

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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4. Intellectual Property.

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

Relationships not covered above.

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Definitions.

Middleton

Entity: government agency, foundation, commercial sponsor, academic institution, etc.

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Other: Anything not covered under the previous three boxes

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

1

administrative support, etc.

patent



Section 1.	Identifying Inform	ation				
1. Given Name (Fi Jennifer	rst Name)	2. Surnar Middleto	me (Last Nam on	ne)		3. Date 17-March-2014
4. Are you the cor	responding author?	Yes	✓ No	✓ No Corresponding Author's Name Cynthia Feltner		or's Name
5. Manuscript Title Transitional Care Interventions to Prevent Readmissions for People with Heart Failure: a Systematic Review and Meta- analysis						
6. Manuscript Ider M14-0083	ntifying Number (if you kn	ow it)				
	I					
Section 2.	The Work Under Co	onsidera	tion for Pu	ublication		
any aspect of the s statistical analysis,	ubmitted work (including etc.)?	but not lim	nited to gran	ts, data monitoring		ent, commercial, private foundation, etc.) for udy design, manuscript preparation,
If yes, please fill o	evant conflicts of intere out the appropriate info be removed by pressing	rmation b	elow. If you	No I have more thar	n one enti	ity press the "ADD" button to add a row.
Name of Institut	ion/Company	Grant?	Personal Fees?	Non-Financial Support?	Other?	Comments
	e Research and Quality, U alth and Human Services				✓	Agency for Healthcare Research and Quality, U.S. Department of Health and Human Services Contract No.: HHSA290201200008I_HHSA2903200 3T
	I					
Section 3.	Relevant financial	activities	outside t	he submitted	work.	
of compensation clicking the "Add	n) with entities as descri I +" box. You should rep	bed in the ort relatio	instruction onships that	s. Use one line for were present d	or each er	cial relationships (regardless of amount ntity; add as many lines as you need by e 36 months prior to publication.
Are there any rel	evant conflicts of intere	'ST! '	Yes 🔽 ſ	NO		
Section 4.	Intellectual Proper	ty Pate	ents & Cop	yrights		
Do you have any	patents, whether plani	ned, pendi	ing or issue	d, broadly releva	ant to the	work? ☐ Yes ✓ No

Middleton 2



Section 5. Polationships not severed 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
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.
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. Middleton reports other from Agency for Healthcare Research and Quality, U.S. Department of Health and Human Services, during the conduct of the study; .

Evaluation and Feedback

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

Jones 1



Section 1.	Identifying Inform	ation			
1. Given Name (Fi	First Name) 2. Surname (Last Name) Jones			Date 7-March-2014	
4. Are you the cor			Corresponding Author's Name Cindy Feltner		
5. Manuscript Title Transitional Care Interventions to Prevent Readmissions for People with Heart Failure: a Systematic Review and Meta- analysis					
6. Manuscript Ider M14-0083	ntifying Number (if you kr	now it)			
			_		
Section 2. The Work Under Consideration for Publication					
any aspect of the s statistical analysis,	ubmitted work (including	but not limited to grants, da	a third party (government, comm ta monitoring board, study desigr	nercial, private foundation, etc.) for n, manuscript preparation,	
Section 3.	Relevant financial	activities outside the s	submitted work.		
of compensation clicking the "Add	n) with entities as descri	bed in the instructions. Use port relationships that wer	ether you have financial relations e one line for each entity; add re present during the 36 mon	as many lines as you need by	
Section 4.	Intellectual Proper	ty Patents & Copyric	uhts		
Do you have any			oadly relevant to the work?	Yes ✓ No	

Jones 2



Section 5. Boloti	anakina nataawana dahawa				
Relati	onships 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?				
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Section 6. Disclo	sure Statement				
Based on the above disclebelow.	osures, this form will automatically generate a disclosure statement, which will appear in the box				
Dr. Jones has nothing to	disclose.				

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

patent

Feltner 1



Section 1. Identifying Inform	mation			
1. Given Name (First Name) Cynthia	2. Surname (Last Name) Feltner	3. Date 18-March-2014		
4. Are you the corresponding author?	✓ Yes No			
5. Manuscript Title Transitional Care Interventions to Prev	rent Readmissions for People with Heart Failure			
6. Manuscript Identifying Number (if you k	know it)			
Section 2. The Work Under 0	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 V				
Section 3. Relevant financia	l activities outside the submitted work.			
of compensation) with entities as desc	in the table to indicate whether you have financiaribed in the instructions. Use one line for each enterport relationships that were present during the frest?	ity; add as many lines as you need by		
Section 4. Intellectual Prope	erty Patents & Copyrights			
Do you have any patents, whether plan	nned, pending or issued, broadly relevant to the w	ork? ☐ Yes ✓ No		

