

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.

Identifying information.

The work under consideration for publication.

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Relevant financial activities outside the submitted work.

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

patent

Kulasingam 1



Section 1.	Identifying Inform	nation			
1. Given Name (Fii Shalini	rst Name)	2. Surname (Last Nam Kulasingam	e)	3. Date 18-March	-2015
4. Are you the cor	responding author?	Yes ✓ No	Correspondin George Saw	ng Author's Name raya	
5. Manuscript Title Cervical Cancer S American Colleg	Screening in Average Ri	isk Women: Best Practi	ce Advice from the	e Clinical Guidelines Co	mmittee of the
6. Manuscript Ider M14-2426	ntifying Number (if you kn	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?	s, data monitoring b	overnment, commercial, proportion of the proport	
Name of Institut	ion/Company	Grant? Personal Fees?	Non-Financial Support?	Other? Comments	
American College of	Physicians				
	ı				
Section 3.	Relevant financial	activities outside tl	ne submitted w	ork.	
of compensation clicking the "Add) with entities as descri	ibed in the instructions port relationships that —	s. Use one line for o were present dur	e financial relationships each entity; add as man ring the 36 months pri	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 relevant	to the work? Yes	✓ No

Kulasingam 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?
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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. Kulasingam reports personal fees from American College of Physicians, during the conduct of the study.

Evaluation and Feedback

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Kulasingam 3



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1

administrative support, etc.



Section 1.	Identifying Inform	ation					
1. Given Name (Fi George	rst Name)	2. Surname (Last Name Sawaya)		3. Date 06-April-201	5	
4. Are you the cor	responding author?	✓ Yes No					
American Colleg	Screening in Average-R		ce Advice From	the Clinical C	Guidelines Com	mittee of the	
Section 2.	The Work Under Co	onsideration for Pub	olication				
any aspect of the s statistical analysis, Are there any rela If yes, please fill c	stitution at any time recei ubmitted work (including etc.)? evant conflicts of intere out the appropriate info be removed by pressing	but not limited to grants, est? Yes No ormation below. If you h	data monitoring	g board, study	design, manuscri	pt preparation,	
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Section 3.	Relevant financial	activities outside th	e submitted	work.			
of compensation clicking the "Add Are there any rel	the appropriate boxes i	bed in the instructions. port relationships that v	Use one line fo vere present d	or each entity	/; add as many li	ines as you need	
Section 4.	Intellectual Proper	ty Patents & Copy	rights				
Do you have any	patents, whether plani	ned, pending or issued,	broadly releva	ant to the wor	rk? Yes	✓ No	

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Section 5.					
Section 5.	Relationships not covered above				
	elationships or activities that readers could perceive to have influenced, or that give the appearance of encing, what you wrote in the submitted work?				
Yes, the follow	Yes, the following relationships/conditions/circumstances are present (explain below):				
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	anuscript acceptance, journals will ask authors to confirm and, if necessary, update their disclosure statements rnals may ask authors to disclose further information about reported relationships.				
Section 6.					
Section 0.	Disclosure Statement				
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Dr. Sawaya was o	commissioned by the American College of Physicians to write this manuscript and received an honorarium.				

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Sawaya 3



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dallas 1



Given Name (First Name) apostolos	2. Surname (Last Name) dallas		3. Date 16-April-2015
4. Are you the corresponding author?	☐ Yes ✓ No	Corresponding Aut	hor's Name
5. Manuscript Title Cervical Cancer Screening in Average American College of Physicians,	Risk Women: Best Practice	Advice from the Clir	nical Guidelines Committee of the
5. Manuscript Identifying Number (if you	know it)		
Section 2. The Work Under			
The Work Under	Consideration for Public	cation	
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dallas 2



Soutien A				
Section 4. Intellectual Property Patents & Copyrights				
Do you have any patents, whether planned, pending or issued, broadly relevant to the work? Yes V				
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Dr. dallas reports other from ortho, other from sanofi, other from merck, other from pfizer, other from glaxo, outside the submitted work; .				

