

#### **Instructions**

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# Identifying information.

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Cheung 1



Section 1. Identifying Inform	nation		
1. Given Name (First Name) Andrew	2. Surname (Last Name) Cheung		3. Date 03-November-2016
4. Are you the corresponding author?	☐ Yes ✓ No	Corresponding Author's Nar Baiju Shah	me
5. Manuscript Title Impact of primary care physician volum	ne on quality of diabetes ca	are: a population-based coh	ort study
6. Manuscript Identifying Number (if you kr M16-1056	now it)		
Section 2. The Work Under Co	onsideration for Public	ation	
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	g but not limited to grants, da		
Section 3. Relevant financial	activities outside the s	ubmitted work.	
Place a check in the appropriate boxes in of compensation) with entities as describled clicking the "Add +" box. You should replace there any relevant conflicts of interest.	ibed in the instructions. Us port relationships that wer	se one line for each entity; a	dd as many lines as you need by
Section 4. Intellectual Proper	rty Patents & Copyric	jhts	
Do you have any patents, whether plan	ned, pending or issued, br	oadly relevant to the work?	Yes 🗸 No

Cheung 2



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Stukel 1



Section 1. Identifying Inform	nation	
Given Name (First Name) Therese	2. Surname (Last Name) Stukel	3. Date 04-November-2016
4. Are you the corresponding author?	☐ Yes ✓ No	Corresponding Author's Name Baiju Shah
5. Manuscript Title Impact of primary care physician volun	ne on quality of diabetes ca	are: a population-based cohort study
6. Manuscript ldentifying Number (if you k	now it)	
Section 2. The Work Under C	onsideration for Public	cation
	g but not limited to grants, da	a third party (government, commercial, private foundation, etc.) for ta monitoring board, study design, manuscript preparation,
Section 3. Polovant financial	activities outside the s	مارين
Place a check in the appropriate boxes of compensation) with entities as descr	in the table to indicate who ibed in the instructions. Us port relationships that wer	ether you have financial relationships (regardless of amount se one line for each entity; add as many lines as you need by re present during the 36 months prior to publication.
Section 4. Intellectual Prope	rty Patents & Copyric	ghts
Do you have any patents, whether plan	nned, pending or issued, br	oadly relevant to the work? Yes V No

Stukel 2



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Shah 1



Section 1. Identifying Infor	mation	
1. Given Name (First Name) Baiju	2. Surname (Last Name) Shah	3. Date 04-November-2016
4. Are you the corresponding author?	✓ Yes No	
5. Manuscript Title Impact of primary care physician volu	me on quality of diabetes care	
6. Manuscript Identifying Number (if you l M16-1056	know it)	
Section 2. The Work Under 0	Consideration for Publication	
	ng but not limited to grants, data monitoring	government, commercial, private foundation, etc.) for government, commercial, private foundation, etc.) for government, study design, manuscript preparation,
Section 3. Relevant financia	l activities outside the submitted v	work.
of compensation) with entities as desc	ribed in the instructions. Use one line for eport relationships that were <b>present d</b>	ove financial relationships (regardless of amount or each entity; add as many lines as you need by uring the 36 months prior to publication.
Section 4. Intellectual Prope	erty Patents & Copyrights	
Do you have any patents, whether pla	nned, pending or issued, broadly releva	nt to the work? Yes V No

Shah 2



Section 5. Polytionships not sovered phays	
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Glazier 1



Section 1. Identifying Inform	nation		
1. Given Name (First Name) Richard	2. Surname (Last Name) Glazier		3. Date 07-November-2016
4. Are you the corresponding author?	☐ Yes ✓ No	Corresponding Author's Nar Baiju Shah	me
5. Manuscript Title Impact of primary care physician volum	ne on quality of diabetes ca	are: a population-based coh	ort study
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Section 4. Intellectual Proper	rty Patents & Copyric	ghts	
Do you have any patents, whether plan			Yes 🗸 No

Glazier 2



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Ling 1



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	e ry care physician volum es care: a population-b		
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	ı		
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Do you have any			oadly relevant to the work? Yes V No

Ling 2



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Alter



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4. Are you the corresponding author?	☐ Yes ✓ No	Corresponding Author's Name Baiju Shau
5. Manuscript Title "Impact of primary care physician volui	me on quality of diabetes o	care: a population-based cohort study."
6. Manuscript Identifying Number (if you ki M16-1056	now it)	
Section 2. The Work Under C	onsideration for Public	cation
· · · · · · · · · · · · · · · · · · ·	g but not limited to grants, da	a third party (government, commercial, private foundation, etc.) for ata monitoring board, study design, manuscript preparation,
Section 3. Relevant financial	activities outside the s	submitted work.
Place a check in the appropriate boxes of compensation) with entities as descr	in the table to indicate wh ibed in the instructions. Us port relationships that wer	ether you have financial relationships (regardless of amount se one line for each entity; add as many lines as you need by re present during the 36 months prior to publication.
Section 4. Intellectual Prope	rty Patents & Copyrig	ghts
Do you have any patents, whether plan	ned, pending or issued, br	roadly relevant to the work? Yes V No

Alter 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
Disclosure Statement
Based on the above disclosures, this form will automatically generate a disclosure statement, which will appear in the box below.
Dr. Alter has nothing to disclose.

## **Evaluation and Feedback**

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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.

# Identifying information.

# 2. The work under consideration for publication.

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.

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#### 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

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Section 1. Iden	ntifying Informatio	on			
Given Name (First Name)     Xuesong		2. Surname (Last Name) Wang		3. Date 08-November-2016	
4. Are you the corresponding author?		Yes 🗸 No	Corresponding Author's Name Baiju R Shah		
5. Manuscript Title Impact of primary care physician volume on quality of diabetes care: a population-based cohort study				ort study	
6. Manuscript Identifying Number (if you know it) M16-1056					
			_		
Section 2. The Work Under Consideration for Publication					
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					
Section 3. Rele	vant financial activ	vities outside the	submitted work.		
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Section 4. Intel	lectual Property	- Patents & Copyri	ghts		
			roadly relevant to the work?	☐ Yes 🗸 No	

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Section 5. Relationships not covered above				
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✓ No other relationships/conditions/circumstances that present a potential conflict of interest				
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Dr. Wang has nothing to disclose.				

## **Evaluation and Feedback**

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