

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.

1. 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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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)
Anupam

2. Surname (Last Name)
Jena

3. Date
01-July-2015

4. Are you the corresponding author? Yes No
Corresponding Author's Name
Dr. Prachi Sanghavi

5. Manuscript Title
Outcomes of Basic versus Advanced Life Support for Out-of-Hospital Medical Emergencies

6. Manuscript Identifying Number (if you know it)
M15-0557

Section 2. The Work Under Consideration for Publication

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Are there any relevant conflicts of interest? Yes No

Section 3. Relevant financial activities outside the submitted work.

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Are there any relevant conflicts of interest? Yes No

If yes, please fill out the appropriate information below.

Name of Entity	Grant?	Personal Fees?	Non-Financial Support?	Other?	Comments
Precision Health Economics	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	PHE is an academics-based health economics consulting firm that offers advice to life sciences companies, payers, and federal governments. I serve as a principal consultant to PHE.

Section 4. Intellectual Property -- Patents & Copyrights

Do you have any patents, whether planned, pending or issued, broadly relevant to the work? Yes No

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Section 6. Disclosure Statement

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Dr. Jena reports personal fees from Precision Health Economics, outside the submitted work; .

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)

Alan

2. Surname (Last Name)

Zaslavsky

3. Date

01-July-2015

4. Are you the corresponding author?

Yes No

Corresponding Author's Name

Prachi Sanghavi

5. Manuscript Title

Outcomes of Basic versus Advanced Life Support for Out-of-Hospital Medical Emergencies

6. Manuscript Identifying Number (if you know it)

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Are there any relevant conflicts of interest? Yes No

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Dr. Zaslavsky has nothing to disclose.

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1. Given Name (First Name)
Joseph

2. Surname (Last Name)
Newhouse

3. Date
02-July-2015

4. Are you the corresponding author? Yes No
Corresponding Author's Name
Sanghavi

5. Manuscript Title
Outcomes of Basic versus Advanced Life Support for Out-of-Hospital Medical Emergencies

6. Manuscript Identifying Number (if you know it)
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If yes, please fill out the appropriate information below.

Name of Entity	Grant?	Personal Fees?	Non-Financial Support?	Other?	Comments
Aetna	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Equity

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Newhouse is a director of and holds equity in Aetna.

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Prachi

2. Surname (Last Name)

Sanghavi

3. Date

01-July-2015

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Yes No

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