Evaluation and Feedback

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dallas 3



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Kansagara 1



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1. Given Name (Fir Devan	st Name)	2. Surname (Last Name) Kansagara	3. Date 08-April-2015			
4. Are you the corr	e you the corresponding author? Yes Yes Corresponding Author's Name Amir Qaseem					
Cervical Cancer S	5. Manuscript Title Cervical Cancer Screening in Average Risk Women: Best Practice Advice from the Clinical Guidelines Committee of the American College of Physicians					
6. Manuscript Iden	itifying Number (if you kn	now it)				
Section 2.	The Work Under Co	onsideration for Public	cation			
any aspect of the su 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,			
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Kansagara 2



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Section 1.

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1. Given Name (First Name) 2. Surname (Last Name) SwEET 3. Date 4/8/2015
4. Are you the corresponding author? Yes No
5. Manuscript Title Cerrical Cared Suesing in Brenz Rich Womers Bred 6. Manuscript Identifying 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.)? Are there any relevant conflicts of interest? Yes XNo
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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? Yes No
Section 4. Intellectual Property Patents & Copyrights
Do you have any patents, whether planned, pending or issued, broadly relevant to the work? Yes X No



Section 5.

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? The following relationships/conditions/circumstances are present (explain below): Mo other relationships/conditions/circumstances that present a potential conflict of interest 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. Evaluation and Feedback

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Relationships not covered above.

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earning royalties or not

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

patent

Schunemann 1



Section 1.	Identifying Inform	ation				
1. Given Name (Fi Holger	rst Name)	2. Surnai Schuner	me (Last Name) mann	3. Date 08-April-2015		
4. Are you the cor	Are you the corresponding author? Yes No					
Cervical Cancer S American Colleg	5. Manuscript Title Cervical Cancer Screening in Average Risk Women: Best Practice Advice from the Clinical Guidelines Committee of the American College of Physicians 6. Manuscript Identifying Number (if you know it)					
Section 2.	The Weyle Under C		tion for Publication			
any aspect of the s statistical analysis, Are there any rel	ititution at any time recei ubmitted work (including	ve paymen but not lin	nt or services from a third party (government mited to grants, data monitoring board, study Yes 🕡 No			
Section 3.	Relevant financial	activities	s outside the submitted work.			
of compensation clicking the "Add) with entities as descri	bed in the port relation	e to indicate whether you have financial instructions. Use one line for each entitonships that were present during the 3 Yes No	y; add as many lines as you need by		
Section 4.	Intellectual Proper	ty Pate	ents & Copyrights			
Do you have any	patents, whether plan	ned, pend	ling or issued, broadly relevant to the wo	ork? Yes 🗸 No		

Schunemann 2



Section 5. Polotionships 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?
Yes, the following relationships/conditions/circumstances are present (explain below):
No other relationships/conditions/circumstances that present a potential conflict of interest
I have played a critical role in the World Health Organization cervical cancer screening and treatment guidelines for low and middle income countries.
At the time of manuscript acceptance, journals will ask authors to confirm and, if necessary, update their disclosure statement 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. Schunemann reports and I have played a critical role in the World Health Organization cervical cancer screening and treatment guidelines for low and middle income countries

Evaluation and Feedback

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Schunemann 3



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

humphrey 1



Section 1.	Identifying Inform	ation	
1. Given Name (Fi linda		2. Surname (Last Name) humphrey	3. Date 08-April-2015
4. Are you the cor	responding author?	Yes ✓ No	Corresponding Author's Name
5. Manuscript Title Cervical Cancer American Colleg	Screening in Average Ri	isk Women: Best Practice A	advice from the Clinical Guidelines Committee of the
6. Manuscript Ide	ntifying Number (if you kn	ow it)	
			-
Section 2.	The Work Under Co	onsideration for Public	ation
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 ta monitoring board, study design, manuscript preparation,
rue mere any re.	evant commets of meet		
Section 3.			
Section 3.	Relevant financial	activities outside the s	ubmitted work.
of compensation clicking the "Add	n) with entities as descri I +" box. You should rep	bed in the instructions. Us port relationships that wer	ether you have financial relationships (regardless of amount e 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 fer	evant conflicts of intere	est?	
Section 4.	Intellectual Proper	ty Patents & Copyrig	hts
Do you have any	patents, whether plan	ned, pending or issued, br	oadly relevant to the work? Yes V No

