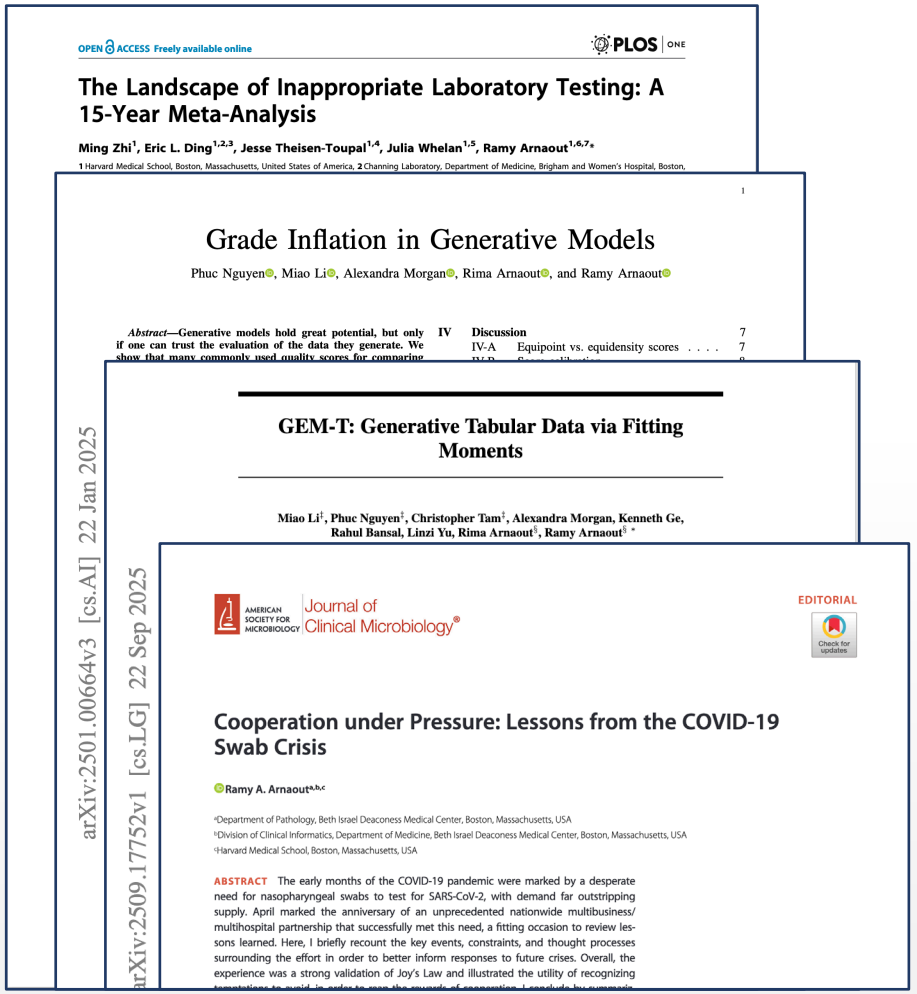
Associate Director, Clinical Microbiology, Beth Israel Deaconess Medical Center (BIDMC)

Associate Professor of Pathology, Harvard Medical School

Division of Clinical Informatics, Department of Medicine, BIDMC

About the Presenter





https://arnaoutlab.org/coviral ; J. Vacc. Vaccin. 2025

HARVARD MEDICAL SCHOOL
Beth Israel Lahey Health
Beth Israel Deaconess Medical Center

OTC Testing: Why It Matters

- Most health care is delivered **outside the hospital**
  - Early rule-in/rule-out → better, more cost-effective care
- **Common indications**
  - Infectious-disease (COVID-19, influenza, HIV)
  - Pregnancy & fertility
  - Glucose, cholesterol, drug-of-abuse screening
- **~500M–1B tests/year** in the US
  - Not counting glucometers
  - Compare to ~20B lab tests performed in the hospital
- **Results usually not stored**
  - Better for OTC data must become part of the patient's electronic health record (EHR)—not "dark matter" invisible to care teams

What Counts as an OTC Diagnostic—and What Doesn't

- **OTC diagnostics**
  - FDA-cleared, at-home tests that measure a biological analyte
  - Common specimen types: nasopharyngeal secretions (swabs), blood, urine
- **Not OTC diagnostics**
  - Wellness/health apps: track steps, heart-rate, sleep, activity
  - Anything requiring a prescription
- **Borderline/gray area/evolving**
  - Cardiac-related heart-rate & EKG monitors (yes)
  - Hand-held ultrasound (not presently)

How OTC Results Reach the EHR (When They Do)

- **Manual provider entry**
  - Patient tells clinician → clinician types result into EHR
- **Patient portal entry**
  - Patient logs into portal and manually records result
- ✓ **Image-capture & barcode scanning**
  - Photo or video of test + QR/barcode → app extracts result & pushes to EHR
- **Key challenge**
  - Each method requires activation energy from the patient
  - **Need friction-less UX for widespread data collection**

Why Harness OTC Data?

Caregivers

- Train AI-based decision support on anonymized OTC results
- Benchmark outcomes across regions to identify best-practice pathways
- Simulate rare-disease presentations with synthetic cases for education

Regulators

- Train AI-based CDS on anonymized patient histories including OTC results
- Benchmark outcomes across regions to identify best-practice pathways
- Simulate rare-disease presentations with synthetic cases for education

Test Developers

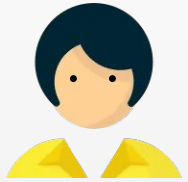
- Stress-test assay algorithms with synthetic specimens
- Perform *in silico* trials before development
- Benchmark against competitor data aggregated from public repositories

Academia

- Use large datasets for hypothesis generation
- Validate epidemiological models using synthetic cohorts that preserve privacy
- Publish reproducible studies without needing IRB-approved patient data

