

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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2. The work under consideration for publication.

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Pending: The patent has been filed but not issued

Issued: The patent has been issued by the agency

Licensed: The patent has been licensed to an entity, whether earning royalties or not

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

White 1



Section 1.	Identifying Inform	ation		
1. Given Name (Fii Katie	rst Name)	2. Surname (Last Name White)	3. Date 16-May-2013
4. Are you the cor	responding author?	☐ Yes ✓ No	Corresponding Auth	
5. Manuscript Title Improving Chror		ing Laypersons to the	Primary Care Team: A Ra	andomized, Controlled Trial
6. Manuscript Ider M12-3106	ntifying Number (if you kn	ow it)		
Section 2.	The Work Under Co	onsideration for Pul	olication	
any aspect of the s statistical analysis, Are there any rela If yes, please fill of Excess rows can	ubmitted work (including etc.)? evant conflicts of intere out the appropriate info oe removed by pressing	but not limited to grants st? Yes No rmation below. If you l g the "X" button.	, data monitoring board, s o nave more than one ent	nent, commercial, private foundation, etc.) for tudy design, manuscript preparation, tity press the "ADD" button to add a row.
Name of Institut	ion/Company	Grant? Personal Fees?	Support? Other	Comments
Robina Foundation				
	l.			
Section 3.	Relevant financial a	activities outside th	e submitted work.	
of compensation clicking the "Add Are there any rel) with entities as descril +" box. You should rep evant conflicts of intere	bed in the instructions port relationships that wast? Yes V	. Use one line for each e were present during th	ncial relationships (regardless of amount entity; add as many lines as you need by the 36 months prior to publication .
Section 4.	Intellectual Proper	ty Patents & Copy	rights	
Do you have any	patents, whether planr	ned, pending or issued	broadly relevant to the	e work? ☐ Yes 🗸 No

White 2



Section 5.	
Section 5.	Relationships not covered above
	relationships or activities that readers could perceive to have influenced, or that give the appearance of encing, what you wrote in the submitted work?
Yes, the follo	wing relationships/conditions/circumstances are present (explain below):
✓ No other rela	ationships/conditions/circumstances that present a potential conflict of interest
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Wholey 1



Section 1.	Identifying Inform	ation				
1. Given Name (Fi Douglas	rst Name)	2. Surname (Last Name Wholey	<u>e</u>)		3. Date 16-May-2013	
4. Are you the cor	responding author?	☐ Yes ✓ No	Correspondi Richard Ad	ing Author's Nan lair	me	
5. Manuscript Title Improving chron	e iic disease care by addir	ng laypersons to the p	rimary care team	n: a randomizec	d, controlled trial	
6. Manuscript Ider M12-3106	ntifying Number (if you kn	ow it)				
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Section 2.	The Work Under Co	onsideration for Pu	blication			
any aspect of the s statistical analysis, Are there any rela If yes, please fill of Excess rows can	evant conflicts of intere out the appropriate info be removed by pressing	est? Yes Normation below. If you get the "X" button.	s, data monitoring o have more than	board, study des	sign, manuscript p	reparation,
Name of Institut	ion/Company	Grant Personal Fees?	Support?	Other Com	nments	
Robina Foundation		✓		Resear	rch Funder	
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Section 3.	Relevant financial a	activities outside th	ne submitted w	vork.		
of compensation clicking the "Add Are there any rel	the appropriate boxes in the appropriate boxes in the secril of the secril of the secril of the secrit of the secret of the secrit of the secr	bed in the instructions port relationships that	i. Use one line for were present du	r each entity; a	dd as many lines	as you need by
Section 4.	Intellectual Proper	ty Patents & Copy	yrights			
Do you have any	patents, whether planr	ned, pending or issued	l, broadly relevan	nt to the work?	Yes ✓	No

Wholey 2



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Lee 1



Section 1. Identifying Inform	ation		
1. Given Name (First Name) Suhna	2. Surname (Last Name) Lee	3. Date 16-May-2013	
4. Are you the corresponding author?	☐ Yes ✓ No	Corresponding Author's Name Richard Adair, MD	
5. Manuscript Title Improving chronic disease care by addi	ng laypersons to the prim	ary care team: a randomized, controlled trial	
6. Manuscript Identifying Number (if you kn M12-3106	now it)		
Section 2. The Work Under Co	onsideration for Public	cation	
	but not limited to grants, da	a third party (government, commercial, private foundation, etc.) for ita monitoring board, study design, manuscript preparation,	
Section 3. Relevant financial	activities outside the s	submitted work.	
of compensation) with entities as descri	bed in the instructions. Use port relationships that wer	ether you have financial relationships (regardless of amount se one line for each entity; add as many lines as you need by re present during the 36 months prior to publication.	
Section 4. Intellectual Proper	ty Patents & Copyric	ghts	
Do you have any patents, whether plant			

Lee 2



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Dr. Lee has noth	ing to disclose.			