humphrey 2

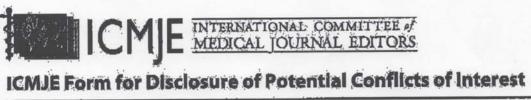


Section 5.	
Section 3.	Relationships not covered above
	elationships or activities that readers could perceive to have influenced, or that give the appearance of encing, what you wrote in the submitted work?
Yes, the follow	wing relationships/conditions/circumstances are present (explain below):
✓ No other rela	tionships/conditions/circumstances that present a potential conflict of interest
	anuscript acceptance, journals will ask authors to confirm and, if necessary, update their disclosure statements rnals may ask authors to disclose further information about reported relationships.
Section 6.	Disclosure Statement
Based on the abo	ove disclosures, this form will automatically generate a disclosure statement, which will appear in the box
Dr. humphrey ha	as nothing to disclose.

Evaluation and Feedback

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humphrey 3



I. Given Name (First Name)	2. Surname (Last Name) FOR OLE	de pub	3. Date 4/13 (15
Are you the corresponding author?	Yes No.		
5. Manuscript Title CUTCUL CUMUV	Screening in airto	see risk wo	me
S. Manuscript Identifying Number (If y	2011 1 2 10	0 .	
Section 2. The Work Had	er Consideration for Public	ation	
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ny aspect of the submitted work (Incl) tatistical analysis, etc.)?	iding but not limited to grants, de	a third party (governme to monitoring board, stu	nt commercial; private (pundation/erc) idy design, manuscript preparation.
ny aspect of the submitted work (Incli tatistical analysis, etc.)? The there any relevant conflicts of I	iding but not limited to grants, de	ra monitoring poard, stu	nt commercial: private (quindation/erc.) idy design, manuscript preparation.
ny aspect of the submitted work and traitical analysis, etc.)? The there any relevant conflicts of learning the submitted work and the submitted work and the submitted work and the submitted work and the submitted with entities as a submitted work and submitted work	iding but not limited to grams, danterest? Yes, No	submitted work. sether you have finances one line for each en	nt commercial; private (pundation, erc.) idy design, manuscript preparation, lai relationships (regardless of amountry) add as many lines as you need b
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Section 5.	Relationships not covered above
Are there other potentially influ	relationships or activities that readers could perceive to have influenced, or that give the appearance of encing, what you wrote in the submitted work?
Yes the follo	owing relationships/conditions/circumstances are present (explain below):
	ationships/conditions/circumstances that present a potential conflict of interest
At the time of n On occasion, jo Section 6.	nanuscript acceptance, journals will ask authors to confirm and, if necessary, update their disclosure statement urnals may ask authors to disclose further information about reported relationships. Disclosure Statement
	ove disclosures, this form will automatically generate a disclosure statement, which will appear in the box
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Section 1. Identifying Inforn	nation	
Given Name (First Name) Michael	2. Surname (Last Name) Barry	3. Date 12-April-2015
4. Are you the corresponding author?	☐ Yes ✓ No	Corresponding Author's Name Amir Qaseem
5. Manuscript Title Cervical Cancer Screening in Average R American College of Physicians	lisk Women: Best Practice	Advice from the Clinical Guidelines Committee of the
6. Manuscript Identifying Number (if you k	now it)	
Section 2. The Work Under C	onsideration for Publi	ication
Did you or your institution at any time rece	eive payment or services fron g but not limited to grants, d	n a third party (government, commercial, private foundation, etc.) for lata monitoring board, study design, manuscript preparation,
Section 3. Relevant financial	activities outside the	submitted work.
of compensation) with entities as descr clicking the "Add +" box. You should re	ribed in the instructions. Uport relations that we	hether you have financial relationships (regardless of amount Use one line for each entity; add as many lines as you need by ere present during the 36 months prior to publication .
Are there any relevant conflicts of inter		