Payors

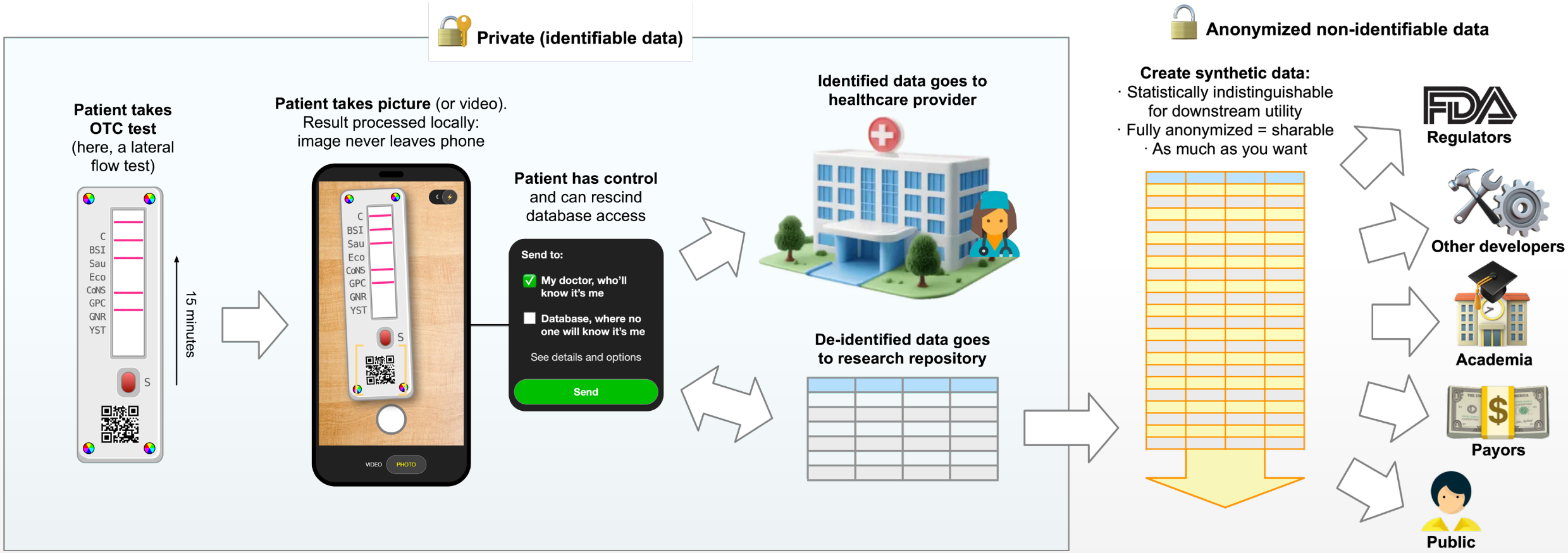
- Model disease incidence & test utilization to design value-based reimbursement policies
- Simulate cost-effectiveness of specific OTCs across demographic segments
- Detect fraud or misuse patterns



Patients

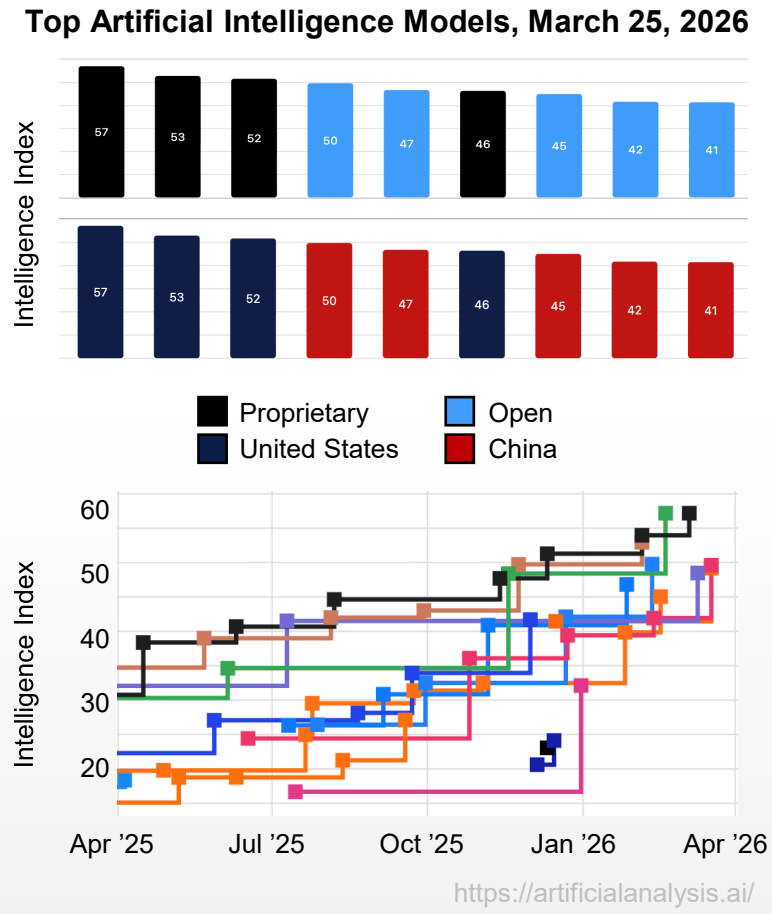
- Faster, more accurate diagnosis
- Personalized care pathways
- Lower health-care costs
- Privacy-preserving participation
- Empowerment & engagement

Vision: From OTC Test to Shareable Synthetic Data



Challenges/Obstacles to Overcome

- **Patient incentives & trust**
  - “Don’t make me think:” data collection must be effortless for the patient
  - Surveillance concerns → need transparent governance & consent
- **Technical collection hurdles**
  - Data-capture technology: barcode scan, local language-vision ML model, smartphone requirement
  - What data to record? Line intensity, time-to-pos., environmental conditions…
  - Synthetic data quality: how to benchmark, statistical vs. functional tests
- **Data-sharing infrastructure**
  - Who hosts the repository? Public vs. private governance model
  - Incentivizing developers to contribute data
  - Robust, standards-based anonymization pipelines



Closing Thoughts

- OTC diagnostics are a **large, untapped data source that can improve care,** research, regulation, and cost-effectiveness
- Local-processing + patient-controlled sharing can **address privacy concerns**
- **Synthetic data** bridges the gap between useful analytics and strict privacy mandates
- **Overcoming incentive, technical, and infrastructure challenges** will help unlock the potential of the home-as-a-health-hub model

Thank you

REAGAN-UDALL FOUNDATION FOR THE FDA

Current Environment for OTC Diagnostics

PANELISTS:

- Ramy Arnaout, MD, Beth Israel Deaconess Medical Center
- Julie Barnes, JD, Maverick Health Policy
- Courtney Lias, PhD, U.S. Food and Drug Administration
- Anita Nosratieh, PhD, Abbott
- Stacey Swartz, PharmD, Neighborhood Pharmacy of Del Ray

REAGAN-UDALL FOUNDATION FOR THE FDA

Integrating OTC Diagnostics into Care Delivery

PANELISTS:

- James Appleby, BSPharm, MPH, Gerontological Society of America
- Deborah Autor, JD, Hims & Hers
- Michael Umbleby, RPh, Walgreens
- John Whyte, MD, MPH, American Medical Association

User Perspective

SPEAKER: Tanya Altmann, MD, FAAP, Calabasas Pediatrics

REAGAN-UDALL FOUNDATION FOR THE FDA

Next Generation OTC Diagnostics

PRESENTER:
Paul Wardle, MA, MMath
Klick USA Inc.

Transforming Diagnostic & Medication Access

Next Generation OTC Diagnostics

DATE PRESENTED: March 25, 2026

CONTACT: **Paul Wardle** pwardle@klick.com

Disclaimer

The opinions shared today are mine They do not necessarily reflect the views of the FDA or my employer.

