

#### Instructions

The purpose of this form is to provide readers of your manuscript with information about your other interests that could influence how they receive and understand your work. The form is designed to be completed electronically and stored electronically. It contains programming that allows appropriate data display. Each author should submit a separate form and is responsible for the accuracy and completeness of the submitted information. The form is in four parts.

### Identifying information.

Enter your full name. If you are NOT the corresponding author please check the box "no" and a space to enter the name of the corresponding author in the space that appears. Provide the requested manuscript information. Double-check the manuscript number and enter it.

### 2. The work under consideration for publication.

This section asks for information about the work that you have submitted for publication. The time frame for this reporting is that of the work itself, from the initial conception and planning to the present. The requested information is about resources that you received, either directly or indirectly (via your institution), to enable you to complete the work. Checking "No" means that you did the work without receiving any financial support from any third party -- that is, the work was supported by funds from the same institution that pays your salary and that institution did not receive third-party funds with which to pay you. If you or your institution received funds from a third party to support the work, such as a government granting agency, charitable foundation or commercial sponsor, check "Yes". Then complete the appropriate boxes to indicate the type of support and whether the payment went to you, or to your institution, or both.

#### 3. Relevant financial activities outside the submitted work.

This section asks about your financial relationships with entities in the bio-medical arena that could be perceived to influence, or that give the appearance of potentially influencing, what you wrote in the submitted work. You should disclose interactions with ANY entity that could be considered broadly relevant to the work. For example, if your article is about testing an epidermal growth factor receptor (EGFR) antagonist in lung cancer, you should report all associations with entities pursuing diagnostic or therapeutic strategies in cancer in general, not just in the area of EGFR or lung cancer.

Report all sources of revenue paid (or promised to be paid) directly to you or your institution on your behalf over the 36 months prior to submission of the work. This should include all monies from sources with relevance to the submitted work, not just monies from the entity that sponsored the research. Please note that your interactions with the work's sponsor that are outside the submitted work should also be listed here. If there is any question, it is usually better to disclose a relationship than not to do so.

For grants you have received for work outside the submitted work, you should disclose support ONLY from entities that could be perceived to be affected financially by the published work, such as drug companies, or foundations supported by entities that could be perceived to have a financial stake in the outcome. Public funding sources, such as government agencies, charitable foundations or academic institutions, need not be disclosed. For example, if a government agency sponsored a study in which you have been involved and drugs were provided by a pharmaceutical company, you need only list the pharmaceutical company.

### Other relationships.

Use this section to report other relationships or activities that readers could perceive to have influenced, or that give the appearance of potentially influencing, what you wrote in the submitted work.



Section 1.	ldentifying Inform	nation				
1. Given Name (First Hélène	: Name)	2. Surname (Last Name) Cawston		3. Effective Date (07-August-2008) 16-May-2016		
4. Are you the corresponding author? Yes Vo			Corresponding Author's Name François Bourhis			
chemotherapy-inc	combination of netu luced nausea and voi fying Number (if you kr	miting in the UK	s a cost-effective interventi	on for the prevention of		

## Section 2. The Work Under Consideration for Publication

Did you or your institution at any time receive payment or services from a third party for any aspect of the submitted work (including but not limited to grants, data monitoring board, study design, manuscript preparation, statistical analysis, etc...)?

Complete each row by checking "No" or providing the requested information. If you have more than one relationship click the "Add" button to add a row. Excess rows can be removed by clicking the "X" button.

The Work Under Consideration (	for Pub	lication				
Туре	No	Money Paid to You	Money to Your Institution*	Name of Entity	Comments**	
1. Grant	<b>V</b>					×
						ADD
2. Consulting fee or honorarium			✓	Марі		×
						ADD
<ol><li>Support for travel to meetings for the study or other purposes</li></ol>			<b>✓</b>	Марі		×
						ADD
<ol> <li>Fees for participation in review activities such as data monitoring boards, statistical analysis, end point committees, and the like</li> </ol>	<b>✓</b>					×
						ADD
<ol><li>Payment for writing or reviewing the manuscript</li></ol>			✓	Марі		×
						ADD
<ol><li>Provision of writing assistance, medicines, equipment, or administrative support</li></ol>	<b>✓</b>					×



