

## ICMJE Form for Disclosure of Potential Conflicts of Interest

### Instructions

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#### 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.

#### 5. Relationships not covered above.

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## ICMJE Form for Disclosure of Potential Conflicts of Interest

### Section 1. Identifying Information

1. Given Name (First Name)  
Albert

2. Surname (Last Name)  
Siu

3. Date  
07-December-2015

4. Are you the corresponding author?  Yes  No

5. Manuscript Title  
Screening for Depression in Children and Adolescents

6. Manuscript Identifying Number (if you know it)

### Section 2. The Work Under Consideration for Publication

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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

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Dr. Siu has nothing to disclose.

### 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)

Linda

2. Surname (Last Name)

Baumann

3. Date

08-December-2015

4. Are you the corresponding author?

 Yes

 No

Corresponding Author's Name

Al Siu

5. Manuscript Title

Screening for Depression in Children and Adolescents

6. Manuscript Identifying Number (if you know it)

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## ICMJE Form for Disclosure of Potential Conflicts of Interest

### Section 1. Identifying Information

1. Given Name (First Name)

Kirsten

2. Surname (Last Name)

Bibbins-Domingo

3. Date

07-December-2015

4. Are you the corresponding author?

Yes

No

Corresponding Author's Name

Al Siu

5. Manuscript Title

Screening for Depression in Children and Adolescents

6. Manuscript Identifying Number (if you know it)

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No

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Dr. Bibbins-Domingo 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)

Karina

2. Surname (Last Name)

Davidson

3. Date

07-December-2015

4. Are you the corresponding author?

Yes  No

Corresponding Author's Name

Al Siu

5. Manuscript Title

Screening for Depression in Children and Adolescents

6. Manuscript Identifying Number (if you know it)

\_\_\_\_\_

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Dr. Davidson has nothing to disclose.

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1. Given Name (First Name)

Mark

2. Surname (Last Name)

Ebell

3. Date

07-December-2015

4. Are you the corresponding author?

Yes

No

Corresponding Author's Name

Al Siu

5. Manuscript Title

Screening for Depression in Children and Adolescents

6. Manuscript Identifying Number (if you know it)

*(Faint, illegible text from bleed-through)*

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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)

Francisco

2. Surname (Last Name)

Garcia

3. Date

07-December-2015

4. Are you the corresponding author?

Yes

No

Corresponding Author's Name

Al Siu

5. Manuscript Title

Screening for Depression in Children and Adolescents

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

### 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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Dr. Garcia has nothing to disclose.

### 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)

Matthew

2. Surname (Last Name)

Gillman

3. Date

07-December-2015

4. Are you the corresponding author?

Yes

No

Corresponding Author's Name

Al Siu

5. Manuscript Title

Screening for Depression in Children and Adolescents

6. Manuscript Identifying Number (if you know it)

### Section 2. The Work Under Consideration for Publication

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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

### 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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Dr. Gillman 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)

David

2. Surname (Last Name)

Grossman

3. Date

07-December-2015

4. Are you the corresponding author?

Yes

No

Corresponding Author's Name

Al Siu

5. Manuscript Title

Screening for Depression in Children and Adolescents

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

### 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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Dr. Grossman has nothing to disclose.

### 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)

Jessica

2. Surname (Last Name)

Herzstein

3. Date

07-December-2015

4. Are you the corresponding author?

Yes  No

Corresponding Author's Name

Al Siu

5. Manuscript Title

Screening for Depression in Children and Adolescents

6. Manuscript Identifying Number (if you know it)

### 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

### 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 5. Relationships not covered above

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Dr. Herzstein has nothing to disclose.

### 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)

Alex

2. Surname (Last Name)

Kemper

3. Date

07-December-2015

4. Are you the corresponding author?

Yes

No

Corresponding Author's Name

Al Siu

5. Manuscript Title

Screening for Depression in Children and Adolescents

6. Manuscript Identifying Number (if you know it)

### Section 2. The Work Under Consideration for Publication

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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

### Section 4. Intellectual Property -- Patents & Copyrights

Do you have any patents, whether planned, pending or issued, broadly relevant to the work?

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## ICMJE Form for Disclosure of Potential Conflicts of Interest

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Dr. Kemper 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)

Alex

2. Surname (Last Name)

Krist

3. Date

07-December-2015

4. Are you the corresponding author?

Yes

No

Corresponding Author's Name

Al Siu

5. Manuscript Title

Screening for Depression in Children and Adolescents

6. Manuscript Identifying Number (if you know it)

### 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

### 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 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?

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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. Krist has nothing to disclose.

### 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)

Ann

2. Surname (Last Name)

Kurth

3. Date

06-December-2015

4. Are you the corresponding author?

Yes

No

Corresponding Author's Name

Al Siu

5. Manuscript Title

Screening for Depression in Children and Adolescents

6. Manuscript Identifying Number (if you know it)

### Section 2. The Work Under Consideration for Publication

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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

### 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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Dr. Kurth 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)

Owens

3. Date

07-December-2015

4. Are you the corresponding author?

Yes

No

Corresponding Author's Name

Al Siu

5. Manuscript Title

Screening for Depression in Children and Adolescents

6. Manuscript Identifying Number (if you know it)

*(Faint, illegible text from bleed-through)*

### Section 2. The Work Under Consideration for Publication

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Yes

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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



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Dr. Owens 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)

William

2. Surname (Last Name)

Phillips

3. Date

07-December-2015

4. Are you the corresponding author?

Yes

No

Corresponding Author's Name

Al Siu

5. Manuscript Title

Screening for Depression in Children and Adolescents

6. Manuscript Identifying Number (if you know it)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

### 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

### 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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Dr. Phillips has nothing to disclose.

### Evaluation and Feedback

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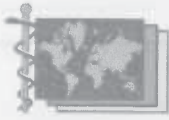
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## ICMJE Form for Disclosure of Potential Conflicts of Interest

### Section 1. Identifying Information

1. Given Name (First Name)

Maureen

2. Surname (Last Name)

Phipps

3. Date

07-December-2015

4. Are you the corresponding author?

Yes

No

Corresponding Author's Name

Al Siu

5. Manuscript Title

Screening for Depression in Children and Adolescents

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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Yes

No

### Section 4. Intellectual Property -- Patents & Copyrights

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Yes

No



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Dr. Phipps 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)

Michael

2. Surname (Last Name)

Pignone

3. Date

07-December-2015

4. Are you the corresponding author?

 Yes No

Corresponding Author's Name

Al Siu

5. Manuscript Title

Screening for Depression in Children and Adolescents

6. Manuscript Identifying Number (if you know it)

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Are there any relevant conflicts of interest?

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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. Pignone 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.