

#### **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

Olive 1



Section 1. Identifying Inform	ation		
1. Given Name (First Name) Kenneth	2. Surname (Last Name) Olive		3. Date 04-February-2015
4. Are you the corresponding author?	Yes ✓ No	Corresponding Author's Nar	me
5. Manuscript Title Electronic Nicotine Delivery Systems - A	ın American College of Phy	ysicians Position Paper	
6. Manuscript Identifying Number (if you kn 14-2481	now it)		
Section 2. The Work Under Co	onsideration for Public	ation	
Did you or your institution <b>at any time</b> receining aspect of the submitted work (including statistical analysis, etc.)?  Are there any relevant conflicts of interest.	but not limited to grants, da		
Section 3. Relevant financial	activities outside the s	ubmitted 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	bed in the instructions. Us port relationships that wer	e one line for each entity; a	dd as many lines as you need by
Section 4. Intellectual Property	. D	L.	
Intellectual Proper	ty Patents & Copyrig	ints	
Do you have any patents, whether plan	ned, pending or issued, br	oadly relevant to the work?	☐ Yes ✓ No

Olive 2



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Minaei 1



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1. Given Name (Firs Ashley	t Name)	2. Surname (Last Nai Minaei	ne) 3. Date 04-February-2015
4. Are you the corre	esponding author?	Yes ✓ No	Corresponding Author's Name
5. Manuscript Title Electronic Nicotin	e Delivery Systems - A	n American College	of Physicians Position Paper
6. Manuscript Ident	ifying Number (if you kno	ow it)	
Section 2.	The Work Under Co	onsideration for P	ublication
Did you or your insti any aspect of the sul statistical analysis, e	itution <b>at any time</b> receive bmitted work (including	ve payment or services but not limited to gran	from a third party (government, commercial, private foundation, etc.) for hts, data monitoring board, study design, manuscript preparation,
Section 3.	Relevant financial a	activities outside	the submitted work.
of compensation) clicking the "Add -	with entities as describ	oed in the instructio ort relationships tha	e whether you have financial relationships (regardless of amount ns. Use one line for each entity; add as many lines as you need by it were <b>present during the 36 months prior to publication</b> .  No
Section 4.	Intellectual Proper	ty Patents & Co	pyrights
Do you have any p	patents, whether plann	ned, pending or issue	ed, broadly relevant to the work? Yes V No

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1 Henry



Section 1.	Identifying Inform	ation				
1. Given Name (Fi Tracey	rst Name)	2. Surname (Last Henry	: Name)		3. Date 04-Februar	ry-2015
4. Are you the cor	responding author?	Yes ✓ N	No C	orresponding Author's	Name	
5. Manuscript Title Electronic Nicoti	e ne Delivery Systems - A	ın American Colle	ege of Physic	ians Position Paper		
6. Manuscript lder M14-2481	ntifying Number (if you kr	now it)				
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Section 2.	The Work Under Co	onsideration fo	or Publicati	on		
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Section 3.	Relevant financial	activities outsi	de the sub	mitted work.		
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Section 4.	Intellectual Proper	ty Patents &	Copyright	5		
Do you have any	patents, whether plan	ned, pending or is	ssued, broac	ly relevant to the wo	ork? Yes	✓ No

Henry 2



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Kane 1



Section 1.	Identifying Inform	ation	
1. Given Name (Fii Gregory	rst Name)	2. Surname (Last Name) Kane	3. Date 05-February-2015
4. Are you the cor	responding author?	Yes ✓ No	Corresponding Author's Name  ACP Health and Public Policy Committee
5. Manuscript Title Electronic Nicoti		n American College of Ph	ysicians Position Paper
6. Manuscript Ider M14-2481	ntifying Number (if you kn	ow it)	_
6 11 2			
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,
Section 3.	Relevant financial	activities outside the s	submitted work.
of compensation clicking the "Add	the appropriate boxes in with entities as descri	n the table to indicate who bed in the instructions. Us port 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 se present during the 36 months prior to publication.
Section 4.	Intellectual Duamen	tu. Datamta ( Camuia	ula de
	intellectual Proper	ty Patents & Copyric	nts ———
Do you have any	patents, whether plans	ned, pending or issued, br	oadly relevant to the work? Yes V No

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Rehman 1



Section 1. Identifying I	nformation	
1. Given Name (First Name) Shakaib	2. Surname (Last Name) Rehman	3. Date 05-February-2015
4. Are you the corresponding author	? Yes 🗸 No	Corresponding Author's Name
5. Manuscript Title Electronic Nicotine Delivery Syste	ems - An American College of Ph	ysicians Position Paper
6. Manuscript Identifying Number (if	you know it)	
Section 2. The Work Un	der Consideration for Public	cation
Did you or your institution <b>at any tin</b>	ne receive payment or services from cluding 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 fina	ncial activities outside the s	submitted work.
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**Royalties:** Funds are coming in to you or your institution due to your patent