The Work Under Consideration for Publication								
Money Money to Type No Paid Your Name of Entity Comments** to You Institution*								
						ADD		
7. Other	<b>✓</b>					×		
						ADD		

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Relevant financial activities out	Relevant financial activities outside the submitted work								
Type of Relationship (in alphabetical order)	No	Money Paid to You	Money to Your Institution*		Entity	Comments			
1. Board membership	<b>✓</b>						×		
							ADD		
2. Consultancy	1						×		
							ADD		
3. Employment			✓	Mapi			×		
							ADD		
4. Expert testimony	1						×		
							ADD		
5. Grants/grants pending	<b>✓</b>						X		
6. Payment for lectures including							ADD		
service on speakers bureaus	<b>✓</b>						×		
							ADD		
<ol><li>Payment for manuscript preparation</li></ol>	<b>✓</b>						×		

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<sup>\*\*</sup> Use this section to provide any needed explanation.



Type of Relationship (in alphabetical order)	No	Money Paid to You	Money to Your Institution*	Entity	Comments	
						A
<ol><li>Patents (planned, pending or issued)</li></ol>	$\checkmark$					
						A
9. Royalties	1					
						A
Payment for development of educational presentations	$\checkmark$					1
						A
1. Stock/stock options	✓					
						A
<ol> <li>Travel/accommodations/ meeting expenses unrelated to activities listed**</li> </ol>	<b>/</b>					
						A
Other (err on the side of full disclosure)	$\checkmark$					

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Hide All Table Rows Checked 'No'

SAVE

<sup>\*\*</sup> For example, if you report a consultancy above there is no need to report travel related to that consultancy on this line.



Section 1.	ldentifying Infor	mation	
1. Given Name (Fi François	rst Name)	2. Surname (Last Name) Bourhis	3. Effective Date (07-August-2008) 16-May-2016
4. Are you the cor	responding author?	✓ Yes No	
chemotherapy-i		4 10	ention for the prevention of

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Туре	No	Money Paid to You	Money to Your Institution*	Name of Entity	Comments**	
1. Grant	1					×
						ADD
2. Consulting fee or honorarium			✓	Марі		×
						ADD
<ol><li>Support for travel to meetings for the study or other purposes</li></ol>			<b>✓</b>	Марі		×
						ADD
<ol> <li>Fees for participation in review activities such as data monitoring boards, statistical analysis, end point committees, and the like</li> </ol>	<b>✓</b>					×
						ADD
<ol><li>Payment for writing or reviewing the manuscript</li></ol>			<b>✓</b>	Марі		×
						ADD
<ol> <li>Provision of writing assistance, medicines, equipment, or administrative support</li> </ol>	<b>✓</b>					×

Bourhis 2



The Work Under Consideration for Publication								
	Туре	No	Money Paid to You	Money to Your Institution*	Name of Entity	Comments**		
							ADD	
7. Other		$\checkmark$					×	
							ADD	

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Relevant financial activities out	Relevant financial activities outside the submitted work								
Type of Relationship (in alphabetical order)	No	Money Paid to You	Money to Your Institution*		Entity	Comments			
1. Board membership	<b>✓</b>						×		
							ADD		
2. Consultancy	1						×		
							ADD		
3. Employment			✓	Mapi			×		
							ADD		
4. Expert testimony	1						×		
							ADD		
5. Grants/grants pending	<b>✓</b>						X		
6. Payment for lectures including							ADD		
service on speakers bureaus	<b>✓</b>						×		
							ADD		
<ol><li>Payment for manuscript preparation</li></ol>	<b>✓</b>						×		

