

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.

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3. Relevant financial activities outside the submitted work.

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4. 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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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

Kelley 1



Section 1. Identifying Inform	nation	
Given Name (First Name) Maureen	2. Surname (Last Name) Kelley	3. Date 13-March-2015
4. Are you the corresponding author?	☐ Yes ✓ No	Corresponding Author's Name Mildred Cho
5. Manuscript Title Attitudes toward Risk and Informed Co	nsent for Research on Mec	dical Practices: A Cross-Sectional Survey
6. Manuscript Identifying Number (if you k M15-0166	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. Relevant financial	activities outside the s	submitted work.
of compensation) with entities as descr	ribed 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 re present during the 36 months prior to publication.
Section 4. Intellectual Prope	rty Patents & Copyric	ghts
Do you have any patents, whether plan	nned, pending or issued, br	roadly relevant to the work? Yes V No

Kelley 2



Section 5. Relationships not covered above
helationships 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
Based on the above disclosures, this form will automatically generate a disclosure statement, which will appear in the box below.
Dr. Kelley has nothing to disclose.

Evaluation and Feedback

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

Kelley 3



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Cho 1



Section 1.	Identifying Inform	ation			
1. Given Name (Fii Mildred	rst Name)	2. Surname (Last Nam Cho	e)		3. Date 13-March-2015
4. Are you the cor	responding author?	✓ Yes No			
5. Manuscript Title Attitudes toward	e I Risk and Informed Con	sent for Research on	Medical Practice	es: A Cross-Sec	ctional Survey
6. Manuscript Ider M15-0166	ntifying Number (if you kn	ow it)			
Section 2.			1.0		
occuon 2.	The Work Under Co	nsideration for Pu	iblication		
any aspect of the s statistical analysis, Are there any rel- If yes, please fill c	ubmitted work (including etc.)? evant conflicts of intere	but not limited to granstst? Yes 15 rmation below. If you	s, data monitorin	g board, study o	commercial, private foundation, etc.) for design, manuscript preparation, ress the "ADD" button to add a row.
Name of Institut	ion/Company	Grant? Personal Fees?	Non-Financial Support?	Other? Co	omments
NIH		V			
6 ii 5					
Section 3.	Relevant financial a	activities outside t	he submitted	work.	
of compensation clicking the "Add Are there any rel) with entities as descril	oed in the instruction ort relationships that	s. Use one line for were present c	or each entity;	elationships (regardless of amount ; add as many lines as you need by months prior to publication .
Section 4.	Intellectual Proper	ty Patents & Cop	yrights		
Do you have any	patents, whether planr	ned, pending or issue	d, broadly releva	ant to the work	k? ☐ Yes ✓ No

Cho 2



Section 5. Polationships not severed above
Relationships not covered above
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Dr. Cho reports grants from NIH, during the conduct of the study; .

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

Wilfond 1



Section 1. Identifying Inform	ation		
1. Given Name (First Name) Benjamin	2. Surname (Last Name) Wilfond		3. Date 13-March-2015
4. Are you the corresponding author?	Yes ✓ No	Corresponding Autho	or's Name
5. Manuscript Title Attitudes toward Risk and Informed Con	sent for Research on Mec	lical Practices: A Cross	s-Sectional Survey
6. Manuscript Identifying Number (if you known M15-0166	ow it)		
		_	
Section 2. The Work Under Co	onsideration for Public	cation	
Did you or your institution at any time receivany aspect of the submitted work (including statistical analysis, etc.)? Are there any relevant conflicts of intere If yes, please fill out the appropriate info Excess rows can be removed by pressing	but not limited to grants, da st?	ta monitoring board, stu	udy design, manuscript preparation,
Name of Institution/Company	Grant	n-Financial Other?	Comments
National Center for Advancing Translational Sciences	✓		
Section 3. Relevant financial a	activities outside the s	submitted work.	
Place a check in the appropriate boxes ir of compensation) with entities as described clicking the "Add +" box. You should rep Are there any relevant conflicts of interesting the "Section 4"	oed in the instructions. Us ort relationships that wer st? ☐ Yes ✓ No	e one line for each er	ntity; add as many lines as you need by
Section 4. Intellectual Propert	ty Patents & Copyric	yhts	
Do you have any patents, whether plann	ned, pending or issued, br	oadly relevant to the	work? Yes Vo

Wilfond 2



Section 5. Relationships 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?
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Dr. Wilfond reports grants from National Center for Advancing Translational Sciences, during the conduct of the study; .

