

ICMJE Form for Disclosure of Potential Conflicts of Interest

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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4. Intellectual Property.

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

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name) Tracey	2. Surname (Last Name) Henry	3. Date 04-February-2015
4. Are you the corresponding author? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Corresponding Author's Name Daniel
5. Manuscript Title Lesbian, Gay, Bisexual, and Transgender (LGBT) Health Disparities: Executive Summary of a Policy 2 Position Paper From The American College of Physicians		
6. Manuscript Identifying Number (if you know it) M14-2482		

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Dr. Henry 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)
Douglas

2. Surname (Last Name)
DeLong

3. Date
09-February-2015

4. Are you the corresponding author?

☐ Yes ☒ No

Corresponding Author's Name
Daniel

5. Manuscript Title
Lesbian, Gay, Bisexual, and Transgender (LGBT) Health Disparities: Executive Summary of a Policy
2 Position Paper From The American College of Physicians

6. Manuscript Identifying Number (if you know it)

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Dr. DeLong has nothing to disclose.

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Section 1. Identifying Information

1. Given Name (First Name)
Gregory

2. Surname (Last Name)
Kane

3. Date
09-February-2015

4. Are you the corresponding author?

☐ Yes

☒ No

Corresponding Author's Name

ACP Health and Public Policy Committee

5. Manuscript Title

Lesbian, Gay, Bisexual, and Transgender (LGBT) Health Disparities: Executive Summary of a Policy 2 Position Paper From The American College of Physicians

6. Manuscript Identifying Number (if you know it)

M14-2482

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Dr. Kane has nothing to disclose.

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Section 1. Identifying Information

1. Given Name (First Name) Sue	2. Surname (Last Name) Bornstein	3. Date 02-May-2015
4. Are you the corresponding author? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Corresponding Author's Name Hilary Daniel
5. Manuscript Title Lesbian, Gay, Bisexual and Transgender (LGBT) Health Disparities: Executive Summary of a Policy 2 Position Paper		
6. Manuscript Identifying Number (if you know it) M14-2482		

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Dr. Bornstein has nothing to disclose.

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Section 1. Identifying Information

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Renee

2. Surname (Last Name)
Butkus

3. Date
09-February-2015

4. Are you the corresponding author? ☐ Yes ☒ No Corresponding Author's Name
Hilary Daniel

5. Manuscript Title
Lesbian, Gay, Bisexual, and Transgender (LGBT) Health Disparities: Executive Summary of a Policy Position Paper From The American College of Physicians

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Ms. Butkus has nothing to disclose.

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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)

Ashley

2. Surname (Last Name)

Minaei

3. Date

04-February-2015

4. Are you the corresponding author?

☐ Yes

☒ No

Corresponding Author's Name

5. Manuscript Title

Lesbian, Gay, Bisexual, and Transgender (LGBT) Health Disparities: Executive Summary of a Policy 2 Position Paper From The American College of Physicians

6. Manuscript Identifying Number (if you know it)

M14-2482

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

ICMJE Form for Disclosure of Potential Conflicts of Interest

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Section 6. Disclosure Statement

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Evaluation and Feedback

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

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

Hilary Daniel

5. Manuscript Title

Lesbian, Gay, Bisexual, and Transgender (LGBT) Health Disparities: Executive Summary of a Policy 2 Position Paper From The American College of Physicians"

6. Manuscript Identifying Number (if you know it)

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Are there any relevant conflicts of interest? ☐ Yes ☒ No

Section 4. Intellectual Property -- Patents & Copyrights

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Dr. Rehman 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)

Thomas

2. Surname (Last Name)

Tape

3. Date

04-February-2015

4. Are you the corresponding author?

☐

Yes

☒

No

Corresponding Author's Name

Hilary Daniel

5. Manuscript Title

"Lesbian, Gay, Bisexual, and Transgender (LGBT) Health Disparities: Executive Summary of a Policy 2 Position Paper From The American College of Physicians"

6. Manuscript Identifying Number (if you know it)

M14-2482

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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

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☐

Yes

☒

No

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Dr. Tape 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)
Micah

2. Surname (Last Name)
Beachy

3. Date
10-February-2015

4. Are you the corresponding author?

☐ Yes ☒ No

Corresponding Author's Name
Hiliary Daniel

5. Manuscript Title
Lesbian, Gay, Bisexual, and Transgender (LGBT) Health Disparities: Executive Summary of a Policy 2 Position Paper From The American College of Physicians

6. Manuscript Identifying Number (if you know it)
M14-2482

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Are there any relevant conflicts of interest? ☐ Yes ☒ No

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Dr. Beachy 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)
James

2. Surname (Last Name)
Bush

3. Date
10-February-2015

4. Are you the corresponding author?

☐ Yes ☒ No

Corresponding Author's Name
Hillary Daniel

5. Manuscript Title
Lesbian, Gay, Bisexual, and Transgender (LGBT) Health Disparities: Executive Summary of a Policy 2 Position Paper From The American College of Physicians

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Dr. Bush 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) Darilyn	2. Surname (Last Name) Moyer	3. Date 09-February-2015
4. Are you the corresponding author? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Corresponding Author's Name _____		
5. Manuscript Title LGBT Health Disparities:Executive Summary of a Policy 2 Position Paper From The ACP		
6. Manuscript Identifying Number (if you know it) M14-2482		

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Section 5.

Relationships not covered above

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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 Name
Hilary Daniel

5. Manuscript Title
Lesbian, Gay, Bisexual, and Transgender (LGBT) Health Disparities: Executive Summary of a Policy 2 Position Paper From The American College of Physicians

6. Manuscript Identifying Number (if you know it)
M14-2482

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Dr. Lohr has nothing to disclose.

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1. Given Name (First Name)
Gregory

2. Surname (Last Name)
Hood

3. Date
09-March-2015

4. Are you the corresponding author?

☐ Yes ☒ No

Corresponding Author's Name
Daniel

5. Manuscript Title
Lesbian, Gay, Bisexual, and Transgender (LGBT) Health Disparities: Executive Summary of a Policy
2 Position Paper From The American College of Physicians

6. Manuscript Identifying Number (if you know it)
m14-2482

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1. Given Name (First Name)
Hilary

2. Surname (Last Name)
Daniel

3. Date
18-February-2015

4. Are you the corresponding author? ☒ Yes ☐ No

5. Manuscript Title
Lesbian, Gay, Bisexual, and Transgender (LGBT) Health Disparities: Executive Summary of a Policy Position Paper From the American College of Physicians

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