Feltner 2



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

Sueta 1



Section 1.	Identifying Inform	nation			
1. Given Name (Fi	First Name) 2. Surname (Last Name) Sueta		3. Date 25-March-2014		
4. Are you the cor			Corresponding Author's Name Feltner, Cindy		
5. Manuscript Title Transitional Care Interventions to Prevent Readmissions for People with Heart Failure: a Systematic Review and Meta- analysis			e with Heart Failure: a Systematic Review and Meta-		
6. Manuscript Ider	ntifying Number (if you kr	now it)			
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Section 2. The Work Under Consideration for Publication					
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	l.				
Section 3.	Relevant financial	activities outside the s	ubmitted work.		
of compensation) with entities as descri	ibed in the instructions. Us	ether you have financial relationships (regardless of amount se one line for each entity; add as many lines as you need by e present during the 36 months prior to publication .		
Are there any rel	evant conflicts of intere	est? Yes Vo			
	ı				
Section 4.	Intellectual Proper	rty Patents & Copyrig	hts		
Do you have any	patents, whether plan	ned, pending or issued, br	oadly relevant to the work? Yes V No		

Sueta 2



Soction F	
Section 5.	elationships not covered above
	tionships or activities that readers could perceive to have influenced, or that give the appearance of ng, what you wrote in the submitted work?
Yes, the followin	g relationships/conditions/circumstances are present (explain below):
✓ No other relation	nships/conditions/circumstances that present a potential conflict of interest
	script acceptance, journals will ask authors to confirm and, if necessary, update their disclosure statements Is may ask authors to disclose further information about reported relationships.
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Royalties: Funds are coming in to you or your institution due to your patent

Coker-Schwimmer 1



Section 1. Identifying Inform	nation			
Given Name (First Name) Emmanuel	2. Surname (Last Name) Coker-Schwimmer	3. Date 01-April-2014		
4. Are you the corresponding author?	☐ Yes ✓ No	Corresponding Author's Name Cynthia Feltner		
5. Manuscript Title Transitional Care Interventions to Preve analysis	ent Readmissions for Peop	le with Heart Failure:	a Systematic Review and Meta-	
6. Manuscript Identifying Number (if you kr M14-0083	now it)			
		_		
Section 2. The Work Under Co	onsideration for Publi	cation		
any aspect of the submitted work (including statistical analysis, etc.)? Are there any relevant conflicts of intere	y but not limited to grants, deest? ✓ Yes	ata monitoring board, s	nent, commercial, private foundation, etc.) for study design, manuscript preparation, tity press the "ADD" button to add a row.	
Name of Institution/Company	Grant? Personal No	n-Financial Other	Comments	
Agency for Healthcare Research and Quality		✓	Our AHRQ Task Order Officer provided guidance in determining the original report's scope. AHRQ staff also reviewed the draft report and proposed revisions to the language when deemed necessary for the sake of clarity.	
Section 3. Relevant financial	activities outside the	submitted work.		
	ibed in the instructions. U port relationships that we	se one line for each e	ncial relationships (regardless of amount entity; add as many lines as you need by the 36 months prior to publication .	

Coker-Schwimmer 2



Section 4. Intellectual Property Patents & Copyrights				
Do you have any patents, whether planned, pending or issued, broadly relevant to the work? Yes V				
Section 5. Relationships not covered above				
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Mr. Coker-Schwimmer reports grants and non-financial support from Agency for Healthcare Research and Quality, during the conduct of the study.				

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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

Arvanitis 1



Section 1. Identifying Inform	nation			
Given Name (First Name) Marina	2. Surname (Last Name) Arvanitis	3. Date 18-March-2014		
4. Are you the corresponding author?	☐ Yes 🗸 No	Corresponding Author's Name Dr. Cynthia Feltner		
5. Manuscript Title Transitional Care Interventions to Prevent Readmissions for People with Heart Failure: a Systematic Review and Meta- analysis				
6. Manuscript Identifying Number (if you ki M14-0083	now it)			
Section 2. The Work Under C	onsideration for Public	cation		
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 Vo				
Section 3. Relevant financial	activities outside the s	ubmitted work.		
of compensation) with entities as descr	ribed in the instructions. Us 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 se present during the 36 months prior to publication.		
Section 4. Intellectual Prope	rty Patents & Copyrig	yhts		
Do you have any patents, whether plan	nned, pending or issued, br	oadly relevant to the work? Yes V No		

Arvanitis 2



Section 5. Relationships not severed 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?
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Section 6. Disclosure Statement
Disclosure Statement
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Dr. Arvanitis has nothing to disclose.

