

Instructions

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Section 1.	Identifying Inforr	nation		
1. Given Name (Fi Qiang	rst Name)	2. Surname (Last Name) PAN		3. Date 23-September-2014
4. Are you the cor	responding author?	Yes 🖌 No	Corresponding Author's Na	me
		and the progression of ch	ronic kidney disease: Finding	gs from the Chronic Renal
6. Manuscript Ide	ntifying Number (if you k	now it)		
Section 2.				

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Are there any relevant conflicts of interest? Yes

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Are there any relevant conflicts of interest? \Box Yes \checkmark No

Section 4. Intellectual Property -- Patents & Copyrights

Do you have any patents, whether planned, pending or issued, broadly relevant to the work?	Yes	V N	lo
)			



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3. Date 23-September-2014	
Corresponding Author's Name Dr Amanda D Hyre	
dings from the Chronic Renal	

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Are there any relevant conflicts of interest? \checkmark Yes No.	Are there ar	ny relevant	conflicts	of interest?	🖌 Yes	No
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If yes, please fill out the appropriate information below. If you have more than one entity press the "ADD" button to add a row.
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Name of Institution/Company	Grant?	Personal Fees	Non-Financial Support <mark>?</mark>	Other?	Comments	
NIDDK	\checkmark					

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Dr. Wright reports grants from NIDDK, during the conduct of the study; .

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1. Given Name (First Name) Harold	2. Surname (Last Name) Feldman	3. Date 23-September-2014
4. Are you the corresponding author?	Yes 🖌 No	Corresponding Author's Name Amanda Anderson
5. Manuscript Title Time-updated systolic blood press Insufficiency Cohort (CRIC) Study	ure and the progression of cl	nronic kidney disease: Findings from the Chronic Renal
6. Manuscript Identifying Number (if v	ou know it)	

M14-0488

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National Institutes of Health	\checkmark					

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Name of Entity	Grant?	Personal Fees	Non-Financial Support?	Other?	Comments	
Kyowa Kirin		\checkmark			Invited speaker	
Glaxo Smith Kline		\checkmark			Invited speaker	



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Dr. Feldman reports grants from National Institutes of Health, during the conduct of the study; personal fees from Kyowa Kirin, personal fees from Glaxo Smith Kline, outside the submitted work; .

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Section 1.	Identifying Infor	mation	
1. Given Name (F Wei	irst Name)	2. Surname (Last Name) Yang	3. Date 25-September-2014
4. Are you the co	rresponding author?	Yes 🖌 No	Corresponding Author's Name Amander Anderson
•		and the progression of ch	ronic kidney disease: Findings from the Chronic Renal
6. Manuscript Ide M14-0488	ntifying Number (if you	know it)	

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Are there any relevant conflicts of interest?		Yes	\checkmark	1
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\mathbf{v}	Do you have any patents, whether planned, pending or issued, broadly relevant to the work? $\; [$	Yes	🖌 No	
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1. Given Name (Fin susan	rst Name)	2. Surname (Last Name) steigerwalt		3. Date 26-September-2014
4. Are you the corresponding author?		Yes 🖌 No	Corresponding Author's Na	ime
5. Manuscript Title Time averaged b	e lood pressure and out	tcomes in CRIC		

6. Manuscript Identifying Number (if you know it)

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NIDDK	\checkmark		\checkmark		symgmacor machine for CRICwork through ancillary	

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S		No
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1. Given Name (First Name) Matthew	mation 2. Surname (Last Name) Weir	3. Date 24-September-2014
4. Are you the corresponding author?	Yes 🖌 No	Corresponding Author's Name Amanda Hyu Anderson, PhD
5. Manuscript Title "Time-updated systolic blood pressur Insufficiency Cohort (CRIC) Study"		onic kidney disease: Findings from the Chronic Renal
6. Manuscript Identifying Number (if you	know it)	

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.)?

🖌 No

Are there any relevant conflicts of interest?		Yes
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Section 3. Relevant financial activities outside the submitted work.

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No

Are there any relevant conflicts of interest?		Yes	\checkmark	
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Section 4. Intellectual Property -- Patents & Copyrights

Do you have any patents, whether planned, pending of issued, broadly relevant to the work? res v no	ents, whether planned, pending or issued, broadly relevant to the wo	k? Yes 🖌	No
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Section 5. 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):

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Section 6. Disclosure Statement

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No relevant conflicts to disclose.

Evaluation and Feedback



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Section 1.	Identifying Inform	nation			
1. Given Name (Fir Jiang	st Name)	2. Surname (Last Name) He	3. Date 22-September-2014		
4. Are you the corresponding author? Yes ✓ No		Yes 🖌 No	Corresponding Author's Name Amanda Anderson		
5. Manuscript Title Time-updated sy Insufficiency Coh	stolic blood pressure a	and the progression of ch	ronic kidney disease: Findings from the Chronic Renal		
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🖌 No

Are there any relevant conflicts of interest?	Yes	
---	-----	--

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No

Are there any relevant conflicts of interest?		Yes	\checkmark	1
---	--	-----	--------------	---

Section 4. Intellectual Property -- Patents & Copyrights

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



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Dr. He has nothing to disclose.

