

ICMJE Form for Disclosure of Potential Conflicts of Interest

Instructions

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

ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name) Hein	2. Surname (Last Name) Janssens	3. Date 07-May-2015
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Timothy H. Rainer
5. Manuscript Title Oral Prednisolone in the Treatment of Acute Gout: A Pragmatic, Multi-centre, Double-Blind, Randomized Trial		
6. Manuscript Identifying Number (if you know it) M14-2070		

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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

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Dr. Janssens 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) Yu Fai	2. Surname (Last Name) Choi	3. Date 08-May-2015
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name _____
5. Manuscript Title Oral Prednisolone in the Treatment of Acute Gout: A Pragmatic, Multi-centre, Double-Blind, Randomized Trial	_____	
6. Manuscript Identifying Number (if you know it)	_____	

Section 2. The Work Under Consideration for Publication

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Dr. Choi has nothing to disclose.

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Section 1. Identifying Information

1. Given Name (First Name) Colin 2. Surname (Last Name) Graham 3. Date 08-May-2015

4. Are you the corresponding author? Yes No Corresponding Author's Name
Timothy H Rainer

5. Manuscript Title
Oral Prednisolone in the Treatment of Acute Gout: A Pragmatic, Multi-centre, Double-Blind, Randomized Trial

6. Manuscript Identifying Number (if you know it)
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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?	Other?	Comments
Health and Health Services Research Grant Committee of the Hong Kong Government HK\$486 080 [HHSRF 07080581]	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

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Dr. Graham reports grants from Health and Health Services Research Grant Committee of the Hong Kong Government HK\$486 080 [HHSRF 07080581], during the conduct of the study; .

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Section 1. Identifying Information

1. Given Name (First Name)
Timothy

2. Surname (Last Name)
Rainer

3. Date
14-May-2015

4. Are you the corresponding author? Yes No

5. Manuscript Title
Oral Prednisolone in the Treatment of Acute Gout: A Pragmatic, Multi-centre, Double-Blind, Randomized, Trial

6. Manuscript Identifying Number (if you know it)
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Are there any relevant conflicts of interest? Yes No

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Dr. Rainer reports grants from Health and Health Services Research Grant Committee of the Hong Kong Government, during the conduct of the study; .

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Section 1. Identifying Information

1. Given Name (First Name) Chi Hung	2. Surname (Last Name) Cheng	3. Date 05-October-2015
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Prof. Timothy Rainer
5. Manuscript Title Oral Prednisolone in the Treatment of Acute Gout: A Pragmatic, Multi-centre, Double-Blind, Randomized Trial		
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Dr. Cheng has nothing to disclose.

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4. Intellectual Property.

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

ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name) Ka Hing Herman	2. Surname (Last Name) Lee	3. Date 16-May-2015
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Timothy H Rainer
5. Manuscript Title Oral Prednisolone in the Treatment of Acute Gout: A Pragmatic, Multi-centre, Double-Blind, Randomized Trial		
6. Manuscript Identifying Number (if you know it) M14-2070		

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

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. Lee 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) Chi Yin	2. Surname (Last Name) Man	3. Date 02-December-2015
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Graham C.A.
5. Manuscript Title Oral Prednisolone in the Treatment of Acute Gout: A Pragmatic, Multi-centre, Double-Blind, Randomized Trial		
6. Manuscript Identifying Number (if you know it) M14-2070		

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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

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. Man 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) Wah Hon	2. Surname (Last Name) Yau	3. Date 15-September-2015
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Timothy Hudson Rainer
5. Manuscript Title Oral Prednisolone in the Treatment of Acute Gout: A Pragmatic, Multi-centre, Double-Blind, Randomized Trial		
6. Manuscript Identifying Number (if you know it) _____		

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name) Lai-Shan	2. Surname (Last Name) Tam	3. Date 12-September-2015
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Timothy Rainer
5. Manuscript Title Oral Prednisolone in the Treatment of Acute Gout: A Pragmatic, Multi-centre, Double-Blind, Randomized Trial		
6. Manuscript Identifying Number (if you know it) M14-2070		

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Dr. Tam has nothing to disclose.

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