

## ICMJE Form for Disclosure of Potential Conflicts of Interest

### Instructions

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## ICMJE Form for Disclosure of Potential Conflicts of Interest

### Section 1. Identifying Information

1. Given Name (First Name)

Wojciech

2. Surname (Last Name)

Szczeklik

3. Date

22-May-2014

4. Are you the corresponding author?

☐ Yes☒ No

Corresponding Author's Name

Bram Rochweg

5. Manuscript Title

Fluid Resuscitation in Sepsis: A systematic review and network meta-analysis.

6. Manuscript Identifying Number (if you know it)

M14-0178

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Are there any relevant conflicts of interest? ☐ Yes ☒ No

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Dr. Szczeklik has nothing to disclose.

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## ICMJE Form for Disclosure of Potential Conflicts of Interest

### Section 1. Identifying Information

1. Given Name (First Name)

Lawrence

2. Surname (Last Name)

Mbuagbaw

3. Date

22-May-2014

4. Are you the corresponding author?

☐ Yes

☒ No

Corresponding Author's Name

Bram Rochweg

5. Manuscript Title

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Dr. Mbuagbaw has nothing to disclose.

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1. Given Name (First Name) Rochweg	2. Surname (Last Name) Bram	3. Date 11-April-2014
4. Are you the corresponding author? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Corresponding Author's Name Deborah Cook
5. Manuscript Title Fluid Resuscitation in Sepsis: A systematic review and network meta-analysis		
6. Manuscript Identifying Number (if you know it) M14-0178		

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1. Given Name (First Name)  
Lehana

2. Surname (Last Name)  
Thabane

3. Date

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☐ Yes ☒ No

Corresponding Author's Name  
Bram Rochweg

5. Manuscript Title  
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Waleed

2. Surname (Last Name)

Alhazzani

3. Date

22-May-2014

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☐

Yes

☒

No

Corresponding Author's Name

5. Manuscript Title

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Are there any relevant conflicts of interest?

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Dr. Alhazzani has nothing to disclose.

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#### 4. Intellectual Property.

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

#### 5. Relationships not covered above.

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## ICMJE Form for Disclosure of Potential Conflicts of Interest

### Section 1. Identifying Information

1. Given Name (First Name)  
Guowei

2. Surname (Last Name)  
Li

3. Date  
22-May-2014

4. Are you the corresponding author?

☐ Yes ☒ No

Corresponding Author's Name  
Deborah Cook

5. Manuscript Title  
Fluid Resuscitation in Sepsis: A systematic review and network meta-analysis

6. Manuscript Identifying Number (if you know it)  
M14-0178

### 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

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

## ICMJE Form for Disclosure of Potential Conflicts of Interest

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### Section 5. Relationships not covered above

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### Section 6. Disclosure Statement

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## ICMJE Form for Disclosure of Potential Conflicts of Interest

### Section 1. Identifying Information

1. Given Name (First Name) Alison	2. Surname (Last Name) Fox-Robichaud	3. Date 11-April-2014
4. Are you the corresponding author? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Corresponding Author's Name Deborah Cook
5. Manuscript Title Fluid Resuscitation in Sepsis: A systematic review and network meta-analysis		
6. Manuscript Identifying Number (if you know it) M14-0178		

### 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

### Section 3. Relevant financial activities outside the submitted work.

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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
Canadian Blood Services	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Fluid interactions in sepsis

### Section 4. Intellectual Property -- Patents & Copyrights

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

## ICMJE Form for Disclosure of Potential Conflicts of Interest

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Dr. Fox-Robichaud reports grants from Canadian Blood Services , outside the submitted work; .

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## ICMJE Form for Disclosure of Potential Conflicts of Interest

### Section 1. Identifying Information

1. Given Name (First Name)

Djillali

2. Surname (Last Name)

Annane

3. Date

12-April-2014

4. Are you the corresponding author?

☐ Yes ☒ No

Corresponding Author's Name

Deborah Cook

5. Manuscript Title

Fluid Resuscitation in Sepsis: A systematic review and network meta-analysis

6. Manuscript Identifying Number (if you know it)

M14-0178

### 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

### Section 4. Intellectual Property -- Patents & Copyrights

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

## ICMJE Form for Disclosure of Potential Conflicts 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. Annane has nothing to disclose.

### Evaluation and Feedback

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## ICMJE Form for Disclosure of Potential Conflicts of Interest

### Section 1. Identifying Information

1. Given Name (First Name)  
Gordon

2. Surname (Last Name)  
Guyatt

3. Date  
23-May-2014

4. Are you the corresponding author?

☐ Yes

☒ No

Corresponding Author's Name  
Bram Rochweg

5. Manuscript Title  
Fluid Resuscitation in Sepsis: A systematic review and network meta-analysis.

6. Manuscript Identifying Number (if you know it)  
M14-0178

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

## ICMJE Form for Disclosure of Potential Conflicts of Interest

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## ICMJE Form for Disclosure of Potential Conflicts of Interest

### Section 1. Identifying Information

1. Given Name (First Name)

FAYEZ

2. Surname (Last Name)

ALSHAMSI

3. Date

30-March-2014

4. Are you the corresponding author?

☐ Yes☒ No

Corresponding Author's Name

Bram Rochweg

5. Manuscript Title

Fluid Resuscitation in Sepsis: A systematic review and network meta-analysis.