- Klick is a full-service life sciences commercialization partner. We support sponsors across prescription, nonprescription, devices, diagnostics and supplements.
- We also develop software as a medical device (SaMD) solutions in support of NDA applications for the new Additional Conditions for Nonprescription Use (ACNU) pathway

- Paul has led or supported many prescription-to-nonprescription NDA programs, including ACNU, across a wide range of therapeutic conditions
- Adjunct instructor at New York University in Statistics, Measurement and Analysis
- Masters degrees in Mathematics and Theoretical Physics from the University of Cambridge

Transforming medication access: A novel regulatory pathway for increasing direct-to-consumer access. RAPS JOURNAL OF REGULATORY AFFAIRS. 2026;1(1):25-36. Published online 12 January 2026. https://www.raps.org/news-and-articles/News-Articles/2026/1/Transforming-medication-access-A-novel-regulatory

JRA Journal of Regulatory Affairs

Transforming medication access: A novel regulatory pathway for increasing direct-to-consumer access

Paul Wardle, MA, MMath

Aleks Lyons, BaSc, BSc

This article examines how technology can be leveraged to expand direct-to-consumer access to medications under the US Food and Drug Administration's (FDA) new regulatory pathway, which took effect in May 2025. Driven by unmet patient medical needs, shortages of healthcare professionals (HCPs), and technological advancements that can help reduce barriers to treatment, the FDA has introduced a new incremental NDA pathway that allows sponsors to propose alternative mechanisms to support appropriate medication access without the supervision of an HCP legally authorized to prescribe or administer the drug. This pathway has important potential benefits for branded prescription medicines, generic manufacturers, consumer healthcare companies, and most importantly, consumers or patients.

Keywords – ACNU, consumer engagement, DTC, self-care, patient access, unmet needs

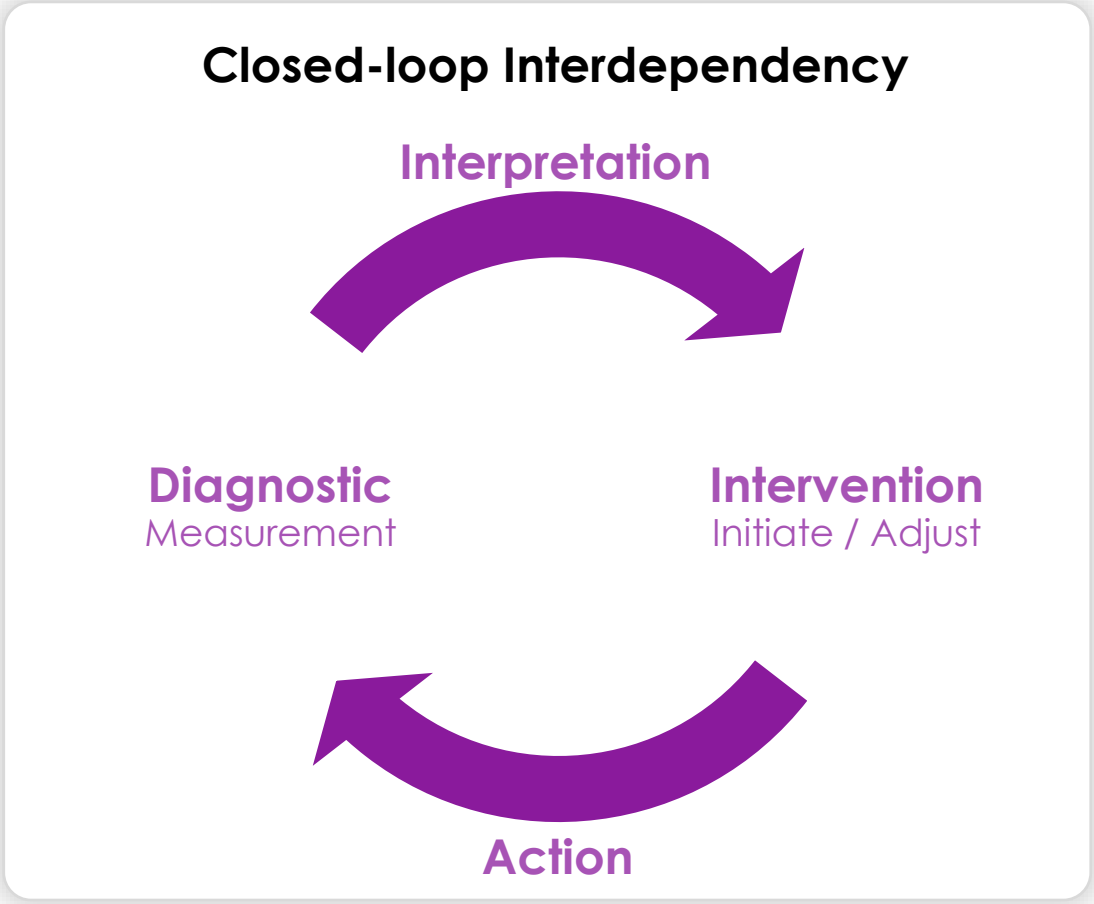
Background and introduction

Despite widespread medical insurance, significant portions of the US population remain undertreated or untreated for their medical conditions. In addition, individual circumstances can result in a multitude of barriers to treatment, including financial, geographical, physical, or psychological obstacles. Further, even if these barriers were overcome, there are insufficient HCPs to meet these unmet needs. To address these issues, effective May 2025 the FDA implemented a new regulatory pathway for new drug applications (NDAs) aimed at increasing medication access. The intent of this pathway is to encourage the development of innovative direct-to-consumer (DTC) access mechanisms that enable more convenient consumer access to medications while ensuring the safe and effective use of the drugs.

The new rule is also positioned to improve public health by expanding the types of drug products, including those for chronic conditions, that are accessible to qualified consumers. Any such mechanism approved under this ACNU [additional conditions for nonprescription use] NDA pathway must ensure appropriate access, where otherwise an HCP would have been necessary.[1] The distinction between prescription and nonprescription drugs is clear. When an HCP is necessary to guide the safe and effective selection and use of the product, it should be classified as a prescription drug; if an HCP is not necessary, the product should be approved as a nonprescription drug. With an ACNU drug, if, for example, a technology mechanism is used to ensure appropriate access to and safe and effective use of the product without an HCP prescription, then the ACNU drug would be nonprescription for those consumers who gain access with the mechanism or condition. When neither an HCP nor an alternative mechanism is necessary, and consumer labeling alone is sufficient to guide safe and effective drug selection and use, then the product may be approved as a

Effective Healthcare Requires Access

Optimizing diagnostic & medication accessibility



MANY FACTORS TO CONSIDER e.g.