Crowley 1



Section 1. Identifying Inform	nation	
1. Given Name (First Name) Ryan	2. Surname (Last Name) Crowley	3. Date 04-February-2015
4. Are you the corresponding author?	✓ Yes No	
5. Manuscript Title Electronic Nicotine Delivery Devices: Ar	n American College of Physicians Position Paper	
6. Manuscript Identifying Number (if you kr M14-2481	now it)	
Section 2. The Work Under C	onsideration for Publication	
	vive payment or services from a third party (government, c g but not limited to grants, data monitoring board, study o est? Yes 🗸 No	
Section 3. Relevant financial	activities outside the submitted work.	
of compensation) with entities as descr	in the table to indicate whether you have financial re ibed in the instructions. Use one line for each entity; port relationships that were <b>present during the 36</b> est? Yes V No	add as many lines as you need by
Section 4. Intellectual Prope	rty Patents & Copyrights	
	ned, pending or issued, broadly relevant to the worl	k? ☐ Yes 🗸 No

Crowley 2



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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Crowley 3



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Tape 1



Section 1. Identifying Inform	nation	
Given Name (First Name) Thomas	2. Surname (Last Name) Tape	3. Date 04-February-2015
4. Are you the corresponding author?	☐ Yes ✓ No	Corresponding Author's Name Ryan Crowley
5. Manuscript Title Electronic Nicotine Delivery Systems - A	An American College of Phy	ysicians Position Paper
6. Manuscript Identifying Number (if you kr M14-2481	now it)	
Section 2. The Work Under C	onsideration for Public	ation
	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	ubmitted work.
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Section 4. Intellectual Proper	rty Patents & Copyric	ghts
Do you have any patents, whether plan	ned, pending or issued, br	oadly relevant to the work? ☐ Yes ✓ No

Tape 2



Section 5.	lationaline net covered above
Rei	ationships not covered above
	onships or activities that readers could perceive to have influenced, or that give the appearance of g, what you wrote in the submitted work?
Yes, the following	relationships/conditions/circumstances are present (explain below):
✓ No other relations	hips/conditions/circumstances that present a potential conflict of interest
	cript acceptance, journals will ask authors to confirm and, if necessary, update their disclosure statements may ask authors to disclose further information about reported relationships.
Section 6. Dis	closure Statement
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DeLong 1



Section 1. Id	lentifying Informa	ation		
Given Name (First N Douglas	lame)	2. Surname (Last Name) DeLong		3. Date 09-February-2015
4. Are you the corresp	onding author?	Yes ✓ No	Corresponding Author's Na Ryan Crowley	me
5. Manuscript Title Lesbian, Gay, Bisexu American College of	_	r (LGBT) Health Disparition	es: Executive Summary of a P	Policy 2 Position Paper From The
6. Manuscript Identify	ring Number (if you kno	ow it)		
Section 2. Th	ne Work Under Co	nsideration for Publ	ication	
Did you or your institution <b>at any time</b> 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  You				
Section 3. Re	elevant financial a	activities outside the	submitted work.	
of compensation) wi	ith entities as descrik	oed in the instructions. U	Jse one line for each entity; a	ationships (regardless of amount add as many lines as you need by nonths prior to publication.
Are there any relevan	nt conflicts of interes	st? Yes Vo		
Section 4.	tellectual Propert	ty Patents & Copyr	ights	
Do you have any pat	tents, whether plann	ed, pending or issued, b	oroadly relevant to the work?	? ☐ Yes ✓ No

DeLong 2



Section 5. Relationships not covered 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):
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Beachy 1



Section 1. Identifying Inform	nation	
Given Name (First Name) Micah	2. Surname (Last Name) Beachy	3. Date 10-February-2015
4. Are you the corresponding author?	☐ Yes ✓ No	Corresponding Author's Name Ryan Crowley
5. Manuscript Title Electronic Nicotine Delivery Systems - A	An American College of Phy	ysicians Position Paper
6. Manuscript Identifying Number (if you k M14-2481	now it)	
Section 2. The Work Under C	onsideration for Public	ation
	g but not limited to grants, da	a third party (government, commercial, private foundation, etc.) for ta monitoring board, study design, manuscript preparation,
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Section 4. Intellectual Prope	rty Patents & Copyrig	jhts
Do you have any patents, whether plan	nned, pending or issued, br	oadly relevant to the work?