Name of Entity	Grant?	Fees?	Support?	Other?	Comments
Informed Medical Decisions Foundation/ Healthwise	V	✓	✓		I am president of the Informed Medical Decisions Foundation, a division of Healthwise, Inc. Healthwise is a nonprofit organization that develops and licenses patient education and decision support materials. I am an employee and Chief Science Officer at Healthwise. Prior to December 31, 2013, the Foundation had a research and royalty agreement with Health Dialog, with which it coproduced patient decision aids. Both the Foundation and Healthwise have provided grants to Massachusetts General Hospital to support my non- product-related research.
Massachusetts General Hospital/Harvard Medical School		✓	/		I am employed as a primary care physician at Massachusetts General Hospital. I am a Professor of Medicine, Part-time, at Harvard Medical School
Do you have any patents, whether plant Section 5. Relationships not	ned, pendi	ing or issue		nt to the	work? ☐ Yes 🗸 No
Are there other relationships or activitie potentially influencing, what you wrote				nfluence	d, or that give the appearance of
Yes, the following relationships/conditions/circumstances are present (explain below): 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. Barry reports grants, personal fees and non-financial support from Informed Medical Decisions Foundation/Healthwise, personal fees and non-financial support from Massachusetts General Hospital/Harvard Medical School, outside the submitted work;

Evaluation and Feedback

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Cooke 1



Section 1.	Identifying Inform	nation				
1. Given Name (Fi	rst Name)	2. Surname (Last l	Name)		3. Date 09-April-20	015
4. Are you the cor	4. Are you the corresponding author? Yes ✓ No			esponding Author's Na	ame	
American Colleg	Screening in Average R		ractice Advice	from the Clinical Gu	iidelines Com	nmittee of the
Section 2.	The Work Under Co	onsideration for	r Publication			
any aspect of the s statistical analysis,	stitution at any time rece ubmitted work (including	ive payment or servi but not limited to g	ces from a third	party (government, co		
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Do you have any	patents, whether plan	ned, pending or is	sued, broadly	relevant to the work	? Yes	✓ No

Cooke 2



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Dr. Cooke has nothing to disclose.

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Cooke 3



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

fitterman 1



Section 1.	Identifying Inform	nation	
1. Given Name (Fi nick	rst Name)	2. Surname (Last Name) fitterman	3. Date 15-April-2015
4. Are you the cor	responding author?	Yes ✓ No	Corresponding Author's Name Amir Quaseem
5. Manuscript Title Cervical Cancer : American Colleg	Screening in Average R	isk Women: Best Practice A	Advice from the Clinical Guidelines Committee of the
6. Manuscript Ide	ntifying Number (if you kr	now it)	
			-
Section 2.	The Work Under C	onsideration for Public	cation
any aspect of the s statistical analysis,	submitted work (including	g but not limited to grants, da	a third party (government, commercial, private foundation, etc.) for ta monitoring board, study design, manuscript preparation,
Section 3.	Relevant financial	activities outside the s	submitted work.
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Do you have any	patents, whether plan	ned, pending or issued, br	oadly relevant to the work? Yes V No

fitterman 2



Section 5. Relationships not covered above
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Dr. fitterman has nothing to disclose.