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Arvanitis 3



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

Zheng 1



Section 1.	Identifying Inform	ation				
1. Given Name (Fi	rst Name)	2. Surname (L Zheng	ast Name)		3. Date 11-April-2014	
4. Are you the cor	4. Are you the corresponding author?		Corresponding Author's Name			
5. Manuscript Title Transitional Care Interventions to Prevent Readmissions for People with Heart Failure: a Systematic Review and Meta- analysis 6. Manuscript Identifying Number (if you know it)			tematic Review and Meta-			
	1					
Section 2.	Section 2. The Work Under Consideration for Publication					
any aspect of the s statistical analysis,	ubmitted work (including	but not limited			ommercial, private foundation, etc.) for lesign, manuscript preparation,	
Section 3.	Relevant financial	activities ou	tside the s	ubmitted work.		
of compensation clicking the "Add) with entities as descri	bed in the inst port relationsh	ructions. Use	e one line for each entity;	elationships (regardless of amount add as many lines as you need by months prior to publication.	
Section 4.	Intellectual Proper	ty Paten <u>ts</u>	& Copyrig	hts		
Do you have any	patents, whether plan	ned, pending o	or issued, bro	adly relevant to the work	x?	

Zheng 2



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?				
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Section 6. Disclosure Statement				
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Zheng 3



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Jonas 1



Section 1.	Identifying Inform	nation			
1. Given Name (Fi Daniel	rst Name)	2. Surname (Last Nam Jonas	e)	3. Date 11-April-2	2014
4. Are you the corresponding author? Yes Vo		Correspondi	Corresponding Author's Name		
analysis	Interventions to Preve		eople with Heart I	Failure: a Systematic Revi	iew and Meta-
6. Manuscript Ider M14-0083	ntifying Number (if you kr	now it)			
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 c	ubmitted work (including etc.)? evant conflicts of intere	g but not limited to grant est? Yes Normation below. If you	s, data monitoring	povernment, commercial, proboard, study design, manus	script preparation,
Name of Institut			Non-Financial Support?	Other? Comments	
Agency for Healthcar	e Research and Quality			✓ contract from fed	eral government
Section 3.	Relevant financial	activities outside tl	ne submitted w	vork.	
of compensation clicking the "Add Are there any rel) with entities as descri	ibed in the instructions port relationships that —	s. Use one line for were present du	re financial relationships each entity; add as man ring the 36 months prio	y lines as you need by
Section 4.	Intellectual Proper	rty Patents & Cop	yrights		
Do you have any	patents, whether plan	ned, pending or issued	l, broadly relevan	t to the work? Yes	✓ No

Jonas 2



Section 5. Relationships not covered 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?
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Section 6. Disclosure Statement
Disclosure Statement
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Dr. Jonas reports other from Agency for Healthcare Research and Quality, during the conduct of the study.

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Jonas 3



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Cene 1



Section 1.	Identifying Inform	nation				
1. Given Name (Fi	rst Name)	2. Surname (Last Name) Cene	3. Date 12-April-2014			
4. Are you the cor	4. Are you the corresponding author?		Corresponding Author's Name Cynthia Feltner			
5. Manuscript Title Transitional Care Interventions to Prevent Readmissions for Peopl analysis		ent Readmissions for Peop	le with Heart Failure: a Systematic Review and Meta-			
6. Manuscript Ider	ntifying Number (if you kr	now it)				
			_			
Section 2.	Section 2. The Work Under Consideration for Publication					
any aspect of the s statistical analysis,	ubmitted work (including	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 clicking the "Add	n) 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.	Intellestual Duame	str. Datanta 9 Canada	ulada.			
		ty Patents & Copyric				
Do you have any patents, whether planned, pending or issued, broadly relevant to the work? Yes You						

Cene 2



Section 5. Relationships not covered above
Relationships not covered above
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Royalties: Funds are coming in to you or your institution due to your patent

Lohr 1



Section 1. Identifyin	g Information			
1. Given Name (First Name) Kathleen	2. Surname (Last Name) Lohr)	3. Date 11-April-2014	
4. Are you the corresponding au	thor? Yes V No	Corresponding Author	or's Name	
5. Manuscript Title Not sure: I'm WAY out in the I	mountains and hard to figure out	(not in emails). It is abo	out heart failure from the RTI-UNC EPC	
6. Manuscript Identifying Number Don't know	er (if you know it)			
Section 2				
Section 2. The Work	Under Consideration for Pub	olication		
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				
Section 3. Relevant f	inancial activities outside th	e submitted work.		
of compensation) with entitie	s as described in the instructions. should report relationships that v	. Use one line for each envere present during th	cial relationships (regardless of amount ntity; add as many lines as you need by e 36 months prior to publication.	
If yes, please fill out the appro	priate information below.			
Name of Entity	Grant? Personal N	Non-Financial Other?	Comments	
Agency for Healthcare Research and	Quality		part of my salary paid by contract (not grant) to RTI International (EPC)	
Agency for Healthcare Research and	Quality		am consultant to ECRI for AHRQ- supported GC/NQMC	
Section 4. Intellectua	l Property Patents & Copy	rights		
Do you have any patents, whe	ther planned, pending or issued,	broadly relevant to the	work? ☐ Yes ✓ No	

Lohr 2



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Dr. Lohr reports other from Agency for Healthcare Research and Quality, other from Agency for Healthcare Research and Quality, outside the submitted work; .

Evaluation and Feedback

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Lohr 3