Beachy 2



Section 5. Relationships not sovered above
Relationships not covered above
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Bush 1



Section 1. Identifying Inform	nation	
Given Name (First Name)  James	2. Surname (Last Name) Bush	3. Date 10-February-2015
4. Are you the corresponding author?	☐ Yes 🗸 No	Corresponding Author's Name Ryan Crowley
5. Manuscript Title Electronic Nicotine Delivery Systems - A	An American College of Phy	ysicians Position Paper
6. Manuscript Identifying Number (if you k M14-2481	now it)	
		_
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Do you have any patents, whether plan	nned, pending or issued, br	oadly relevant to the work? Yes ✓ No

Bush 2



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Borenstein 1



Section 1. Identifying Inform	mation	
1. Given Name (First Name) Sue	2. Surname (Last Name) Borenstein	3. Date 21-April-2015
4. Are you the corresponding author?	☐ Yes   ✓ No	Corresponding Author's Name Ryan A. Crowley, BSJ
5. Manuscript Title Electronic Nicotine Delivery Systems: E	xecutive Summary of a Pol	icy Position Paper From the American College of Physicians
6. Manuscript Identifying Number (if you k	now it)	_
Section 2. The Work Under C	Consideration for Public	ation
	g but not limited to grants, da	a third party (government, commercial, private foundation, etc.) for ta monitoring board, study design, manuscript preparation,
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of compensation) with entities as desc	ribed in the instructions. Us eport 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 se <b>present during the 36 months prior to publication</b> .
Section 4. Intellectual Prope	erty Patents & Copyrig	yhts
Do you have any patents, whether plan		

Borenstein 2



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### 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.

# Relationships not covered above.

Use this section to report 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.

#### Definitions.

**Entity:** government agency, foundation, commercial sponsor, academic institution, etc.

**Grant:** A grant from an entity, generally [but not always] paid to your organization

**Personal Fees:** Monies paid to you for services rendered, generally honoraria, royalties, or fees for consulting, lectures, speakers bureaus, expert testimony, employment, or other affiliations

**Non-Financial Support:** Examples include drugs/equipment supplied by the entity, travel paid by the entity, writing assistance, administrative support, etc.

**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 patent

Lohr 1



Section 1. Identifying Inform	nation		
1. Given Name (First Name) Robert	2. Surname (Last Name) Lohr		3. Date 04-March-2015
4. Are you the corresponding author?	☐ Yes ✓ No	Corresponding Author's Nan Robert Doherty	ne
5. Manuscript Title Electronic Nicotine Delivery Systems - A	An American College of Ph	ysicians Position Paper"	
6. Manuscript Identifying Number (if you kr M14-2481	now it)	_	
Electronic Nicotine Delivery Systems - A Section 2. The Work Under C			
The Work Under Co	onsideration for Public	cation	
Did you or your institution <b>at any time</b> 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 interes	est? Yes ✓ No		
Section 3. Relevant financial	activities outside the s	submitted work	
Relevant illiancial	activities outside the s	submitted work.	
Place a check in the appropriate boxes i of compensation) with entities as descriclicking the "Add +" box. You should rep	ibed in the instructions. Us	se one line for each entity; ac	dd as many lines as you need by
Are there any relevant conflicts of intere			
Section 4. Intellectual Proper	rty Patents & Copyric	ahts	
intenectual Proper	ty Fatents & copyrig	gii (3	
Do you have any patents, whether plan	ned, pending or issued, br	roadly relevant to the work?	☐ Yes ✓ No

Lohr 2



Section 5. Relationships not solvered 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
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. Lohr has nothing to disclose.

### **Evaluation and Feedback**

Please visit <a href="http://www.icmje.org/cgi-bin/feedback">http://www.icmje.org/cgi-bin/feedback</a> to provide feedback on your experience with completing this form.

Lohr 3



#### 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.

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

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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 ilcensed to an entity, whether
earning royalties or not
Royalties: Funds are coming in to you or your institution due to your
patent



Section 1. Identifying Information			
1. Given Name (First Name) 2. Surname (Last Name) 3. Fate 2. 20/15 4. Are you the corresponding author?  Yes No			
5. Manuscript Title Electronic Nicotene Deliver System			
6. Manuscript Identifying Number (if you know it)			
M14-2481-			
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.			
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 <b>present during the 36 months prior to publication</b> .  Are there any relevant conflicts of interest? Yes No			
Section 4. Intellectual Property Patents & Copyrights			
interior roperty - rateries a copyrights			
Do you have any patents, whether planned, pending or issued, broadly relevant to the work? Yes You			



Section 5.	Relationships not co	vered above	
	relationships or activities t tencing, what you wrote in	hat readers could perceive to have influenced, or that give the appearant the submitted work?	ce of
Yes, the folia	owing relationships/condi	clons/circumstances are present (explain below):	
No other rel	ationships/conditions/circ	urnstances that present a potential conflict of interest	
		rnals will ask authors to confirm and, If necessary, update their disclosure lisclose further information about reported relationships.	statements.
Section 6.	Disclosure Statemen	t	
Based on the ab below.	ove disclosures, this form	will automatically generate a disclosure statement, which will appear in t	he box
	¥ #		
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#### **Evaluation and Feedback**

Please visit http://www.lcmle.org/cgi-bin/feedback to provide feedback on your experience with completing this form.