

ICMJE Form for Disclosure of Potential Conflicts of Interest

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.

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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) Christine

2. Surname (Last Name) Berg

3. Date 08-November-2017

4. Are you the corresponding author? Yes No Corresponding Author's Name Li Cheung

5. Manuscript Title Number of U.S. lung-cancer deaths preventable by screening: 2005-2015

6. Manuscript Identifying Number (if you know it) M17-2067

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

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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
Medial Early Sign LLC	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Works on early detection biomarkers
GRAIL, Inc	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Works on early detection biomarkers

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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Based on the above disclosures, this form will automatically generate a disclosure statement, which will appear in the box below.

Dr. Berg reports personal fees from Medial Early Sign LLC, personal fees from GRAIL, Inc, outside the submitted work; .

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)
Anil

2. Surname (Last Name)
Chaturvedi

3. Date
21-November-2017

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

5. Manuscript Title
Preventing Lung-Cancer Mortality by CT Screening: The Effect of Risk-based versus USPSTF Eligibility Criteria, 2005-2015

6. Manuscript Identifying Number (if you know it)
M17-2067

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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

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Section 6. Disclosure Statement

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Dr. Chaturvedi 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) Hormuzd	2. Surname (Last Name) Katki	3. Date 17-November-2017
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Li Cheung
5. Manuscript Title Preventing Lung-Cancer Mortality by CT Screening: The Effect of Risk-based versus USPSTF Eligibility Criteria, 2005-2015.		
6. Manuscript Identifying Number (if you know it) M17-2067		

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

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Dr. Katki has nothing to disclose.

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Section 1. Identifying Information

1. Given Name (First Name)
Li

2. Surname (Last Name)
Cheung

3. Date
11-November-2017

4. Are you the corresponding author? Yes No

5. Manuscript Title
Preventing Lung-Cancer Mortality by CT Screening: The Effect of Risk-based versus USPSTF Eligibility Criteria, 2005-2015.

6. Manuscript Identifying Number (if you know it)
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Dr. Cheung has nothing to disclose.

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Section 1. Identifying Information

1. Given Name (First Name) Ahmedin	2. Surname (Last Name) Jemal	3. Date 07-November-2017
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Li Cheung
5. Manuscript Title Number of U.S. lung-cancer deaths preventable by screening: 2005-2015		
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