

ICMJE Form for Disclosure of Potential Conflicts of Interest

Instructions

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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) Alexi | 2. Surname (Last Name) Wright | 3. Date 21-December-2016 |
| 4. Are you the corresponding author? | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | Corresponding Author's Name John Harris |
| 5. Manuscript Title The Relationship of Obesity to Hospice Use and Expenditures: A Cohort Study | | |
| 6. Manuscript Identifying Number (if you know it) M16-0749 | | |

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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Dr. Wright has nothing to disclose.

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| | | |
|--|---|---|
| 1. Given Name (First Name) Jennifer | 2. Surname (Last Name) Griggs | 3. Date 21-December-2016 |
| 4. Are you the corresponding author? | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | Corresponding Author's Name John A. Harris |
| 5. Manuscript Title The Relationship of Obesity to Hospice Use and Expenditures: A Cohort Study | | |
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Section 1. Identifying Information

| | | |
|--|---|---|
| 1. Given Name (First Name) Elena | 2. Surname (Last Name) Byhoff | 3. Date 09-January-2017 |
| 4. Are you the corresponding author? | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | Corresponding Author's Name John A. Harris |
| 5. Manuscript Title The Relationship of Obesity to Hospice Use and Expenditures: A Cohort Study | | |
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Dr. Byhoff 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)
John

2. Surname (Last Name)
Harris

3. Date
21-December-2016

4. Are you the corresponding author? Yes No

5. Manuscript Title
The Relationship of Obesity to Hospice Use and Expenditures: A Cohort Study.

6. Manuscript Identifying Number (if you know it)
M16-0749

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Dr. Harris has nothing to disclose.

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| | | |
|--|---|--|
| 1. Given Name (First Name) Chithra | 2. Surname (Last Name) Perumalswami | 3. Date 22-December-2016 |
| 4. Are you the corresponding author? | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | Corresponding Author's Name John Harris, MD MSc |
| 5. Manuscript Title The Relationship of Obesity to Hospice Use and Expenditures: A Cohort Study | | |
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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

ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

| | | |
|--|---------------------------------|--|
| 1. Given Name (First Name) Kenneth | 2. Surname (Last Name) Langa | 3. Date 28-December-2016 |
| 4. Are you the corresponding author? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | | Corresponding Author's Name John Harris |
| 5. Manuscript Title The Relationship of Obesity to Hospice Use and Expenditures: A Cohort Study | | |
| 6. Manuscript Identifying Number (if you know it) M16-0749 | | |

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

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.

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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 publication**.

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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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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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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. Langa reports grants from National Institute on Aging, during the conduct of the study; grants from National Institute on Aging, outside the submitted work.

Evaluation and Feedback

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