

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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2. The work under consideration for publication.

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)
David

2. Surname (Last Name)
Wendler

3. Date
06-May-2015

4. Are you the corresponding author?

Yes No

Corresponding Author's Name
Kim

5. Manuscript Title
Pragmatic Randomized Trials Without Standard Informed Consent?: A National Survey"

6. Manuscript Identifying Number (if you know it)
M15-0817

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Are there any relevant conflicts of interest? Yes No

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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. Wendler has nothing to disclose.

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Section 1. Identifying Information

1. Given Name (First Name)
Scott

2. Surname (Last Name)
Kim

3. Date
07-May-2015

4. Are you the corresponding author? Yes No

5. Manuscript Title
"Pragmatic Randomized Trials Without Standard Informed Consent?: A National Survey"

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 No

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Dr. Kim has nothing to disclose.

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Section 1. Identifying Information

1. Given Name (First Name)
Rahul

2. Surname (Last Name)
Nayak

3. Date
14-May-2015

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

5. Manuscript Title
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6. Manuscript Identifying Number (if you know it)
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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?	Personal Fees?	Non-Financial Support?	Other?	Comments
Time-sharing Experiments in the Social Sciences (TESS)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	PI for TESS funding (in-kind grant). TESS provided data collection using the GfK KnowledgePanel. TESS is funded by the National Science Foundation, SES-0818839 (Jeremy Freese and James Druckman, Principal Investigators).

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Mr. Nayak reports grants from Time-sharing Experiments in the Social Sciences (TESS), during the conduct of the study; .

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Franklin

2. Surname (Last Name)

Miller

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Corresponding Author's Name

Scott Kim

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