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1

Diekema



Section 1. Identifying Inform	nation		
Given Name (First Name) Douglas	2. Surname (Last Name) Diekema		3. Date 13-March-2015
4. Are you the corresponding author?	☐ Yes ✓ No	Corresponding Autho	or's Name
5. Manuscript Title Attitudes toward Risk and Informed Co	nsent for Research on Med	lical Practices: A Cross	s-Sectional Survey
6. Manuscript Identifying Number (if you kr m15-0166	now it)		
Section 2. The Work Under Co	onsideration for Public	cation	
any aspect of the submitted work (including statistical analysis, etc.)? Are there any relevant conflicts of intere	y but not limited to grants, dates: Pest? Yes No Dormation below. If you have	ta monitoring board, st	ent, commercial, private foundation, etc.) for udy design, manuscript preparation, ty press the "ADD" button to add a row.
Name of Institution/Company	Grant? Personal No	n-Financial Other?	Comments
National Institutes of Health, National Center for Advancing Translational Sciences	V		
Section 3. Relevant financial	activities outside the s	submitted work.	
Place a check in the appropriate boxes in the appropriate boxes of compensation) with entities as described clicking the "Add +" box. You should replace there any relevant conflicts of interest.	ibed in the instructions. Us port relationships that we	se one line for each er	ntity; add as many lines as you need by
Section 4. Intellectual Proper	rty Patents & Copyri	ghts	
Do you have any patents, whether plan	ned, pending or issued, br	oadly relevant to the	work? Yes V

Diekema 2



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Relationships not covered above
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Dr. Diekema reports grants from National Institutes of Health, National Center for Advancing Translational Sciences, during the conduct of the study; .

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Diekema 3



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1. Identifying information.

Enter your full name. If you are NOT the corresponding author please check the box "no" and a space to enter the name of the corresponding author in the space that appears. Provide the requested manuscript information. Double-check the manuscript number and enter it.

2. The work under consideration for publication.

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Section 1.	Identifying Infor	mation		
1. Given Name (Fi Steven	rst Name)	2. Surname (Last Name) Joffe		3. Effective Date (07-August-2008) 14-March-2015
4. Are you the cor	responding author?	☐ Yes ✓ No	Corresponding Author's Na Mildred Cho, PhD	me
5. Manuscript Title Attitudes toward		onsent for Research on Me	dical Practices: A Cross-Sect	ional Survey
6. Manuscript Ide	ntifying 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 for any aspect of the submitted work (including but not limited to grants, data monitoring board, study design, manuscript preparation, statistical analysis, etc...)?

Complete each row by checking "No" or providing the requested information. If you have more than one relationship click the "Add" button to add a row. Excess rows can be removed by clicking the "X" button.

The Work Under Consideration for Publication						
Туре	No	Money Paid to You	Money to Your Institution*	Name of Entity	Comments**	
2. Consulting fee or honorarium		✓		University of Washington	grant from National Center for Advancing Translational Sciences, National Institutes of Health, to U. of Washington	×
						ADD
3. Support for travel to meetings for the study or other purposes		✓		University of Washington	grant from National Center for Advancing Translational Sciences, National Institutes of Health, to U. of Washington	×
						ADD

^{*} This means money that your institution received for your efforts on this study.

^{**} Use this section to provide any needed explanation.



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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 present during the 36 months prior to submission.

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Relevant financial activities outside the submitted work							
Type of Relationship (in alphabetical order)	No	Money Paid to You	Money to Your Institution*	Entity	Comments		
2. Consultancy		✓		Genzyme Corp.	Data Monitoring Committee, ended 11/2012	×	
						ADD	

^{*} This means money that your institution received for your efforts.