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

McLean 1



Section 1. Identifying Info	rmation	
1. Given Name (First Name) Robert	2. Surname (Last Name) McLean	3. Date 10-April-2015
4. Are you the corresponding author?	☐ Yes ✓ No	Corresponding Author's Name George Sawaya
5. Manuscript Title Cervical Cancer Screening in Averag	e Risk Women: Best Practice A	Advice from the Clinical Guidelines Committee of the ACP
6. Manuscript Identifying Number (if you uncertain	u know it)	
Section 2. The Work Under	r Consideration for Public	cation
	ling 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 finance	ial activities outside the s	submitted work.
of compensation) with entities as de	scribed in the instructions. Us report 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. Intellectual Prop	perty Patents & Copyrig	ghts
Do you have any patents, whether p	lanned, pending or issued, br	roadly relevant to the work? Yes V No

McLean 2



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Chou 1



Section 1.	Identifying Inform	ation	
1. Given Name (Fi Roger	rst Name)	2. Surname (Last Na Chou	me) 3. Date 15-April-2015
4. Are you the cor	responding author?	Yes ✓ No	Corresponding Author's Name
American Colleg	Screening in Average R		ctice Advice from the Clinical Guidelines Committee of the
Section 2.	The Work Under Co	onsideration for F	Publication
any aspect of the s statistical analysis,	ubmitted work (including	but not limited to gra	s from a third party (government, commercial, private foundation, etc.) for nts, data monitoring board, study design, manuscript preparation, No
Section 3.	Relevant financial	activities outside	the submitted work.
of compensation clicking the "Add Are there any rel) with entities as descri	bed in the instruction ort relationships the	te whether you have financial relationships (regardless of amount ns. Use one line for each entity; add as many lines as you need by at were present during the 36 months prior to publication . No
Section 4.	Intellectual Proper	ty Patents & Co	pyrights
Do you have any	patents, whether plan	ned, pending or issu	ed, broadly relevant to the work? Yes V No

Chou 2



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Harris 1



Section 1. Identifying Inform	nation	
1. Given Name (First Name) Russell	2. Surname (Last Name) Harris	3. Date 08-April-2015
4. Are you the corresponding author?	☐ Yes ✓ No	Corresponding Author's Name Amir Qaseem
5. Manuscript Title Screening for Cervical Cancer		
6. Manuscript ldentifying Number (if you k	now it)	
Section 2. The Work Under C	onsideration for Public	cation
	g but not limited to grants, da	a third party (government, commercial, private foundation, etc.) for ata monitoring board, study design, manuscript preparation,
Section 3. Polovant financial	activities outside the s	nula maissa al nua ula
Place a check in the appropriate boxes of compensation) with entities as descri	in the table to indicate wh ribed in the instructions. Us sport relationships that we	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. Intellectual Prope	rty Patents & Copyri	ghts
Do you have any patents, whether plan	nned, pending or issued, br	roadly relevant to the work? Yes V No

Harris 2



Section 5.						
Jeduon J.	Relationships not covered above					
	ntionships or activities that readers could perceive to have influenced, or that give the appearance of ing, what you wrote in the submitted work?					
Yes, the following	Yes, the following relationships/conditions/circumstances are present (explain below):					
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Mir 1



Section 1. Identifying Inform						
Identifying Infor	mation					
1. Given Name (First Name) Tanveer	2. Surname (Last Name) Mir	3. Date 03-April-2015				
4. Are you the corresponding author?	Yes ✓ No	Corresponding Author's Name Amir Qaseem MD,PhD				
5. Manuscript Title						
6. Manuscript Identifying Number (if you M14-2327	know it)	_				
Section 2. The Week Under						
The Work Under Consideration for Publication						
	ng 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 financia	l activities outside the s	submitted work.				
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Wilt 1



Section 1.	Identifying Inform	aation						
1. Given Name (Fi Timothy		2. Surname (Last Name) Wilt	3. Date 09-April-2015					
4. Are you the cor	responding author?	Yes ✓ No	Corresponding Author's Name Qaseem					
	t Title Icer Screening in Average Risk Women: Best Practice Advice from the Clinical Guidelines Committee of the Dilege of Physicians							
6. Manuscript Ide	ntifying Number (if you kr	now it)						
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Wilt 2