Bourhis 3

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Relevant financial activities outs	ide the	submit	ted work			
Type of Relationship (in alphabetical order)	No	Money Paid to You	Money to Your Institution*	Entity	Comments	
						ADD
<ol><li>Patents (planned, pending or issued)</li></ol>	<b>✓</b>					×
						ADD
9. Royalties	1					×
						ADD
Payment for development of educational presentations	<b>✓</b>					×
						ADD
11. Stock/stock options	<b>✓</b>					×
						ADD
12. Travel/accommodations/ meeting expenses unrelated to activities listed**	<b>✓</b>					×
						ADD
<ol><li>Other (err on the side of full disclosure)</li></ol>	<b>✓</b>					×
						ADD

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Hide All Table Rows Checked 'No'

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Bourhis 4

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Section 1.	Identifying Inform	nation		
1. Given Name (Fi Jennifer	rst Name)	2. Surname (Last Name) Eriksson		3. Effective Date (07-August-2008) 12-May-2016
4. Are you the cor	responding author?	Yes Vo	Corresponding Author's Na François Bourhis	me
chemotherapy-i		miting in the UK	s a cost-effective interventi	on for the prevention of

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The Work Under Consideration (	or Pub	lication				
Туре	No	Money Paid to You	Money to Your Institution*	Name of Entity	Comments**	
1. Grant	<b>✓</b>					×
						ADD
2. Consulting fee or honorarium			✓	Марі		×
						ADD
<ol><li>Support for travel to meetings for the study or other purposes</li></ol>			<b>✓</b>	Марі		×
						ADD
<ol> <li>Fees for participation in review activities such as data monitoring boards, statistical analysis, end point committees, and the like</li> </ol>	<b>✓</b>					×
						ADD
<ol><li>Payment for writing or reviewing the manuscript</li></ol>			✓	Марі		×
						ADD
<ol><li>Provision of writing assistance, medicines, equipment, or administrative support</li></ol>	<b>✓</b>					×

Eriksson 2



The Work Under Consideration for Publication									
Туре	Money Money to No Paid Your Name of Entity Comments** to You Institution*								
						ADD			
7. Other	<b>✓</b>					×			
						ADD			

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Relevant financial activities outside the submitted work									
Type of Relationship (in alphabetical order)	No	Money Paid to You	Money to Your Institution*		Entity	Comments			
1. Board membership	<b>✓</b>						×		
							ADD		
2. Consultancy	1						×		
							ADD		
3. Employment			✓	Mapi			×		
							ADD		
4. Expert testimony	1						×		
							ADD		
5. Grants/grants pending	<b>✓</b>						X		
6. Payment for lectures including							ADD		
service on speakers bureaus	<b>✓</b>						×		
							ADD		
<ol><li>Payment for manuscript preparation</li></ol>	<b>✓</b>						×		

Eriksson 3

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<sup>\*\*</sup> Use this section to provide any needed explanation.



Relevant financial activities outside the submitted work									
Type of Relationship (in alphabetical order)	No	Money Paid to You	Money to Your Institution*	Entity	Comments				
						ADD			
<ol><li>Patents (planned, pending or issued)</li></ol>	$\checkmark$					×			
						ADD			
9. Royalties	<b>✓</b>					×			
						ADD			
Payment for development of educational presentations	<b>✓</b>					×			
						ADD			
11. Stock/stock options	✓					×			
						ADD			
12. Travel/accommodations/ meeting expenses unrelated to activities listed**	<b>✓</b>					×			
						ADD			
<ol><li>Other (err on the side of full disclosure)</li></ol>	$\overline{\mathbf{A}}$					×			
						ADD			

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Hide All Table Rows Checked 'No'

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Section 1.	Identifying Inforn	nation		
1. Given Name (Fi Pierfrancesco	rst Name)	2. Surname (Last Name) Ruffo		3. Effective Date (07-August-2008) 12-May-2016
4. Are you the cor	responding author?	Yes 🗸 No	Corresponding Author's Na François Bourhis	me
5. Manuscript Title	e			
Cost-effectivene	ss of netupitant and pa	alonosetron in CINV in the	UK	
6. Manuscript Ide	ntifying Number (if you k	now it)		

