

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.

Identifying information.

1.

The work under consideration for publication.

2.

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".

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.

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.

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.

Intellectual Property.

This section asks about patents and copyrights, whether pending, issued, licensed and/or receiving royalties.

Relationships not covered above.

4.

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.

5.

Definitions.

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Royalties: Funds are coming in to you or your institution due to your patent

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Section 1.

Identifying Information

1. Given Name (First Name)
Claudio

2. Surname (Last Name)
Silva

3. Date
11/08/2018

4. Are you the corresponding author?

Yes No

Corresponding Author's Name

5. Manuscript Title

Severe Diffuse Alveolar Hemorrhage Related to Water Pipe Marijuana Smoking

6. Manuscript Identifying Number (if you know it)

Section 2.

The Work Under Consideration for Publication

Did you or your institution **at any time**

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

Do you have any patents, whether planned, pending or issued, broadly relevant to the work? Yes No

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Section 1. Identifying Information

1. Given Name (First Name)
Sebastian

2. Surname (Last Name)
Fernandez-Bussy

3. Date
08-November-2018

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

5. Manuscript Title
Severe Diffuse Alveolar Hemorrhage Related to Water Pipe Marijuana Smoking

6. Manuscript Identifying Number (if you know it)
L18-0614

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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Section 4. Intellectual Property -- Patents & Copyrights

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Section 1. Identifying Information

1. Given Name (First Name)
Gonzalo

2. Surname (Last Name)
Labarca

3. Date
08-November-2018

4. Are you the corresponding author? Yes No

5. Manuscript Title
Severe Diffuse Alveolar Hemorrhage Related to Water Pipe Marijuana Smoking

6. Manuscript Identifying Number (if you know it)
L18-0614

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Section 1. Identifying Information

1. Given Name (First Name)

Iván

2. Surname (Last Name)

Caviedes

3. Date

12-November-2018

4. Are you the corresponding author?

Yes No

5. Manuscript Title

"Severe Diffuse Alveolar Hemorrhage Related to Water Pipe Marijuana Smoking"

6. Manuscript Identifying Number (if you know it)

L18-0614

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Dr. Caviedes has nothing to disclose.

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