Section 4.	Other relationships					
	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?					
✓ No other relationships/conditions/circumstances that present a potential conflict of interest Yes, the following relationships/conditions/circumstances are present (explain below):						
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	Show All Table Rows SAVE					

^{**} For example, if you report a consultancy above there is no need to report travel related to that consultancy on this line.



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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

Alessi 1



Section 1.	Identifying Inform	ation			
1. Given Name (Fii Stephanie	rst Name)	2. Surname (Last Name Alessi)	3. Date 13-March-2015	
4. Are you the corresponding author?		☐ Yes ✓ No	Corresponding Author's Name Mildred K. Cho		
5. Manuscript Title Attitudes toward	e I Risk and Informed Cor	nsent for Research on N	Medical Practices: A Cro	ss-Sectional Survey	
6. Manuscript Ider M15-0166	ntifying Number (if you kn	ow it)			
	ı				
Section 2.	The Work Under Co	onsideration for Pul	olication		
any aspect of the s statistical analysis, Are there any rel- If yes, please fill c	ubmitted work (including etc.)? evant conflicts of intere	est? Yes No ormation below. If you l g the "X" button.	, data monitoring board, so o nave more than one en	ment, commercial, private foundation, etc.) for study design, manuscript preparation, ntity press the "ADD" button to add a row.	
Name of Institut	ion/Company	Grant? Personal Fees?	Non-Financial Support?	Comments	
NIH/NCATS		✓			
	l				
Section 3.	Relevant financial	activities outside th	e submitted work.		
of compensation clicking the "Add Are there any rel) with entities as descril +" box. You should rep evant conflicts of intere	bed in the instructions port relationships that v est? Yes V	Use one line for each of were present during tl	ncial relationships (regardless of amount entity; add as many lines as you need by he 36 months prior to publication.	
Section 4.	Intellectual Proper	ty Patents & Copy	rights		
Do you have any	patents, whether planr	ned, pending or issued	broadly relevant to th	e work? Yes V No	

Alessi 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):
✓ 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.
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. Alessi reports grants from NIH/NCATS, during the conduct of the study; .

Evaluation and Feedback

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

Alessi 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.

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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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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

Capron 1



Section 1. Identifying Inform	Identifying Information				
Given Name (First Name) Alexander	2. Surname (Last Name) Capron	3. Date 15-March-2015			
4. Are you the corresponding author?	Yes 🗸 No	Corresponding Author's Name			
5. Manuscript Title Attitudes toward Risk and Informed Co	onsent for Research on Med	lical Practices: A Cross-Sectional Survey			
6. Manuscript Identifying Number (if you k M15-0166	now it)				
Section 2. The Work Under C	Consideration for Public	cation			
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 s	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 present during the 36 months prior to publication . Are there any relevant conflicts of interest? Yes Vo					
Section 4. Intellectual Prope	rty Patents & Copyri	ghts			
Do you have any patents, whether planned, pending or issued, broadly relevant to the work? Yes Vo					

Capron 2



Section 5. Relationships 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
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Section 6. Disclosure Statement
Disclosure Statement
Based on the above disclosures, this form will automatically generate a disclosure statement, which will appear in the box below.
Prof. Capron has nothing to disclose.

Evaluation and Feedback

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

Capron 3



Instructions

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

Korngiebel 1



Section 1. Identifying Inform	ation			
identifying inform	ation			
			3. Date 16-March-2015	
4. Are you the corresponding author?	1. Are you the corresponding author?		or's Name	
5. Manuscript Title Attitudes toward Risk and Informed Cor	nsent for Research on Med	dical Practices: A Cros	s-Sectional Survey	
6. Manuscript Identifying Number (if you kn M15-0166	ow it)	_		
Section 2. The Work Under Co	onsideration for Publi	cation		
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 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	n-Financial Other?	Comments	
National Center for Advancing Translational Sciences	V		This is the center that funded my FTE to work on the project that generated this paper. I don't believe there is a relevant COI, but the instructions to question 2 asked you to check "yes" if you received a grant.	
Section 3. Relevant financial a	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 present during the 36 months prior to publication . Are there any relevant conflicts of interest? Yes Vo				

Korngiebel 2



Evaluation and Feedback

 $Please\ visit\ \underline{http://www.icmje.org/cgi-bin/feedback}\ to\ provide\ feedback\ on\ your\ experience\ with\ completing\ this\ form.$

Korngiebel 3



Instructions

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Identifying information.