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The Work Under Consideration for Publication									
Туре	No	Money Paid to You	Money to Your Institution*	Name of Entity	Comments**				
1. Grant	1					×			
						ADD			
2. Consulting fee or honorarium	<b>✓</b>					×			
						ADD			
<ol><li>Support for travel to meetings for the study or other purposes</li></ol>	<b>✓</b>					×			
						ADD			
<ol> <li>Fees for participation in review activities such as data monitoring boards, statistical analysis, end point committees, and the like</li> </ol>	<b>✓</b>					×			
						ADD			
<ol><li>Payment for writing or reviewing the manuscript</li></ol>	<b>✓</b>					×			
						ADD			
<ol> <li>Provision of writing assistance, medicines, equipment, or administrative support</li> </ol>	<b>✓</b>					×			

Ruffo 2



The Work Under Consideration for Publication									
Туре	Money Money to No Paid Your Name of Entity Comments** to You Institution*								
						ADD			
7. Other	<b>✓</b>					×			
						ADD			

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Relevant financial activities outside the submitted work									
Type of Relationship (in alphabetical order)	No	Money Paid to You	Money to Your Institution*	Entity	Comments				
1. Board membership	<b>✓</b>					×			
						ADD			
2. Consultancy	<b>✓</b>					×			
						ADD			
3. Employment		<b>√</b>		Helsinn HealthCare	Employee	×			
						ADD			
4. Expert testimony	1					×			
						ADD			
5. Grants/grants pending	<b>✓</b>					×			
						ADD			
<ol><li>Payment for lectures including service on speakers bureaus</li></ol>	<b>✓</b>					×			
						ADD			
<ol><li>Payment for manuscript preparation</li></ol>	<b>_</b>					×			

Ruffo 3

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Type of Relationship (in alphabetical order)	No	Money Paid to You	Money to Your Institution*	Entity	Comments	
. Patents (planned, pending or issued)	V					
9. Royalties	<b>√</b>					
D. Payment for development of educational presentations	<b>V</b>					
Stock/stock options	✓					
2. Travel/accommodations/ meeting expenses unrelated to activities listed**	<b>✓</b>					
3. Other (err on the side of full disclosure)	<b>✓</b>					

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Hide All Table Rows Checked 'No'

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Ruffo 4

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Section 1.	Identifying Inform	nation			
1. Given Name (Fi Paolo	rst Name)	2. Surname (Last Name) D'Agostino		3. Effective Date (07-August-2008) 12-May-2016	
4. Are you the cor	responding author?	Yes 🗸 No	Corresponding Author's Name François Bourhis		
5. Manuscript Title	e				
Cost-effectivene	ess of netupitant and p	alonosetron in CINV in the	UK		
6. Manuscript Ide	ntifying Number (if you k	now it)			

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The Work Under Consideration (	for Pub	lication				
Туре	No	Money Paid to You	Money to Your Institution*	Name of Entity	Comments**	
1. Grant	1					×
						ADD
2. Consulting fee or honorarium	<b>✓</b>					×
						ADD
<ol><li>Support for travel to meetings for the study or other purposes</li></ol>	<b>✓</b>					×
						ADD
<ol> <li>Fees for participation in review activities such as data monitoring boards, statistical analysis, end point committees, and the like</li> </ol>	<b>✓</b>					×
						ADD
<ol><li>Payment for writing or reviewing the manuscript</li></ol>	<b>✓</b>					×
						ADD
<ol><li>Provision of writing assistance, medicines, equipment, or administrative support</li></ol>	<b>✓</b>					×

D'Agostino 2



The Work Under Consideration for Publication										
	Туре	No	Money Paid to You	Money to Your Institution*	Name of Entity	Comments**				
							ADD			
7. Other		<b>✓</b>					×			
							ADD			

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Relevant financial activities out	Relevant financial activities outside the submitted work									
Type of Relationship (in alphabetical order)	No	Money Paid to You	Money to Your Institution*	Entity	Comments					
1. Board membership	<b>✓</b>			pe.		×				
						ADD				
2. Consultancy	<b>√</b>					×				
						ADD				
3. Employment		1		Helsinn HealthCare	Employee	×				
	-					ADD				
4. Expert testimony	1					×				
						ADD				
5. Grants/grants pending	<b>√</b>					X				
6 Daymont for lost was including						ADD				
<ol><li>Payment for lectures including service on speakers bureaus</li></ol>	<b>✓</b>					×				
						ADD				
<ol><li>Payment for manuscript preparation</li></ol>	<b>✓</b>					×				