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Christianson 1



Section 1.	Identifying Inform	ation	
1. Given Name (Fii Jon	rst Name)	2. Surname (Last Nam Christianson	ne) 3. Date 21-May-2013
4. Are you the cor	responding author?	☐ Yes ✓ No	Corresponding Author's Name Richard Adair
5. Manuscript Title Improving chroi		ng laypersons to the p	primary care team: a randomized, controlled trial
6. Manuscript Ider M12-3106	ntifying Number (if you kn	now it)	
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any aspect of the s statistical analysis, Are there any rela If yes, please fill c	ubmitted work (including etc.)? evant conflicts of intere	but not limited to grant est? Yes Normation below. If you g the "X" button.	from a third party (government, commercial, private foundation, etc.) for ts, data monitoring board, study design, manuscript preparation, No u have more than one entity press the "ADD" button to add a row.
Name of Institut	ion/Company	Grant? Personal Fees?	Non-Financial Other? Comments
Allina Health		✓	
	l		
Section 3.	Relevant financial	activities outside t	the submitted work.
of compensation clicking the "Add Are there any rel) with entities as descri +" box. You should rep evant conflicts of intere	bed in the instruction port relationships that est? Yes 🗸 N	
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Do you have any	patents, whether plans	ned, pending or issue	d, broadly relevant to the work? Yes Vo

Christianson 2



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Dr. Christianson reports grants from Allina Health, during the conduct of the study; .

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Adair 1



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1. Given Name (First Name) Richard	2. Surname (Last Name) Adair	3. Date 22-May-2013
4. Are you the corresponding author?	✓ Yes No	
5. Manuscript Title Improving chronic disease care by a	adding laypersons to the primary care te	eam: a randomized, controlled trial
6. Manuscript Identifying Number (if yo M12-3106	ou know it)	
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Pending: The patent has been filed but not issued

Issued: The patent has been issued by the agency

Licensed: The patent has been licensed to an entity, whether earning royalties or not

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

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Section 1. Identifying Inform	nation		
1. Given Name (First Name) Heather	2. Surname (Last Name) Britt		3. Date 16-May-2013
4. Are you the corresponding author?	☐ Yes ✓ No	Corresponding Autho	r's Name
5. Manuscript Title Improving chronic disease care by add	ing laypersons to the prima	ary care team: a rando	mized, controlled trial
6. Manuscript Identifying Number (if you k M12-3106	now it)		
		-	
Section 2. The Work Under C	onsideration for Public	ation	
any aspect of the submitted work (includin statistical analysis, etc.)? Are there any relevant conflicts of inter	g but not limited to grants, datest? ✓ Yes No	ta monitoring board, stu	
If yes, please fill out the appropriate inf Excess rows can be removed by pressir		e more than one entit	ty press the "ADD" button to add a row.
Name of Institution/Company	Grant	o-Financial Other?	Comments
Robina Foundation	✓		
Section 3. Relevant financial	activities outside the s	ubmitted work.	
Place a check in the appropriate boxes of compensation) with entities as desc clicking the "Add +" box. You should re Are there any relevant conflicts of inter	ribed in the instructions. Us port relationships that were	e one line for each en	tity; add as many lines as you need by
Section 4. Intellectual Prope	rty Patents & Copyrig	hts	
Do you have any patents, whether plan	nned, pending or issued, bro	oadly relevant to the	work? Yes No

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Section 5. Polationships not sovered above
Relationships not covered above
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?
Yes, the following relationships/conditions/circumstances are present (explain below):
✓ No other relationships/conditions/circumstances that present a potential conflict of interest
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Section 6. Disclosure Statement
Based on the above disclosures, this form will automatically generate a disclosure statement, which will appear in the box below.
Dr. Britt reports grants from Robina Foundation, during the conduct of the study; .

Evaluation and Feedback

Please visit http://www.icmje.org/cgi-bin/feedback to provide feedback on your experience with completing this form.

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