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

Constantine 1



Section 1.	Identifying Inform	ation			
1. Given Name (Fi Melissa	rst Name)	2. Surname (Last Nan Constantine	ne)	3. Date 17-March-2015	
4. Are you the cor	responding author?	Yes ✓ No	-	Corresponding Author's Name Mildred K. Cho	
5. Manuscript Title Attitudes toward	e d Risk and Informed Cor	nsent for Research on	Medical Practices: A	Cross-Sectional Survey	
6. Manuscript Ider M15-0166	ntifying Number (if you kn	now it)			
Section 2.	The Work Under Co	onsideration for P	ublication		
any aspect of the s statistical analysis, Are there any rel If yes, please fill of Excess rows can	ubmitted work (including etc.)? evant conflicts of intere out the appropriate info be removed by pressing	but not limited to gran est? Yes I ormation below. If you g the "X" button.	ts, data monitoring boa No u have more than one	ernment, commercial, private foundation ird, study design, manuscript preparation entity press the "ADD" button to add	٦,
Name of Institut	ion/Company	Grant? Personal Fees?	Support [?]	ner? Comments	
Jniversity of Washing	jton		✓		
Section 3.	Relevant financial	activities outside t	the submitted wor	k.	
of compensation clicking the "Add Are there any rel	n) with entities as descri	bed in the instructior port relationships tha	ns. Use one line for ear t were present durin	inancial relationships (regardless of a ch entity; add as many lines as you no g the 36 months prior to publicatio	eed by
Section 4.	Intellectual Proper	ty Patents & Cop	pyrights		
Do you have any	patents, whether plani	ned, pending or issue	d, broadly relevant to	o the work? Yes No	

Constantine 2



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 follo	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
	Itant fees from the University of Washington for data management, analysis and methods consultation, as mbursemtnent for a team meeting in Seattle, WA.

Evaluation and Feedback

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

Constantine 3



Instructions

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

Kuwana 1



Section 1. Identifying Inform	mation				
1. Given Name (First Name) Ellen	2. Surname (Last Name) Kuwana	3. Date 20-March-2015			
4. Are you the corresponding author?	☐ Yes ✓ No	Corresponding Author's Name Mildred Cho			
5. Manuscript Title "Attitudes toward Risk and Informed C	onsent for Research on Me	dical Practices: A Cross-Sectional Survey"			
6. Manuscript Identifying Number (if you k	know it)				
Section 2. The Work Under (Consideration for Public	cation			
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 financia	l activities outside the s	submitted work.			
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Section 4. Intellectual Prope	erty Patents & Copyri	ghts			
Do you have any patents, whether planned, pending or issued, broadly relevant to the work? ☐ Yes ✓ No					

Kuwana 2



Section 5. Relationships not covered above
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Ms. Kuwana has nothing to disclose.

Evaluation and Feedback

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Kuwana 3



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James 1



Section 1.	Identifying Information				
Given Name (First Name) Cyan		2. Surname (Last Name) James		3. Date 20-March-2015	
4. Are you the corresponding author?		Yes ✓ No	Corresponding Author's Name Cho		
5. Manuscript Title Attitudes toward		nsent for Research on Med	lical Practices: A Cross-Secti	onal Survey	
6. Manuscript Iden m15-0166	ntifying Number (if you kn	now it)			
Section 2.	The Work Under Co	onsideration for Public	cation		
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 Yes					
Section 3.	Relevant financial	activities outside the s	submitted work.		
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Section 4.	Intellectual Proper	rty Patents & Copyri	ghts		
Do you have any patents, whether planned, pending or issued, broadly relevant to the work? Yes Vo					

James 2



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

Evaluation and Feedback

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James 3



Instructions

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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.