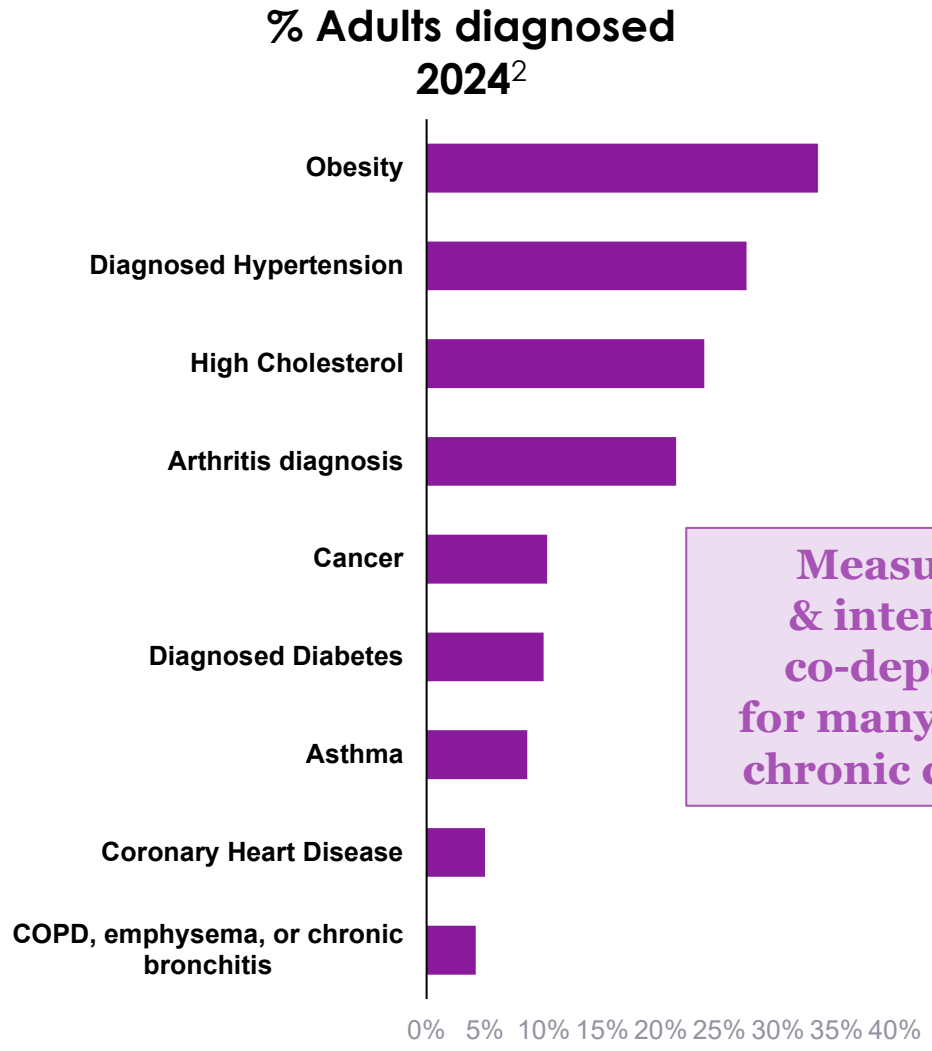
- In-person vs. remote
- Individual vs. provider supported
- Accuracy & accessibility
- Timeliness & convenience
- Diagnosis vs. adherence or adaptive care
- Comorbidities
- Integration across the system
- Privacy & control
- Reimbursement & affordability
- Self-monitoring

Our medical needs are extensive and varied

National Health Interview Survey (NHIS) data[1]

51.8%
of adults have at least one chronic disease[1]

27.2%
of US adults have multiple chronic conditions[1]



Measurement & intervention co-dependency for many prevalent chronic conditions

1. Boersma et al. Prev Chronic Dis 2020;17:200130
2. https://wwwn.cdc.gov/NHISDataQueryTool/SHS_adult/index.html

Despite effective treatments, there remain *large unmet needs*

illustrative

Gaps in diagnosis *e.g. diabetes[2] ~23%, hypertension[3] ~37%*

Patients not treating *e.g. cholesterol[1] ~45%, obesity[6] >50%*

Uncontrolled *e.g. hypertension[9] 77%, asthma[7] ~62%*

Non-adherence *e.g. hypertension[4], cholesterol[1] ~50%*

Delayed treatment *e.g. mental health[5] ~11 years*

Medication access *e.g. food allergies: current epinephrine Rx[8] 24%*

Sources:
1. JAMA Cardiol. 2019 Mar; 4(3): 206–213
2. https://www.cdc.gov/diabetes/php/data-research/
3. *American Journal of Hypertension*, Volume 34, Issue 9, September 2021, Pages 989–998
4. *BMJ 2008:* 336, 1114–1117; J Am Soc Hypertens. 2011; 5:56–63
5. https://www.nami.org/about-mental-illness/mental-health-by-the-numbers/
6. https://pubmed.ncbi.nlm.nih.gov/35928911/
7. https://pubmed.ncbi.nlm.nih.gov/38013060/
8. https://jamanetwork.com/journals/jamanetworkopen/fullarticle/2720064
9. https://www.cdc.gov/high-blood-pressure/data-research/facts-stats/

Barriers to healthcare are *real and widespread*

- Many social determinants of health[8]
- Healthcare access challenges often exacerbated by nature of employment[2]
- Caregivers experience increased barriers to healthcare access[5]

OPPORTUNITY COST OF GOING TO THE DOCTOR[1]

too high for many who have to choose between work and healthcare[3]

75 M

AMERICANS

live in an area with a **shortage of primary care doctors.**[2.] Over 41 Mmillion live in a pharmacy desert.[8]

INDIVIDUALS WITH PHYSICAL DISABILITIES[4]

have an 85% higher odds of having unmet prescription medication needs[1]