Section 5.	
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Shekelle 1



Section 1. Identifying Inform	nation	
1. Given Name (First Name) Paul	2. Surname (Last Name) Shekelle	3. Date 24-April-2015
4. Are you the corresponding author?	Yes 🗸 No	Corresponding Author's Name
5. Manuscript TitleCervical Cancer Screening in Average FAmerican College of Physicians6. Manuscript Identifying Number (if you keep)		Advice from the Clinical Guidelines Committee of the
Section 2. The Work Under C	onsideration for Publi	cation
	g but not limited to grants, da	a third party (government, commercial, private foundation, etc.) for ata monitoring board, study design, manuscript preparation,
Section 3. Relevant financial	activities outside the	submitted work.
of compensation) with entities as descr	ribed in the instructions. Us port relationships that we	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.
If yes, please fill out the appropriate inf		
Name of Entity	Grant? Personal No	n-Financial Other? Comments
ECRI Institute		National Guidelines Clearinghouse
Section 4. Intellectual Prope	rty Patents & Copyric	ghts
Do you have any patents, whether plan If yes, please fill out the appropriate inf Excess rows can be removed by pressin	ormation below. If you hav	roadly relevant to the work? Yes No ee more than one entity press the "ADD" button to add a row.

Shekelle 2



Patent?	Pending?	Issued?	Licensed?	Royalties?	Licensee?	Comments	
JpToDate				✓			
Section 5. Relationshi	ps not cov	ered abo	ove				
Are there other relationships or potentially influencing, what yo			•	eive to have	influenced, or tha	at give the appearance of	
Yes, the following relationsh							
✓ No other relationships/cond	✓ 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.						j.
Section 6. Disclosure S	itatement						
Based on the above disclosures,		ll automa	atically gene	erate a disclo	sure statement w	which will appear in the box	
below.	tilis loilli wi	ii autoirie	dically gene	rate a discio	suie statement, v	mich will appear in the box	

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

Qaseem 1



Section 1. Identifying Inform	ation	
1. Given Name (First Name) Amir	2. Surname (Last Name) Qaseem	3. Date 13-August-2014
4. Are you the corresponding author?	✓ Yes No	
5. Manuscript TitleCervical Cancer Screening in Average RAmerican College of Physicians6. Manuscript Identifying Number (if you knM14-2426	isk Women: Best Practice Advice from the Clinical Grow it)	uidelines Committee of the
Section 2. The Weak Under C		
The Work Under Co	onsideration for Publication	
	ive payment or services from a third party (government, or but not limited to grants, data monitoring board, study of est? Yes V No	
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Place a check in the appropriate boxes i of compensation) with entities as descri	n the table to indicate whether you have financial rebed in the instructions. Use one line for each entity, port relationships that were present during the 36	; add as many lines as you need by
Section 4. Intellectual Proper	ty Patents & Copyrights	
	ned, pending or issued, broadly relevant to the wor	k? ☐ Yes 🗸 No

Qaseem 2



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Denberg 1



Section 1. Identifying Inform	nation		
1. Given Name (First Name) Thomas	2. Surname (Last Name) Denberg	3. Date 10-March-2015	
4. Are you the corresponding author?	☐ Yes ✓ No	Corresponding Author's Name George Sawaya	
5. Manuscript Title Cervical Cancer Screening in Average Risk Women: Best Practice Advice from the Clinical Guidelines Committee of the American College of Physicians			
6. Manuscript Identifying Number (if you kr M14-2426	now it)	_	
Section 2. The Weak Under C			
The Work Under Co	onsideration for Public	tation	
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	est? Yes No		
Section 3. Relevant financial	activities outside the s	submitted work.	
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Section 4. Intellectual Proper			
Intellectual Proper	rty Patents & Copyri	hts	
Do you have any patents, whether plan	ned, pending or issued, br	oadly relevant to the work? Yes V No	

Denberg 2



Section 5. Roles	Sanahina nat arranad abarra	
Relati	tionships not covered above	
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Dr. Denberg has nothin	g to disclose.	

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