

ICMJE Form for Disclosure of Potential Conflicts of Interest

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 six parts.

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)

Carlos

2. Surname (Last Name)

Blanco

3. Date

03-March-2017

4. Are you the corresponding author?

Yes No

5. Manuscript Title

Marijuana use during stages of pregnancy

6. Manuscript Identifying Number (if you know it)

L17-0067

Section 2. The Work Under Consideration for Publication

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Section 1. Identifying Information

1. Given Name (First Name)
Nora

2. Surname (Last Name)
Volkow

3. Date
22-February-2017

4. Are you the corresponding author? Yes No

5. Manuscript Title
Marijuana Use during Stages of Pregnancy in the United States

6. Manuscript Identifying Number (if you know it)
L17-0067

Section 2. The Work Under Consideration for Publication

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

Are there any relevant conflicts of interest? Yes No

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Are there any relevant conflicts of interest? Yes No

Section 4. Intellectual Property -- Patents & Copyrights

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Dr. Volkow has nothing to disclose.

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Section 1. Identifying Information

1. Given Name (First Name)
Wilson

2. Surname (Last Name)
Compton

3. Date
07-March-2017

4. Are you the corresponding author? Yes No
Corresponding Author's Name
Nora D. Volkow

5. Manuscript Title
Marijuana Use during Stages of Pregnancy in the United States

6. Manuscript Identifying Number (if you know it)
L17-0067

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Are there any relevant conflicts of interest? Yes No

If yes, please fill out the appropriate information below.

Name of Entity	Grant?	Personal Fees?	Non-Financial Support?	Other?	Comments
Pfizer, Inc.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Minimal Long-term Stock Ownership
General Electric Company	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Minimal Long-term Stock Ownership
3M Company	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Minimal Long-term Stock Ownership

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Dr. Compton reports long-term stock ownership in Pfizer, Inc., General Electric Company, and 3M Company, unrelated to the submitted work.

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Section 1. Identifying Information

1. Given Name (First Name) Beth	2. Surname (Last Name) Han	3. Date 01-March-2017
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Dr. Nora Volkow
5. Manuscript Title Marijuana Use during Stages of Pregnancy in the United States		
6. Manuscript Identifying Number (if you know it) L17-0067		

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