6. Manuscript Identifying Number (if you know it)

M14-0178

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Are there any relevant conflicts of interest? ☐ Yes ☒ No

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### Section 4. Intellectual Property -- Patents & Copyrights

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



## ICMJE Form for Disclosure of Potential Conflicts of Interest

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Dr. ALSHAMSI has nothing to disclose.

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## ICMJE Form for Disclosure of Potential Conflicts of Interest

### Section 1. Identifying Information

1. Given Name (First Name) Wang-Chun	2. Surname (Last Name) Ip	3. Date 30-March-2014
4. Are you the corresponding author? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Corresponding Author's Name Bram Rochweg
5. Manuscript Title Fluid Resuscitation in Sepsis: A systematic review and network meta-analysis		
6. Manuscript Identifying Number (if you know it) M14-0178		

### 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

### Section 3. Relevant financial activities outside the submitted work.

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### 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 5. Relationships not covered above

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### Section 6. Disclosure Statement

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Dr. Ip has nothing to disclose.

### Evaluation and Feedback

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## ICMJE Form for Disclosure of Potential Conflicts of Interest

### Section 1. Identifying Information

1. Given Name (First Name)  
Diane

2. Surname (Last Name)  
Heels-Ansdell

3. Date  
03-July-2014

4. Are you the corresponding author?

☐ Yes

☒ No

Corresponding Author's Name  
Deborah Cook

5. Manuscript Title  
Fluid Resuscitation in Sepsis: A systematic review and network meta-analysis

6. Manuscript Identifying Number (if you know it)  
M14-0178

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Ms. Heels-Ansdell has nothing to disclose.

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## ICMJE Form for Disclosure of Potential Conflicts of Interest

### Section 1. Identifying Information

1. Given Name (First Name)  
Deborah

2. Surname (Last Name)  
Cook

3. Date  
22-May-2014

4. Are you the corresponding author? ☒ Yes ☐ No

5. Manuscript Title  
Fluid Resuscitation in Sepsis: A systematic review and network meta-analysis

6. Manuscript Identifying Number (if you know it)  
M14-0178

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D Cook coauthored one of the pilot trials in this meta-analysis.

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## ICMJE Form for Disclosure of Potential Conflicts of Interest

### Section 1. Identifying Information

1. Given Name (First Name)  
Sultan

2. Surname (Last Name)  
Altayyar

3. Date  
28-March-2014

4. Are you the corresponding author?

☐ Yes ☒ No

Corresponding Author's Name  
Dr. Deborah Cook

5. Manuscript Title  
Fluid Resuscitation in Sepsis: A systematic review and network meta-analysis.

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M14-0178

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I have no conflict of interest.

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## ICMJE Form for Disclosure of Potential Conflicts of Interest

### Section 1. Identifying Information

1. Given Name (First Name)  
Michael

2. Surname (Last Name)  
Wang

3. Date  
09-July-2014

4. Are you the corresponding author?

☐ Yes

☒ No

Corresponding Author's Name  
Rochweg B

5. Manuscript Title  
Fluid Resuscitation in Sepsis: A systematic review and network meta-analysis

6. Manuscript Identifying Number (if you know it)

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Dr. Wang has nothing to disclose.

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## ICMJE Form for Disclosure of Potential Conflicts of Interest

### Section 1. Identifying Information

1. Given Name (First Name) Qi	2. Surname (Last Name) Zhou	3. Date 22-May-2014
4. Are you the corresponding author? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Corresponding Author's Name Bram Rochwerg,
5. Manuscript Title Fluid Resuscitation in Sepsis: A systematic review and network meta-analysis		
6. Manuscript Identifying Number (if you know it) M14-0178		

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### 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.

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. You should disclose interactions with ANY entity that could be considered broadly relevant to the work. For example, if your article is about testing an epidermal growth factor receptor (EGFR) antagonist in lung cancer, you should report all associations with entities pursuing diagnostic or therapeutic strategies in cancer in general, not just in the area of EGFR or lung cancer.

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#### 4. Intellectual Property.

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

#### 5. Relationships not covered above.

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## ICMJE Form for Disclosure of Potential Conflicts of Interest

### Section 1. Identifying Information

1. Given Name (First Name)  
Roman

2. Surname (Last Name)  
Jaeschke

3. Date  
22-May-2014

4. Are you the corresponding author?

☐ Yes ☒ No

Corresponding Author's Name  
Deborah Cook

5. Manuscript Title  
Fluid resuscitation in sepsis - systematic review and meta-analysis

6. Manuscript Identifying Number (if you know it)  
M14-0178

### 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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## ICMJE Form for Disclosure of Potential Conflicts of Interest

### Section 1. Identifying Information

1. Given Name (First Name)

Anna

2. Surname (Last Name)

Wludarczyk

3. Date

12-April-2014

4. Are you the corresponding author?

☐ Yes ☒ No

Corresponding Author's Name

Deborah Cook

5. Manuscript Title

Fluid Resuscitation in Sepsis: A systematic review and network meta-analysis

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Dr. Wludarczyk has nothing to disclose.

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### Section 1. Identifying Information

1. Given Name (First Name) Anees	2. Surname (Last Name) Sindi	3. Date 18-July-2014
4. Are you the corresponding author? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Corresponding Author's Name Dr. Deborah Cook
5. Manuscript Title Fluid Resuscitation in Sepsis: A systematic review and network meta-analysis.		
6. Manuscript Identifying Number (if you know it) 		

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Dr. Sindi has nothing to disclose.

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