

#### **Instructions**

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

Whitlock 1



Section 1. Identifying Inform	•			
Identifying Inform	ation			
1. Given Name (First Name) Evelyn	2. Surname (Last Name Whitlock	2)	3. Date 02-March-2010	6
4. Are you the corresponding author?	✓ Yes No			
5. Manuscript Title "Aspirin for the Prevention of Cancer In Task Force"	cidence and Mortality:	Systematic Evider	nce Reviews for the U.S. Prev	entive Services
6. Manuscript Identifying Number (if you kr M15-2117	now it)			
Section 2. The Work Under Co	onsideration for Pu	blication		
Did you or your institution <b>at any time</b> rece any aspect of the submitted work (including statistical analysis, etc.)? Are there any relevant conflicts of intere If yes, please fill out the appropriate info	but not limited to grants	s, data monitoring b	oard, study design, manuscript	preparation,
Excess rows can be removed by pressin		niave more triair o	me entity press the ADD bu	ittori to add a row.
Name of Institution/Company	Grant? Personal Fees?	Non-Financial Support?	comments	
AHRQ			✓ Contract for systematic	review
Section 3. Relevant financial	activities outside th	ne submitted wo	ork.	
Place a check in the appropriate boxes in of compensation) with entities as described clicking the "Add +" box. You should repart there any relevant conflicts of interest."	bed in the instructions port relationships that	i. Use one line for e were <b>present dur</b>	each entity; add as many line	es as you need by
Are there any relevant connects of fitters	163   <b>V</b>   10	·		
Section 4. Intellectual Proper	rty Patents & Copy	yrights		
Do you have any patents, whether plan	ned, pending or issued	l, broadly relevant	to the work? Yes	No

Whitlock 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 follow	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
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patent

Buist 1



Section 1.	Identifying Inform	ation						
1. Given Name (Fi Diana		2. Surname (l Buist	Last Name)			3. Date 01-Decem	ber-2015	
4. Are you the cor	responding author?	Yes	✓ No	Correspond	ding Autho	or's Name		
Task Force  6. Manuscript Ide	e revention of Cancer Inc ntifying Number (if you kn		ortality: Syst	tematic Evide	ence Revi	ews for the U.S. Pr	reventive Services	
M15-2117				_				
Section 2								
Section 2.	The Work Under Co	onsideration	n for Publi	cation				
any aspect of the s statistical analysis, Are there any rel If yes, please fill o	evant conflicts of intere out the appropriate info	but not limited est? Yes ormation below	I to grants, da  No  W. If you have	ata monitoring	board, st	udy design, manusc	cript preparation,	
Excess rows can	be removed by pressing	g the "X" butto						
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Agency for Healthcar	re Research and Quality	✓				contract work thor support USPSTF	rugh AHRQ to	
Section 3.	Relevant financial	activities ou	ıtside the	submitted v	work.			
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Section 4.	Intellectual Proper	ty Patents	& Copyri	ghts				
Do you have any	patents, whether plan	ned, pending	or issued, b	roadly releva	nt to the	work? Yes	<b>✓</b> No	

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	elationships or activities that readers could perceive to have influenced, or that give the appearance of ncing, what you wrote in the submitted work?
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Dr. Buist reports	grants from Agency for Healthcare Research and Quality, during the conduct of the study; .

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Chubak 1



Section 1. Identifying Inform	ation		
1. Given Name (First Name) Jessica	2. Surname (Last Name) Chubak		3. Date 01-December-2015
4. Are you the corresponding author?	✓ Yes No		
5. Manuscript Title Aspirin for the Prevention of Cancer Inci Task Force	idence and Mortality: Systen	atic Evidence Rev	iews for the U.S. Preventive Services
6. Manuscript Identifying Number (if you kn M15-2117	ow it)		
Section 2. The Work Under Co	onsideration for Publica	ion	
any aspect of the submitted work (including statistical analysis, etc.)? Are there any relevant conflicts of intere	but not limited to grants, data est? Yes No ermation below. If you have i	monitoring board, st	ent, commercial, private foundation, etc.) for tudy design, manuscript preparation, ity press the "ADD" button to add a row.
Name of Institution/Company	Grant? Personal Non-F	inancial Other?	Comments
Agency for Healthcare Research and Quality	<b>✓</b>		Contract work through AHRQ to support the USPSTF
Section 3. Relevant financial	activities outside the sul	omitted work.	
Place a check in the appropriate boxes in of compensation) with entities as descriclicking the "Add +" box. You should repart there any relevant conflicts of interest.	bed in the instructions. Use oper relationships that were past? Yes V No	one line for each e oresent during th	ntity; add as many lines as you need by
Section 4. Intellectual Proper	ty Patents & Copyrigh	ts	
Do you have any patents, whether plant	ned, pending or issued, broa	dly relevant to the	work? ☐ Yes ✓ No

Chubak 2



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Dr. Chubak reports grants from Agency for Healthcare Research and Quality, during the conduct of the study; .

