

## 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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**Other:** Anything not covered under the previous three boxes

**Pending:** The patent has been filed but not issued

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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) Daniel

2. Surname (Last Name) Blumenthal

3. Date 17-July-2017

4. Are you the corresponding author?  Yes  No Corresponding Author's Name Anupam B. Jena

5. Manuscript Title U.S. Immigration Policy and American Medical Research--The Scientific Contributions of Foreign Medical Graduates

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.

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**.

Are there any relevant conflicts of interest?  Yes  No

If yes, please fill out the appropriate information below.

Name of Entity	Grant?	Personal Fees?	Non-Financial Support?	Other?	Comments
John S. Ladue Memorial Fellowship at Harvard Medical School	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	I am currently receiving research support through the John S. LaDue Memorial Fellowship at Harvard Medical School. This sponsor had no role in design and conduct of the study; collection, management, analysis, and interpretation of the data; preparation, review, or approval of the manuscript; or the decision to submit the manuscript for publication.

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Name of Entity	Grant?	Personal Fees?	Non-Financial Support?	Other?	Comments
Precision Health Economics	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	I have received consulting fees for unrelated work from Precision Health Economics, a company which provides consulting services to the life sciences industry.
Aetion, Inc	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	I have received consulting fees for unrelated work from Aetion, Inc.
Novartis Pharmaceuticals	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	I have received consulting fees for unrelated work from Novartis Pharmaceuticals.

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

Do you have any patents, whether planned, pending or issued, broadly relevant to the work?  Yes  No

### Section 5. Relationships not covered above

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- Yes, the following relationships/conditions/circumstances are present (explain below):
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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. Blumenthal reports grants from John S. Ladue Memorial Fellowship at Harvard Medical School, personal fees from Precision Health Economics, personal fees from Aetion, Inc, personal fees from Novartis Pharmaceuticals, other from HLM Venture Partners, outside the submitted work; .

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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)  
Anupam

2. Surname (Last Name)  
Jena

3. Date  
17-July-2017

4. Are you the corresponding author?  Yes  No

5. Manuscript Title  
U.S. Immigration Policy and American Medical Research: The Scientific Contributions of Foreign Medical Graduates

6. Manuscript Identifying Number (if you know it)  
M17-1304

### 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.

Name of Institution/Company	Grant?	Personal Fees?	Non-Financial Support?	Other?	Comments
NIH	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	1DP5OD017897-01

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Are there any relevant conflicts of interest?  Yes  No

If yes, please fill out the appropriate information below.

Name of Entity	Grant?	Personal Fees?	Non-Financial Support?	Other?	Comments
Pfizer	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Consulting fee re: assessing the value of unmet need in health care
Hill Rom Services, Inc	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Consulting fee re: assessing the value of early mobility programs

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Bristol Myers Squibb	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Consulting fee re: new approaches to valuing improvements in cancer treatment
Novartis Pharmaceuticals	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Consulting fee re: new approaches to valuing improvements in cancer treatment
Vertex Pharmaceuticals	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Consulting fee re: assessing the value of new cystic fibrosis therapies
Precision Health Economics	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	General health economics consulting

### 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. Jena reports grants from NIH, during the conduct of the study; personal fees from Pfizer, personal fees from Hill Rom Services, Inc, personal fees from Bristol Myers Squibb, personal fees from Novartis Pharmaceuticals, personal fees from Vertex Pharmaceuticals, personal fees from Precision Health Economics, outside the submitted work; .

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1. Given Name (First Name)  
Dhruv

2. Surname (Last Name)  
Khullar

3. Date  
18-July-2017

4. Are you the corresponding author?

Yes  No

Corresponding Author's Name  
Anupam B. Jena

5. Manuscript Title

U.S. Immigration Policy and American Medical Research—The Scientific Contributions of Foreign Medical Graduates

6. Manuscript Identifying Number (if you know it)

M17-1304

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Dr. Khullar has nothing to disclose.

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### Section 1. Identifying Information

1. Given Name (First Name)  
Andrew

2. Surname (Last Name)  
Olenski

3. Date  
17-July-2017

4. Are you the corresponding author?

Yes  No

Corresponding Author's Name  
Anupam Bapu Jena

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