D'Agostino 3

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						A
<ol><li>Patents (planned, pending or issued)</li></ol>	<b>✓</b>					
						A
9. Royalties	<b>√</b>					
						A
Payment for development of educational presentations	$\checkmark$					
						A
1. Stock/stock options	✓					
						A
<ol> <li>Travel/accommodations/ meeting expenses unrelated to activities listed**</li> </ol>	<b>/</b>					
						A
<ol><li>Other (err on the side of full disclosure)</li></ol>	$\checkmark$					

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SAVE

D'Agostino

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Section 1.	ldentifying Inforr	nation		
1. Given Name (Fi Marco	rst Name)	2. Surname (Last Name) Turini		3. Effective Date (07-August-2008) 12-May-2016
4. Are you the cor	responding author?	Yes 🗸 No	Corresponding Author's Na François Bourhis	me
5. Manuscript Title	e			
Cost-effectivene	ss of netupitant and p	alonosetron in CINV in the	UK	
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The Work Under Consideration (	for Pub	lication				
Туре	No	Money Paid to You	Money to Your Institution*	Name of Entity	Comments**	
1. Grant	1					×
						ADD
2. Consulting fee or honorarium	<b>✓</b>					×
						ADD
<ol><li>Support for travel to meetings for the study or other purposes</li></ol>	<b>✓</b>					×
						ADD
<ol> <li>Fees for participation in review activities such as data monitoring boards, statistical analysis, end point committees, and the like</li> </ol>	<b>✓</b>					×
						ADD
<ol><li>Payment for writing or reviewing the manuscript</li></ol>	<b>✓</b>					×
						ADD
<ol><li>Provision of writing assistance, medicines, equipment, or administrative support</li></ol>	<b>✓</b>					×

Turini 2



The Work Under Consideration for Publication									
Money Money to Type No Paid Your Name of Entity Comments** to You Institution*									
						ADD			
7. Other	1					×			
						ADD			

### Section 3. Relevant financial activities outside the submitted work.

Place a check in the appropriate boxes in the table to indicate whether you have financial relationships (regardless of amount of compensation) with entities as described in the instructions. Use one line for each entity; add as many lines as you need by clicking the "Add +" box. You should report relationships that were present during the 36 months prior to submission.

Complete each row by checking "No" or providing the requested information. If you have more than one relationship click the "Add" button to add a row. Excess rows can be removed by clicking the "X" button.

Relevant financial activities outside the submitted work								
Type of Relationship (in alphabetical order)	No	Money Paid to You	Money to Your Institution*	Entity	Comments			
1. Board membership	<b>✓</b>					×		
						ADD		
2. Consultancy	1					×		
						ADD		
3. Employment		1		Helsinn HealthCare	Employee	×		
						ADD		
4. Expert testimony	1					×		
						ADD		
5. Grants/grants pending	✓					×		
						ADD		
<ol><li>Payment for lectures including service on speakers bureaus</li></ol>	<b>✓</b>					×		
						ADD		
<ol><li>Payment for manuscript preparation</li></ol>	<b>/</b>					×		

Turini 3

<sup>\*</sup> This means money that your institution received for your efforts on this study.

<sup>\*\*</sup> Use this section to provide any needed explanation.



Relevant financial activities outside the submitted work							
Type of Relationship (in alphabetical order)	No	Money Paid to You	Money to Your Institution*	Entity	Comments		
						ADD	
<ol><li>Patents (planned, pending or issued)</li></ol>	$\checkmark$					×	
						ADD	
9. Royalties	<b>✓</b>					×	
						ADD	
Payment for development of educational presentations	<b>✓</b>					×	
						ADD	
11. Stock/stock options	✓					×	
						ADD	
12. Travel/accommodations/ meeting expenses unrelated to activities listed**	<b>✓</b>					×	
						ADD	
<ol><li>Other (err on the side of full disclosure)</li></ol>	$\overline{\mathbf{A}}$					×	
						ADD	

<sup>\*</sup> This means money that your institution received for your efforts.