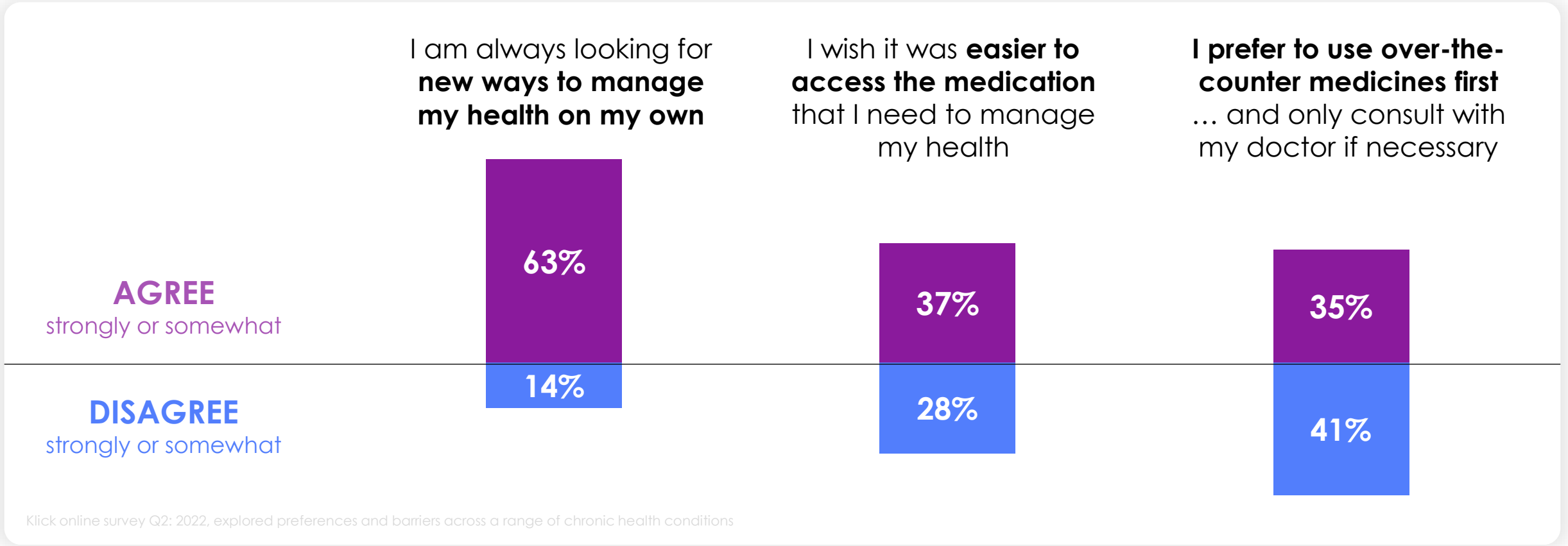
Delaying healthcare due to

procrastination or avoidance behaviors

is common[6,7]

1. https://www.healthsystemtracker.org/
2. https://www.hhs.gov
3. https://www.hsph.harvard.edu
4. https://www.sciencedirect.com
5. https://psycnet.apa.org
6. *Amercian College of Physicians*
7. https://www.ncbi.nlm.nih.gov
8. https://health.gov
9. https://assets.ctfassets.net/4f3rgqwzdznj/1XSl43l40KXMQiJUtl0ilq/ad0070ad4534f9b5776bc2c41091c321/GoodRx_Healthcare_Deserts_White_Paper.pdf

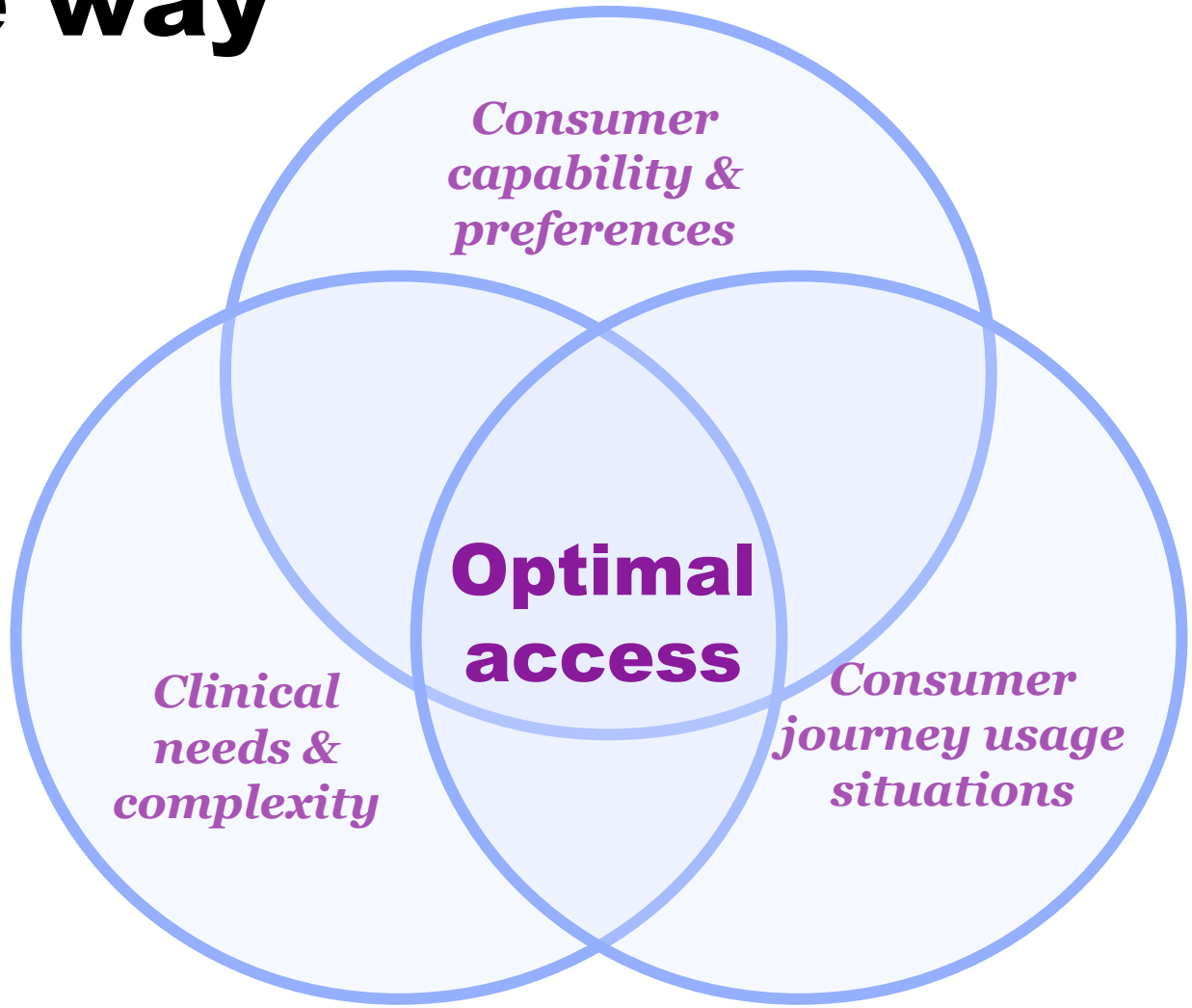
Consumers are interested in new ways *to manage their own health*



Klick online survey Q2: 2022, explored preferences and barriers across a range of chronic health conditions

Should we *always* get access the same way *every time?*

- **Historically prescription vs. nonprescription access has been defined by the product**
- **However, consumer needs for HCP interactions are situation dependent and often more nuanced**
  - When might an HCP be appropriate?
  - When might self-directed care be better?
  - How best to address affordability?