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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

Magnus 1



Section 1. Identifying Infor	mation		
1. Given Name (First Name) David	2. Surname (Last Name) Magnus 3. Date 13-March-2015		
4. Are you the corresponding author?	Yes ✓ No	Corresponding Author's Name Mildred Cho	
5. Manuscript Title Attitudes toward Risk and Informed C	onsent for Research on Med	dical Practices: A Cross-Sectional Survey	
6. Manuscript Identifying Number (if you	know it)		
Section 2. The Work Under	Consideration for Public	cation	
	ng 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 financia	l activities outside the	submitted work.	
of compensation) with entities as desc	cribed in the instructions. Us eport relationships that we	nether you have financial relationships (regardless of amount see one line for each entity; add as many lines as you need by the present during the 36 months prior to publication.	
Section 4. Intellectual Prope	erty Patents & Copyri	ghts	
Do you have any patents, whether pla	nned, pending or issued, bi	roadly relevant to the work? Yes V No	

Magnus 2



Section 5.								
Section 5.	Relationships not covered above							
	ationships or activities that readers could perceive to have influenced, or that give the appearance of cing, what you wrote in the submitted work?							
Yes, the followi	Yes, the following relationships/conditions/circumstances are present (explain below):							
✓ No other relation	onships/conditions/circumstances that present a potential conflict of interest							
	uscript acceptance, journals will ask authors to confirm and, if necessary, update their disclosure statements als may ask authors to disclose further information about reported relationships.							
Section 6.	Disclosure Statement							
Based on the above below.	e disclosures, this form will automatically generate a disclosure statement, which will appear in the box							

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

Lee 1



Section 1. Identifying Inform	mation	
1. Given Name (First Name) Sandra	2. Surname (Last Name) Lee	3. Date 13-March-2015
4. Are you the corresponding author?	Yes ✓ No	Corresponding Author's Name Mildred Cho
5. Manuscript Title Attitudes toward Risk and Informed Co	onsent for Research on Med	lical Practices: A Cross-Sectional Survey
6. Manuscript Identifying Number (if you I M15-0166	know it)	
Section 2. The Work Under 0	Consideration for Public	cation
	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.
of compensation) with entities as desc	ribed in the instructions. Use 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 re present during the 36 months prior to publication.
Section 4. Intellectual Property		
Intellectual Prope	erty Patents & Copyri	hts
Do you have any patents, whether pla	nned, pending or issued, br	roadly relevant to the work? Yes V No

Lee 2



Section 5. Polationships 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							
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							
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1. Identifying information.

Enter your full name. If you are NOT the corresponding author please check the box "no" and a space to enter the name of the corresponding author in the space that appears. Provide the requested manuscript information. Double-check the manuscript number and enter it.

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". Then complete the appropriate boxes to indicate the type of support and whether the payment went to you, or to your institution, or both.

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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4. Other relationships.

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.

Gallagher 1



Section 1. Identifying Infor	mation	
1. Given Name (First Name) Thomas	2. Surname (Last Name) Gallagher	3. Effective Date (07-August-2008) 20-March-2015
4. Are you the corresponding author?	☐ Yes ✓ No	Corresponding Author's Name Mildred Cho
5. Manuscript Title Attitudes toward Risk and Informed Co	onsent for Research on Me	dical Practices: A Cross-Sectional Survey
6. Manuscript Identifying Number (if you l M15-0166	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 for any aspect of the submitted work (including but not limited to grants, data monitoring board, study design, manuscript preparation, statistical analysis, etc...)?

Complete each row by checking "No" or providing the requested information. If you have more than one relationship click the "Add" button to add a row. Excess rows can be removed by clicking the "X" button.

The Work Under Consideration for Publication						
Туре	No	Money Paid to You	Money to Your Institution*	Name of Entity	Comments**	
1. Grant			✓	NIH	Grant from NCATS	×
						ADD
7. Other	✓					×
						ADD

^{*} This means money that your institution received for your efforts on this study.

Gallagher 2

^{**} Use this section to provide any needed explanation.

Section 3.

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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 submission.

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Relevant financial activities outside the submitted work						
Type of Relationship (in alphabetical order)		Money Paid to You	· · · · · · · · · · · · · · · · · · ·	Entity	Comments	

^{*} This means money that your institution received for your efforts.

Section 4. Other relationships

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?

\checkmark 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.

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Gallagher 3

^{**} For example, if you report a consultancy above there is no need to report travel related to that consultancy on this line.