## Section 4. Other relationships

Are there other relationships or activities that readers could perceive to have influenced, or that give the appearance of potentially influencing, what you wrote in the submitted work?

✓ No other relationships/conditions/circumstances that present a potential conflict of interest

Yes, the following relationships/conditions/circumstances are present (explain below):

At the time of manuscript acceptance, journals will ask authors to confirm and, if necessary, update their disclosure statements. On occasion, journals may ask authors to disclose further information about reported relationships.

Hide All Table Rows Checked 'No'

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Turini 4

<sup>\*\*</sup> For example, if you report a consultancy above there is no need to report travel related to that consultancy on this line.



Section 1. Identifying Infor	mation	
1. Given Name (First Name)  LUC  4. Are you the corresponding author?	2. Surname (Last Name) Schwartzberg  Yes No	3. Effective Date (07-August-2008)
5. Manuscript Title		
6. Manuscript Identifying Number (if you	know it)	:

## Section 2. The Work Under Consideration for Publication

Did you or your institution at any time receive payment or services from a third party for any aspect of the submitted work (including but not limited to grants, data monitoring board, study design, manuscript preparation, statistical analysis, etc...)?

Complete each row by checking "No" or providing the requested information. If you have more than one relationship click the "Add" button to add a row. Excess rows can be removed by clicking the "X" button.

The Work Under Consideration	i for Publ	***************************************				
Туре	No	Money Paid to You	Money to Your Institution*	Name of Entity	Comments**	
1. Grant			V	Helson	beswelf from f	- X≅ ADD
2. Consulting fee or honorarium				Helsmn	Commission of the commission o	X ADD
Support for travel to meetings fo the study or other purposes	r 🗹			AND THE RESERVE THE PROPERTY OF THE PROPERTY O		X
4. Fees for participation in review activities such as data monitoring boards, statistical analysis, end point committees, and the like						
5. Payment for writing or reviewing the manuscript						ADD × ADD
Provision of writing assistance,     medicines, equipment, or     administrative support						

The V	ork Under Consider	ation for Publication	8 2 28			
	Туре	Money No Paid to You	Money to Your Institution*	Name of Entity	Comments**	
						ADD
7. Oth	er			THE SE E MINISTER LEAGUE WITH THE PARTY OF T	THE PERSON NAMED IN COLUMN TWO IS NOT THE PERSON OF THE PE	×
E. Presidente d	en angul make emerili, thalibur in en en a		regione dell'i Controlle dell'i Chille	ELECTRONICS ENTERNAL COMMUNICATION CONTRACTOR	(was a second of the text of the second of t	1.50

#### Section 3. Relevant financial activities outside the submitted work.

Place a check in the appropriate boxes in the table to indicate whether you have financial relationships (regardless of amount of compensation) with entities as described in the instructions. Use one line for each entity; add as many lines as you need by clicking the "Add +" box. You should report relationships that were present during the 36 months prior to submission.

Complete each row by checking "No" or providing the requested information. If you have more than one relationship click the "Add" button to add a row. Excess rows can be removed by clicking the "X" button.

Relevant financial activities outside the submitted work									
Type of Relationship (in alphabetical order)	No	Money Paid to You	Money to Your Institution*	Entity	Comments				
1. Board membership		7 D				X			
2. Consultancy						ADD			
3. Employment					manda de como de como y commune de la como de	ADD × ADD			
4. Expert testimony						ADD			
5. Grants/grants pending						ADD			
6. Payment for lectures including service on speakers bureaus		<b>→</b>			5 15 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1				
7. Payment for manuscript preparation						ADD			

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<sup>\*\*</sup> Use this section to provide any needed explanation.