ACNU NDA – Increasing Medication Access

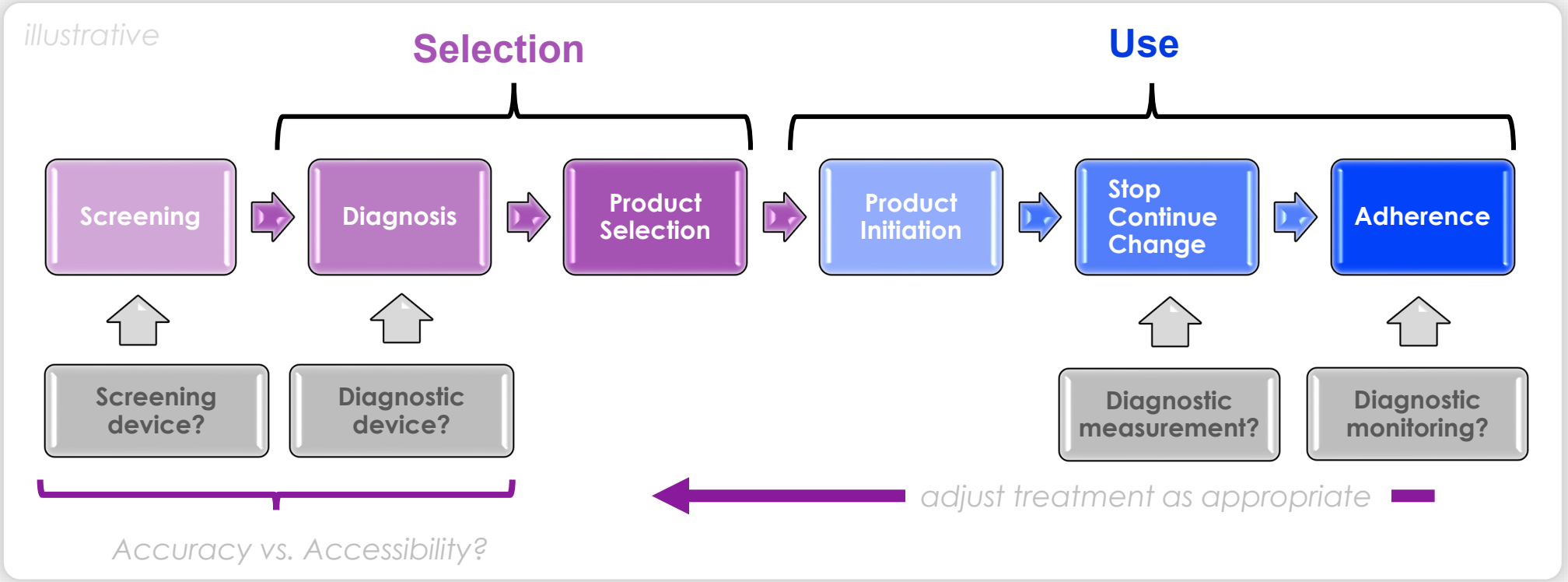
Additional Condition for Nonprescription Use

Enforced "criteria" to gain access

Nonprescription, because doctor is not required

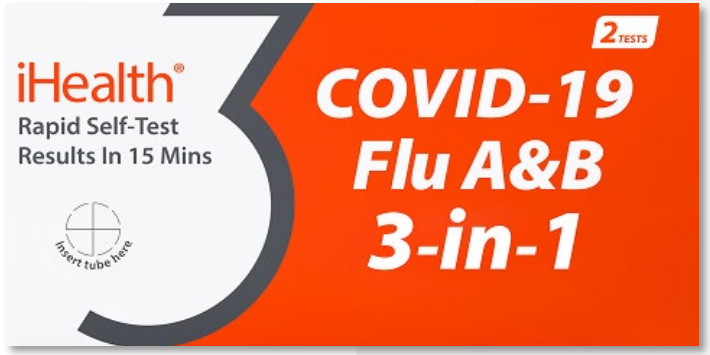
ACNU "condition" may necessary to support *selection, use or both*

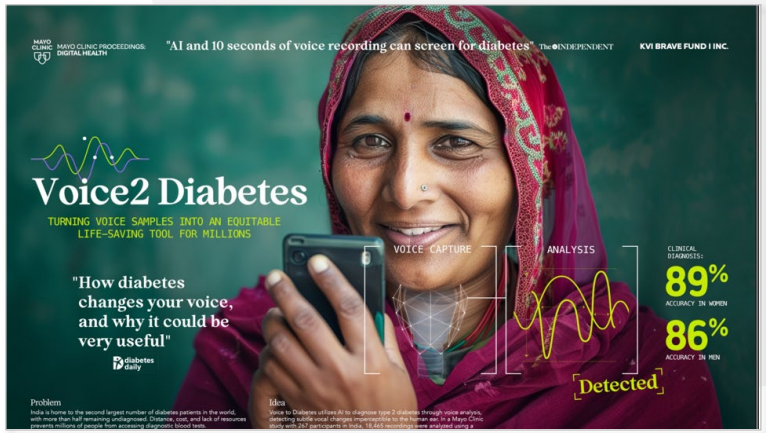
Diagnostic and Medication Interdependency

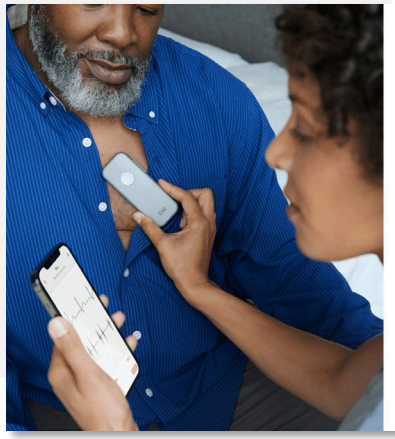


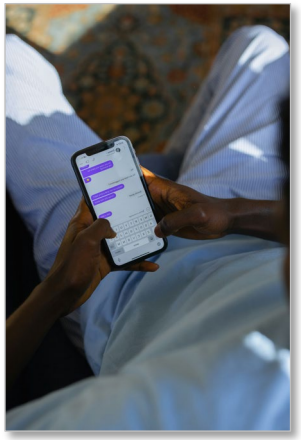
Reimagining Diagnostic Access & Solutions

- Screening, diagnostic, measurement
- Accessible, remote, non-invasive
- Enabling action including medication









There's something different here.

Paul A Wardle
SVP, Innovation Consulting

REAGAN-UDALL FOUNDATION FOR THE FDA

Next Generation OTC Diagnostics

PRESENTER:

Patty Post, BA
Checkable

checkable®

HOME STREP TEST

Checkable® Home Strep Test
*Currently Under FDA Review

36M Pharyngitis Visits a Year
26M Strep Tests Administered
5.2M Prescribed an Rx

Checkable ® Home Strep Test includes a backup test to ensure consumers can retest if needed or test a family member for added convenience and peace of mind.

Start to Finish in 10 Minutes

Clinically Validated Lateral Flow Technology

Designed for safe, guided use at-home

Checkable® Home Strep Test

+Not Shown Dual Chamber Reagent

checkable®

Checkable® is Making Throat Swabs Safe - Simple - Scalable

Instructions Built Into Packaging

checkable®

Considerations for Expanding Testing Closer to Home

Condition Suitability

Strong OTC candidates typically have

- ✔ Clear symptom presentation
- ✔ Established gold standard
- ✔ Straightforward interpretation
- ✔ Clear follow-up action

OTC testing kits can meaningfully expand access and improve public health - if we align on a balanced, benefit-focused regulatory pathway.

