

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.

1. Identifying information.

2. The work under consideration for publication.

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4. Intellectual Property.

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)
Elizabeth

2. Surname (Last Name)
Selvin

3. Date
30-January-2014

4. Are you the corresponding author? Yes No

5. Manuscript Title
Trends in Prevalence and Control of Diabetes in the U.S., 1988-1994 and 1999-2010

6. Manuscript Identifying Number (if you know it)
M13-2411

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

If yes, please fill out the appropriate information below. If you have more than one entity press the "ADD" button to add a row. Excess rows can be removed by pressing the "X" button.

Name of Institution/Company	Grant?	Personal Fees?	Non-Financial Support?	Other?	Comments
NIH/NIDDK	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	R01 DK089174 (PI: Selvin)
NIH/NHLBI	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	T32 HL007024 (training grant support to Ms. Parrinello)

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Are there any relevant conflicts of interest? Yes No

Section 4. Intellectual Property -- Patents & Copyrights

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name) David	2. Surname (Last Name) Sacks	3. Date 06-February-2014
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name
5. Manuscript Title Trends in Prevalence and Control of Diabetes in the U.S., 1988-1994 and 1999-201		
6. Manuscript Identifying Number (if you know it) M13-2411		

Section 2. The Work Under Consideration for Publication

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Are there any relevant conflicts of interest? Yes No

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Are there any relevant conflicts of interest? Yes No

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Dr. Sacks has nothing to disclose.

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Section 1. Identifying Information

1. Given Name (First Name)

Josef

2. Surname (Last Name)

Coresh

3. Date

30-January-2014

4. Are you the corresponding author?

Yes No

5. Manuscript Title

Trends in Prevalence and Control of Diabetes in the U.S., 1988-1994 and 1999-2010"

6. Manuscript Identifying Number (if you know it)

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1. Given Name (First Name) Christina

2. Surname (Last Name) Parrinello

3. Date 31-January-2014

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

5. Manuscript Title Trends in Prevalence and Control of Diabetes in the U.S., 1988-1994 and 1999-2010

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Ms. Parrinello reports grants from NIH/NHLBI, during the conduct of the study; .

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