

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

Pinsky 1



Section 1.	Identifying Information					
1. Given Name (First Name) Paul		2. Surname (Last Name) Pinsky		3. Date		
4. Are you the corresponding author?		✓ Yes No				
5. Manuscript Title National Lung Sc		by Age: Medicare Eligible	versus under 65 Population	1		
6. Manuscript lder M14-1484	ntifying Number (if you kr	now it)				
Section 2.	The Work Under C	onsideration for Publ	ication			
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 Ves						
Section 3.	Relevant financial	activities outside the	submitted work.			
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Section 4.	Intellectual Prope	rty Patents & Copyri	ights			
Do you have any patents, whether planned, pending or issued, broadly relevant to the work? Yes Vo						

Pinsky 2



Section 5. Polationships not sovered above
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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. Pinsky has nothing to disclose.

Evaluation and Feedback

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Pinsky 3



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

Gierada 1



Section 1. Identifying Inform						
Identifying Information						
Given Name (First Name) David	2. Surname (Last Name) Gierada		3. Date 18-August-2014			
4. Are you the corresponding author?	Yes ✓ No	No Corresponding Author's Name				
5. Manuscript Title National Lung Screening Trial Findings	by Age: Medicare eligible	versus under 65 pop	ulation			
6. Manuscript Identifying Number (if you kn M14-1484	ow it)					
Section 2. The Work Under Co	onsideration for Publi	ication				
Did you or your institution at any time recei any aspect of the submitted work (including statistical analysis, etc.)? Are there any relevant conflicts of intere	but not limited to grants, d		ent, commercial, private foundation, etc.) for cudy design, manuscript preparation,			
If yes, please fill out the appropriate info	ormation below. If you ha	ve more than one ent	ity press the "ADD" button to add a row.			
Name of Institution/Company	Grant	on-Financial Other?	Comments			
National Cancer Institute			Washington University NLST screening center activities were supported by NCI contract N01-CN-25516			
Section 3. Relevant financial	activities outside the	submitted work.				
Place a check in the appropriate boxes i of compensation) with entities as descri clicking the "Add +" box. You should rep Are there any relevant conflicts of intere If yes, please fill out the appropriate info	bed in the instructions. Uport relationships that we est? Yes No	Ise one line for each e	ntity; add as many lines as you need by			
Name of Entity	Grant	on-Financial Other?	Comments			
/uComp, Inc.			Provided medical images for use in			

Gierada 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
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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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. Gierada reports other from National Cancer Institute, during the conduct of the study; other from VuComp, Inc., outside the submitted work; .

Evaluation and Feedback

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Gierada 3



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Hocking 1



Section 1. Identifying Inform	nation				
1. Given Name (First Name) William	2. Surname (Last Name) Hocking		3. Date 18-August-2014		
4. Are you the corresponding author?	☐ Yes ✓ No	Corresponding Author's Name Paul Pinsky			
5. Manuscript Title National Lung Screening Trial Findings by Age: Medicare eligible versus under 65 population					
6. Manuscript Identifying Number (if you kr M14-1484	iow it)				
Section 2. The Work Under Co	onsideration for Publi	cation			
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Name of Institution/Company	Grant'	n-Financial Other?	Comments		
NCI	V		No Conflict of interest		
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Hocking 2



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Dr. Hocking reports grants from NCI, during the conduct of the study; .

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Kramer 1



Section 1. Identifying Inform	nation				
1. Given Name (First Name) Barnett	2. Surname (Last Name) Kramer		3. Date 18-August-2014		
4. Are you the corresponding author?	Yes No Corresponding Author's Paul Pinsky		ne		
5. Manuscript Title National Lung Screening Trial Findings	by Age: Medicare eligible	versus under 65 population			
6. Manuscript Identifying Number (if you kr M14-1484	now it)				
Section 2. The Work Under Co	onsideration for Public	cation			
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Kramer 2



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Dr. Kramer has nothing to disclose.

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Section 1. Identifying Information						
1. Given Name (First Name) Edward	2. Surname (Las Patz, Jr.	t Name)	3. Date 18-August-2014			
4. Are you the corresponding author?	Yes ✓	No Correspond Paul Pinsk	ding Author's Name Y			
5. Manuscript Title National Lung Screening Trial Findings by Age: Medicare eligible versus under 65 population						
6. Manuscript Identifying Number (if you know it) M14-1484						
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Name of Entity	Grant? Perso	Non-Financial s? Support?	Other? Comments			
abCorp	✓		Supported a serum biomarker study in my laboratory for indeterminate pulmonary nodules.			
Cue Biologics, LLC			Founder of Cue Biologics. This company is a new start-up based on research from my laboratory, and is developing a new therapeutic antibody for cancer.			



Section 4. Intellectual Property - Potents & Consumerts					
Intellectual Property Patents & Copyrights					
Do you have any patents, whether planned, pending or issued, broadly relevant to the work? 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.					
Patent?	Pending? Issued?	Licensed? Royalties?	Licensee?	Comments	
Therapeutic Antibody for cancer	V			A preliminary patent has been filed for a new human derived therapeutic antibody for cancer.	
Section 5. Relationshi	ps not covered ab	ove			
Are there other relationships or potentially influencing, what yo		-	influenced, or the	at give the appearance of	
Yes, the following relationsh		•		st	
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Section 6. Disclosure Statement					
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Dr. Patz, Jr. reports grants from LabCorp , other from Cue Biologics, LLC, outside the submitted work; In addition, Dr. Patz, Jr. has a patent Therapeutic Antibody for cancer pending.					



Evaluation and Feedback

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