Patty Post
Founder & CEO

Regulatory Balance & Pathway Challenges

Are we focusing too much on risk, while minimizing public health benefits?

- ✔ A large majority of rapid OTC testing kits work exactly as they do in clinics and labs.
- ✔ Home testing expands access within our healthcare system, especially for those often missed.
- ✔ Benefits now clearly outweigh risk across specific conditions.
- ✔ Risk can be further mitigated with user-friendly design, intuitive labeling, and thoughtful stewardship.
- ✔ Pathway guidance must balance safety with access and impact, fostering regulatory clarity and guardrails for innovation.

REAGAN-UDALL FOUNDATION FOR THE FDA

Next Generation OTC Diagnostics

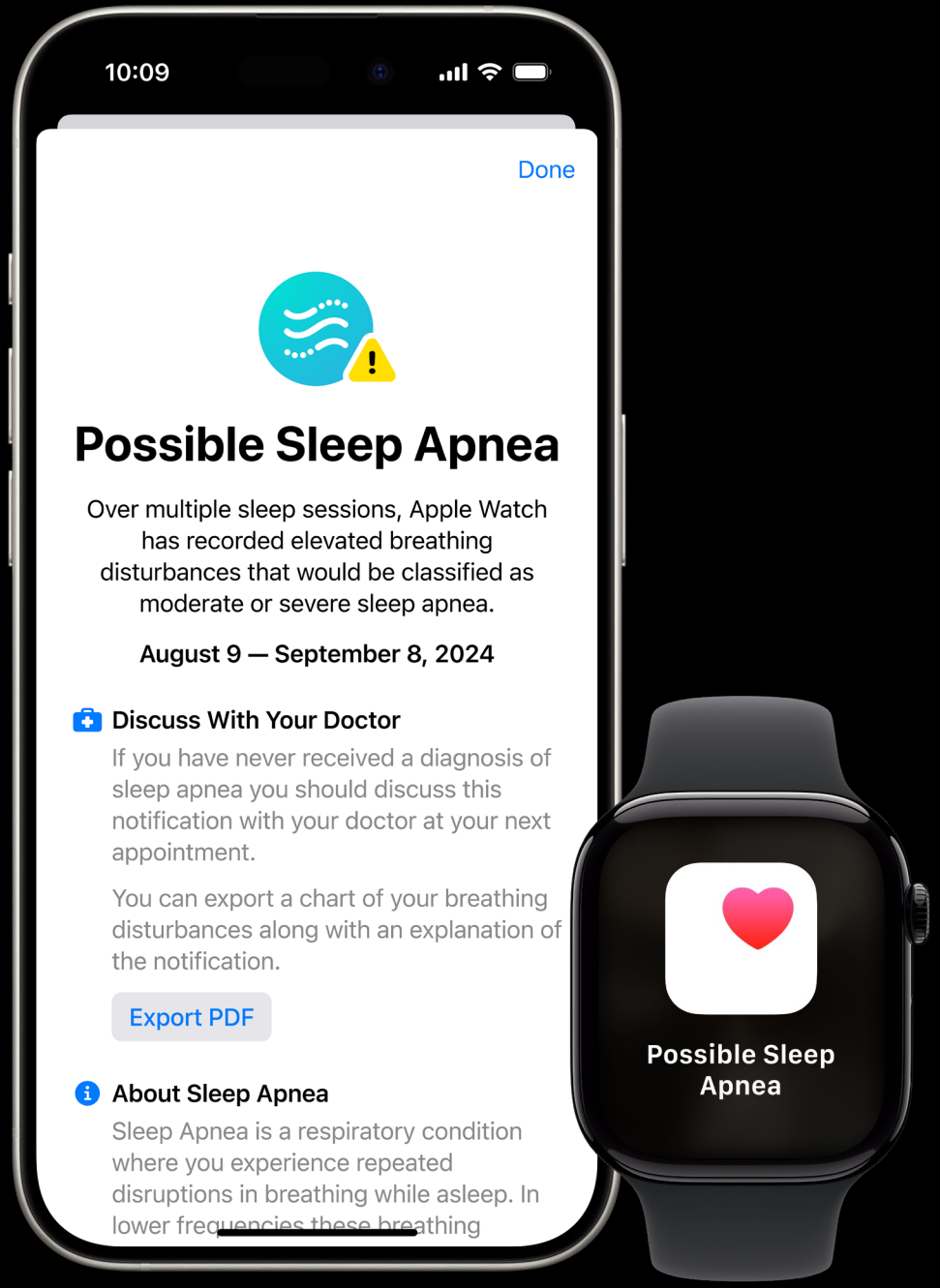
PRESENTER:

Sam Surette, BS
Apple

Opportunistic Detection

Intelligent insights from wearables

Sam Surette, Regulatory Affairs Manager, Apple



Opportunistic Detection

Detects signs of a chronic condition

Analyzes passive sensor data from consumer wearable

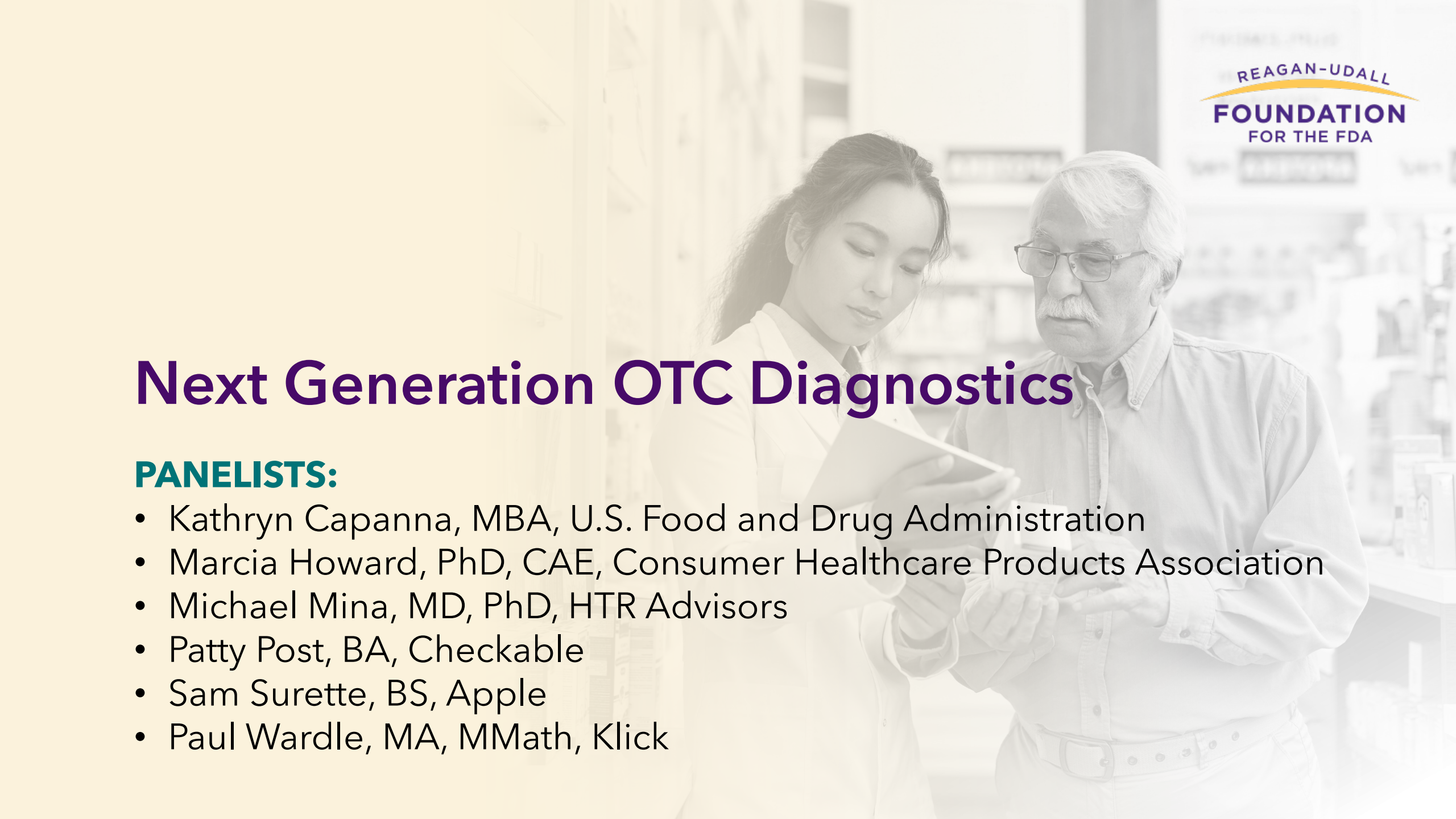
Returns a positive result only

Upstream from screening and diagnostics

Regulatory Considerations

Operating points prioritize high specificity

Human factors and post-market surveillance demonstrate safe use in OTC population for pre-screening of irregular rhythms, sleep apnea, and hypertension

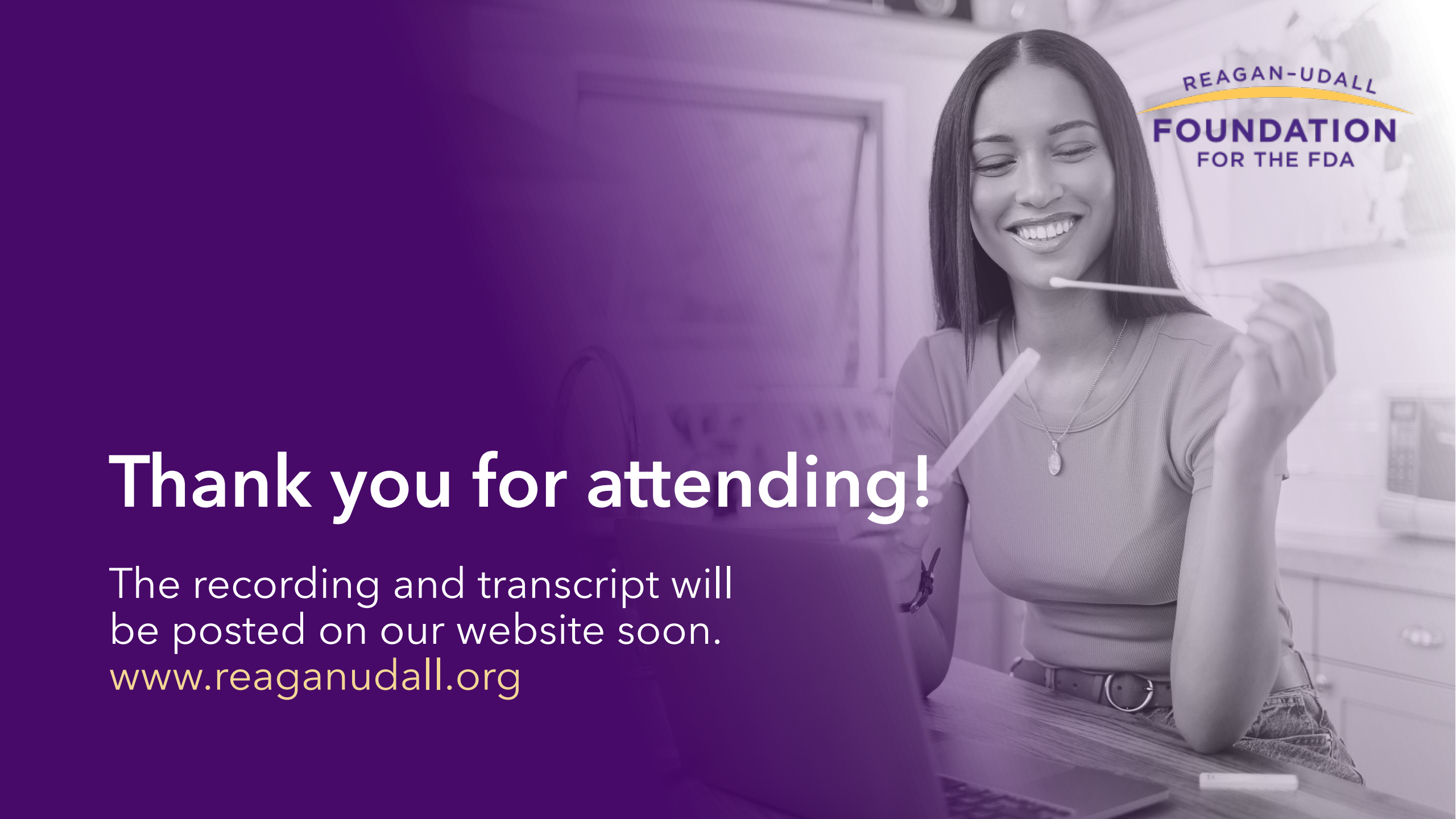


REAGAN-UDALL FOUNDATION FOR THE FDA

Next Generation OTC Diagnostics

PANELISTS:

- Kathryn Capanna, MBA, U.S. Food and Drug Administration
- Marcia Howard, PhD, CAE, Consumer Healthcare Products Association
- Michael Mina, MD, PhD, HTR Advisors
- Patty Post, BA, Checkable
- Sam Surette, BS, Apple
- Paul Wardle, MA, MMath, Klick



Thank you for attending!

The recording and transcript will be posted on our website soon.
www.reaganudall.org