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Section 1. Identifying Inf	Identifying Information							
1. Given Name (First Name) Mahboob	2. Surname (Last Name) Rahman	3. Date 23-September-2014						
4. Are you the corresponding author?	Yes 🖌 No	Corresponding Author's Name						
5. Manuscript Title Time updated BP CRIC								

6. Manuscript Identifying Number (if you know it)

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Are there any relevant conflicts of interest? Yes

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Are there any relevant conflicts of interest? Yes 🗸 No

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Dr. Rahman has nothing to disclose.

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Section 1.	Identifying Infor	mation	
1. Given Name (Fii Amanda	rst Name)	2. Surname (Last Name) Anderson	3. Date 23-September-2014
4. Are you the corr	responding author?	✓ Yes No	

5. Manuscript Title

Time-updated systolic blood pressure and the progression of chronic kidney disease: Findings from the Chronic Renal Insufficiency Cohort (CRIC) Study

6. Manuscript Identifying Number (if you know it)

M14-0488

Section 2. The Work Under Consideration for Publication

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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	٧.
Excess rows can be removed by pressing the "X" button.	

Name of Institution/Company	Grant?	Personal Fees	Non-Financial Support <mark>?</mark>	Other?	Comments	
National Institute of Diabetes and Digestive and Kidney Diseases	\checkmark					

Section 3.

Relevant financial activities outside the submitted work.

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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



Section 5. Relationships not covered above

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Dr. Anderson reports grants from National Institute of Diabetes and Digestive and Kidney Diseases, during the conduct of the study; .

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1. Given Name (Firs RadhaKrishna	t Name)	2. Surname (Last Name) Kallem	3. Date 23-September-2014		
4. Are you the corresponding author? Yes 🖌 No		Yes 🖌 No	Corresponding Author's Name Amanda H. Anderson		
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Are there any relevant conflicts of interest?	Yes
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Are there any relevant conflicts of interest?		Yes	\checkmark	
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Section 4. Intellectual Property -- Patents & Copyrights

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--	--	-----------	-----	------



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Section 1.	Identifying Inform	nation	
1. Given Name (Fi Raymond	rst Name)	2. Surname (Last Name) Townsend	3. Date 23-September-2014
4. Are you the corresponding author? Yes		Yes 🖌 No	Corresponding Author's Name Amanda Hyre-Anderson
		and the progression of ch	nronic kidney disease: Findings from the Chronic Renal
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14-0488

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Name of Institution/Company	Grant?	Personal Fees?	Non-Financial Support <mark>?</mark>	Other?	Comments	
NIH	\checkmark					

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No

Are there any relevant conflicts of interest? \checkmark Yes

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Name of Entity	Grant?	Personal Fees	Non-Financial Support?	Other?	Comments	
Janssen		\checkmark			Consultant	
Medtronic		\checkmark			Consultant	



Section 4. Intellectual Property -- Patents & Copyrights

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Dr. Townsend reports grants from NIH, during the conduct of the study; personal fees from Janssen, personal fees from Medtronic, outside the submitted work; .

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Section 1. Identifying Infor	mation	the second second second second
1. Given Name (First Name) Ecg (A	2. Surname (Last Name) M. 119 R	3. Date 12/6/17
4. Are you the corresponding author?	Yes No	
5. Manuscript Title ゴブルゼークロ475の 5Y/h 6. Manuscript Identifying Number (if you MIY-CY を	Know it) KUNKY dissure	+ the Precepssion of Chronic Findings from the CRIC
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of compensation) with entities as desc	cribed in the instructions. Use one line for eport relationships that were present d	ive financial relationships (regardless of amount or each entity; add as many lines as you need by uring the 36 months prior to publication .
Section 4. Intellectual Prope	erty Patents & Copyrights	
Do you have any patents, whether pla	nned, pending or issued, broadly releva	nt to the work? Yes No



Section 5.

Relationships not covered above

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Evaluation and Feedback

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	Identifying Inforr	nation			
1. Given Name (First James	Name)	2. Surname (Last Nam Lash	e) 3. Date 18-December-2014		
4. Are you the corresponding author?		Yes 🖌 No	Yes 🖌 No Corresponding Author's Name Amanda Anderson		
5. Manuscript Title Time-updated syst Insufficiency Coho	•	and the progression of	chronic kidney disease: Findings from the Chronic Renal		
6. Manuscript Identi	fying Number (if you k	now it)			

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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 an	y relevant	conflicts	of interest?	\checkmark	Yes		No
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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 <mark>?</mark>	Other?	Comments	
NIDDK	\checkmark					

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Place a check in the appropriate boxes in the table to indicate whether you have financial relationships (regardless of amount of compensation) with entities as described in the instructions. Use one line for each entity; add as many lines as you need by clicking the "Add +" box. You should report relationships that were **present during the 36 months prior to publication**.

Are there any relevant conflicts of interest? \Box Yes \checkmark 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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Dr. Lash reports grants from NIDDK, during the conduct of the study; .