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Burda 1



Section 1. Ide	entifying Informa	ation						
1. Given Name (First Na Brittany			ne (Last Nam	e)		3. Date 01-December	r-2015	
4. Are you the correspo	onding author?	Yes	<b>√</b> No	Correspond Jessica Ch	_	or's Name		
5. Manuscript Title Aspirin for the Prever Task Force	ntion of Cancer Incid	dence and	Mortality:	Systematic Evide	ence Revi	ews for the U.S. Prev	entive Services	
6. Manuscript Identifyi M15-2117	ng Number (if you kno	ow it)						
Section 2. The	e Work Under Co	nsiderat	ion for Pu	blication				
Did you or your institut any aspect of the subm statistical analysis, etc.) Are there any relevan If yes, please fill out the Excess rows can be re	itted work (including l ) t conflicts of interes ne appropriate infoi	out not limst?	ited to grant 'es	s, data monitoring	g board, st	udy design, manuscrip	t preparation,	
Name of Institution/				Non-Financial Support?	Other?	Comments		
Agency for Healthcare Res	earch and Quality	<b>✓</b>				Contract work throug support the USPSTF	h AHRQ to	
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Section 4. Int	ellectual Propert	y Pate	nts & Cop	yrights				
Do you have any pate	ents, whether plann	ed, pendi	ng or issued	d, broadly releva	int to the	work? Yes	/ No	

Burda 2



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Williams 1



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1. Given Name (First Nar Selvi	me) 2. Surr Williar	name (Last Name) ms		3. Date 01-December-2015
4. Are you the correspon	nding author?	s 🗸 No	Corresponding Author's Nar Jessica Chubak, PhD	me
5. Manuscript Title Aspirin for the Preven Task Force	tion of Cancer Incidence a	and Mortality: Sy	stematic Evidence Reviews fo	or the U.S. Preventive Services
6. Manuscript Identifyin M15-2117	g Number (if you know it)			
Section 2. The	Work Under Consider	ation for Pub	ication	
	ted work (including but not		m a third party (government, cor data monitoring board, study de	mmercial, private foundation, etc.) for esign, manuscript preparation,
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of compensation) with	n entities as described in t ox. You should report rela	he instructions. I	Jse one line for each entity; a	ationships (regardless of amount add as many lines as you need by nonths prior to publication.
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Do you have any pater	nts, whether planned, per	nding or issued, I	proadly relevant to the work?	Yes V No

Williams 2



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Dr. Williams has nothing to disclose.

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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.

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

Anderson 1



Section 1. Identifying Inform	nation		
1. Given Name (First Name) Melissa	2. Surname (Last Name) Anderson		3. Date 01-December-2015
4. Are you the corresponding author?	☐ Yes ✓ No	Corresponding Au Dr. Jessica Chub	
5. Manuscript Title Aspirin for the Prevention of Cancer Inc Task Force	idence and Mortality: Syst	ematic Evidence R	eviews for the U.S. Preventive Services
6. Manuscript Identifying Number (if you kr M15-2117	now it)		
Section 2. The Work Under C	onsideration for Public	cation	
any aspect of the submitted work (including statistical analysis, etc.)? Are there any relevant conflicts of intere	g but not limited to grants, da est?  Yes  No ormation below. If you hav	ta monitoring board	nment, commercial, private foundation, etc.) for , study design, manuscript preparation, ntity press the "ADD" button to add a row.
Name of Institution/Company	Grant? Personal Nor	n-Financial Othe	Comments
Agency for Healthcare Research and Quality	<b>V</b>		Contract work through AHRQ to support the USPSTF
Section 3. Relevant financial	activities outside the s	submitted work	
of compensation) with entities as descr clicking the "Add +" box. You should re Are there any relevant conflicts of inter	ibed in the instructions. Us port relationships that wer est? ☐ Yes ✓ No	e one line for each	ancial relationships (regardless of amount entity; add as many lines as you need by the 36 months prior to publication.
Section 4. Intellectual Prope	rty Patents & Copyric	yhts	
Do you have any patents, whether plan	ned, pending or issued, br	oadly relevant to t	he work? ☐ Yes ✓ No

Anderson 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):
✓ 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.
Ms. Anderson reports grants from Agency for Healthcare Research and Quality, during the conduct of the study; .

## **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.

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#### **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

Kamineni 1



Section 1.	Identifying Inform	nation					
1. Given Name (First Name) Aruna		2. Surname (Last Na Kamineni	me)	3. Date 14-December-2015			
4. Are you the corresponding author?		☐ Yes ✓ No	-	Corresponding Author's Name Jessica Chubak, PhD			
5. Manuscript Title Aspirin for the Pi Task Force	e evention of Cancer Inc	idence and Mortality	: Systematic Evid	ence Revi	ews for the U.S. Pre	ventive Services	S
6. Manuscript Ider M15-2117	ntifying Number (if you kn	now it)					
Section 2.	The Work Under Co	onsideration for P	ublication				
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  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		Non-Financial				
Name of Institut	ion/Company	Grant? Personal Fees?	Support?	Other •	Comments		
Agency for Healthcar	e Research and Quality	<b>✓</b>			Contract work through	gh AHRQ to	
Section 3.	Relevant financial	activities outside	the submitted	work			
of compensation clicking the "Add	the appropriate boxes i ) with entities as descri +" box. You should rep	bed in the instructio port relationships tha	ns. Use one line f at were <b>present c</b>	or each er	ntity; add as many li	ines as you need	d by
Are there any rel	evant conflicts of intere	est? Yes ✓	No				
	l						
Section 4.	Intellectual Proper	ty Patents & Co	pyrights				
Do you have any	patents, whether plan	ned, pending or issu	ed, broadly releva	ant to the	work? Yes	<b>√</b> No	

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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):					
✓ 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					
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. Kamineni reports grants from Agency for Healthcare Research and Quality, during the conduct of the study; .					

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