

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.

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

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Section 1.	Identifying Information							
1. Given Name (First Name) Eric		2. Surname (Last Name) Sun		3. Date 21-August-2017				
4. Are you the cor	responding author?	✓ Yes No						
5. Manuscript Title Distribution of Prescription Opioid Use Among Privately Insured Adults Without Cancer: United States, 2001–2013								
6. Manuscript Identifying Number (if you know it) M17-1408								
Section 2.	The Week Heder C	ancidovation for Dub	liantin n					
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 Support Comments								
National Institutes of	Health	V		K08DA042314-01				
	ı							
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? Ves No								
If yes, please fill out the appropriate information below.								
Name of Entity		Grant'	on-Financial Other?	Comments				
Egalet, Inc.				Consulting Arrangeement				

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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 Volume No					
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):					
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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. Sun reports grants from National Institutes of Health, during the conduct of the study; personal fees from Egalet, Inc., outside the submitted work; .					

Evaluation and Feedback

 $Please\ visit\ \underline{http://www.icmje.org/cgi-bin/feedback}\ to\ provide\ feedback\ on\ your\ experience\ with\ completing\ this\ form.$

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Section 1. Identifying Information									
Given Name (First Name) Anupam	2. Surname (Last Name) Jena			3. Date 09-August-2017					
4. Are you the corresponding author? ✓ Yes No									
5. Manuscript Title Distribution of prescription opioid use in the United States, 2001-2013									
6. Manuscript Identifying Number (if you know it) M17-1408									
Section 2. The Work Under Co	nsideration for P	ublication							
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 intered if yes, please fill out the appropriate info		No	ono ontit	ay proce the "ADD" button to add a row					
Excess rows can be removed by pressing		u nave more than	i one entit	y press the ADD button to add a row.					
Name of Institution/Company	Grant? Personal Fees?	Non-Financial Support?	Other?	Comments					
NIH	✓			1DP5OD017897-01					
Section 3. Relevant financial a	activities outside	the submitted	work						
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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				Consulting fee re: assessing the value of unmet need in health care					
Hill Rom Services, Inc				Consulting fee re: assessing the value of early mobility programs					



Name of Entity	Grant?	Personal Fees	Non-Financial Support?	Other?	Comments			
Bristol Myers Squibb		✓			Consulting fee re: new approaches to valuing improvements in cancer treatment			
Novartis Pharmaceuticals		✓			Consulting fee re: new approaches to valuing improvements in cancer treatment			
Vertex Pharmaceuticals		✓			Consulting fee re: assessing the value of new cystic fibrosis therapies			
Precision Health Economics		\checkmark			General health economics consulting			
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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; .								



Evaluation and Feedback

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