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1. Given Name (First Name) Lawrence	2. Surname (Last Name) Appel	3. Date 19-December-2014
4. Are you the corresponding author?	Yes 🖌 No Correspo	onding Author's Name
5. Manuscript Title Time-updated systolic blood press Insufficiency Cohort (CRIC) Study	ure and the progression of chronic kidne	y disease: Findings from the Chronic Renal
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any aspect of the submitted work (incl statistical analysis, etc.)? Are there any relevant conflicts of	uding but not limited to grants, data monitori nterest? 🖌 Yes 🗌 No	ty (government, commercial, private foundation, etc.) fo ing board, study design, manuscript preparation, an one entity press the "ADD" button to add a row
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1. Given Name (Fi				
A	rst Name)	2. Surname (Last Name)		3. Date
Alan		Go		19-December-2014
4. Are you the cor	responding author?	Yes 🗸 No	Corresponding Autho	pr's Name
			Amanda Hyre Ande	
Insufficiency Col	ystolic blood pressure hort (CRIC) Study		hronic kidney disease: F	indings from the Chronic Renal
6. Manuscript Idei M14-0488	ntifying Number (if you k	(now it)		
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Section 1.	Identifying Inform	mation	
1. Given Name (Fi Jeanne	rst Name)	2. Surname (Last Name Charleston	e) 3. Date 17-December-2014
4. Are you the cor	responding author?	Yes 🖌 No	Corresponding Author's Name Amanda Hyre
Insufficiency Col			chronic kidney disease: Findings from the Chronic Renal
Section 2.	The Work Under (Consideration for Pul	blication

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Are there any relevant conflicts of interest?		Yes
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Section 4. Intellectual Property -- Patents & Copyrights

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Definitions.

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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

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



Section 1.	Identifying Infor	mation	
1. Given Name (F Glenn	irst Name)	2. Surname (Last Name) Chertow	3. Date 18-December-2014
4. Are you the co	rresponding author?	Yes 🖌 No	Corresponding Author's Name Anderson
•		and the progression of cl	nronic kidney disease: Findings from the Chronic Rena
6. Manuscript Ide M14-0488	ntifying Number (if you	know it)	

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.)?

🖌 No

Are there any relevant conflicts of interest? Yes

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Place a check in the appropriate boxes in the table to indicate whether you have financial relationships (regardless of amount of compensation) with entities as described in the instructions. Use one line for each entity; add as many lines as you need by clicking the "Add +" box. You should report relationships that were **present during the 36 months prior to publication**.

No

Are there any relevant conflicts of interest? Yes

If yes, please fill out the appropriate information below.

Name of Entity	Grant?	Personal Fees	Non-Financial Support?	Other?	Comments	
Ardelyx				\checkmark	Stock, stock options	
Allocure				\checkmark	Stock, stock options	
Amgen	\checkmark	\checkmark			Grant + co-chair, trial steering committee for AMG-416, a calcimimetic agent	
Thrasos Innovation				\checkmark	Stock, stock options	
PuraCath Medical				\checkmark	Stock, stock options, Board membership	
Satellite Healthcare				\checkmark	Board membership	



Name of Entity	Grant?	Personal Fees	Non-Financial Support?	Other?	Comments	
Gilead		\checkmark			Advisory Board	
Janssen	\checkmark				National Leader, CREDENCE trial	
Home dialysis plus				\checkmark	stock options	

Section 4.

Intellectual Property -- Patents & Copyrights

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

Section 5.

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. Chertow reports other from Ardelyx, other from Allocure, grants, personal fees and other from Amgen, other from Thrasos Innovation, other from PuraCath Medical, other from Satellite Healthcare, personal fees from Gilead, grants from Janssen, other from Home dialysis plus, outside the submitted work; .



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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.

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. Please note that your interactions with the work's sponsor that are outside the submitted work should also be listed here. If there is any question, it is usually better to disclose a relationship than not to do so.

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. Public funding sources, such as government agencies, charitable foundations or academic institutions, need not be disclosed. For example, if a government agency sponsored a study in which you have been involved and drugs were provided by a pharmaceutical company, you need only list the pharmaceutical company.

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



Section 1.	Identifying Infor	mation		
1. Given Name (First Name) John		2. Surname (Last Name Kusek)	3. Date 23-September-2014
4. Are you the co	rresponding author?	Yes 🖌 No	ame	
5. Manuscript Titl Time updated sy		and the progression of C	KD: findings from the CRIC S	tudy
6. Manuscript Ide	ntifying Number (if you l	(now it)		
Section 2.	The Work Under (Consideration for Pub	olication	
any aspect of the s statistical analysis,	submitted work (includir , etc.)?	ig but not limited to grants,	data monitoring board, study de	ommercial, private foundation, etc.) for esign, manuscript preparation,
Are there any re	levant conflicts of inte	rest? Yes 🖌 No)	
Section 3.	Relevant financia	l activities outside th	e submitted work.	

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Are there any relevant conflicts of interest?		Yes	\checkmark	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
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Section 5. Relationships not covered above

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