Hide All Table Rows Checked 'No'

Relevant financial activities out	ide the submitted work		
Type of Relationship (in alphabetical order)	Money Money to No Paid to Your You Institution*	Entity	Comments
8. Patents (planned, pending or issued)		construction is a second of the second of th	X ADD
9. Royalties			× ADD
Payment for development of educational presentations			X
11. Stock/stock options			X ADD
12. Travel/accommodations/ meeting expenses unrelated to activities listed**			X
13. Other (err on the side of full disclosure)		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	×
* This means money that your institution ** For example, if you report a consultance		related to that consultanc	y on this line.
Section 4. Other relations	nips		
Are there other relationships or active potentially influencing, what you wro		ave influenced, or that g	live the appearance of
	s/circumstances that present a poten conditions/circumstances are present		
At the time of manuscript acceptanc On occasion, journals may ask autho	e, journals will ask authors to confirm rs to disclose further information abo	and, if necessary, upda out reported relationship	te their disclosure statements os.

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Section 1.	Identifying Inform	nation						
1. Given Name (F Ali	irst Name)	2. Surname (Last Name) McGuire		3. Effective Date (07-August-2008) 03-June-2016				
4. Are you the cor	rresponding author?	Yes 🗸 No	Corresponding Author's Na François Bourhis	ame				
5. Manuscript Titl	e							
Cost-effectivene	Cost-effectiveness of netupitant and palonosetron in CINV in the UK							
6. Manuscript Ide	ntifying Number (if you k	now it)						

## Section 2. The Work Under Consideration for Publication

Did you or your institution at any time receive payment or services from a third party for any aspect of the submitted work (including but not limited to grants, data monitoring board, study design, manuscript preparation, statistical analysis, etc...)?

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The Work Under Consideration for Publication								
Туре	No	Money Paid to You	Money to Your Institution*	Name of Entity	Comments**			
1. Grant	1					×		
						ADD		
2. Consulting fee or honorarium			✓	Марі		×		
						ADD		
<ol><li>Support for travel to meetings for the study or other purposes</li></ol>			<b>✓</b>	Марі		×		
						ADD		
<ol> <li>Fees for participation in review activities such as data monitoring boards, statistical analysis, end point committees, and the like</li> </ol>	<b>✓</b>					×		
						ADD		
<ol><li>Payment for writing or reviewing the manuscript</li></ol>	<b>✓</b>					×		
						ADD		
<ol> <li>Provision of writing assistance, medicines, equipment, or administrative support</li> </ol>	<b>✓</b>					×		

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The Work Under Consideration for Publication							
Type	No	Money Paid to You	Money to Your Institution*	Name of Entity	Comments**		
						ADD	
7. Other	<b>1</b>					×	
						ADD	

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Type of Relationship (in alphabetical order)	No	Money Paid to You	Money to Your Institution*		Entity	Comments	
1. Board membership	<b>✓</b>					p-	×
							ADD
2. Consultancy	1						×
							ADD
3. Employment			✓	Марі			×
			_				ADD
4. Expert testimony	✓						×
							ADD
5. Grants/grants pending	<b>√</b>						×
C. Design of the plants of the discount							ADD
<ol><li>Payment for lectures including service on speakers bureaus</li></ol>	<b>✓</b>						×
							ADD
<ol><li>Payment for manuscript preparation</li></ol>	<b>✓</b>						×

McGuire 3

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Relevant financial activities outside the submitted work							
Type of Relationship (in alphabetical order)	No	Money Paid to You	Money to Your Institution*	Entity	Comments		
						ADD	
<ol><li>Patents (planned, pending or issued)</li></ol>	✓					×	
						ADD	
9. Royalties	1					×	
						ADD	
Payment for development of educational presentations	$\checkmark$					×	
						ADD	
11. Stock/stock options	✓					×	
						ADD	
<ol> <li>Travel/accommodations/ meeting expenses unrelated to activities listed**</li> </ol>	<b>/</b>					×	
						ADD	
<ol><li>Other (err on the side of full disclosure)</li></ol>	<b>✓</b>					×	
X TI James a transfer of the last of the l						ADD	

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