

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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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) Divya	2. Surname (Last Name) Ravi	3. Date 26-April-2018
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Mehrnaz Ghasemiesfe
5. Manuscript Title Marijuana Use, Respiratory Symptoms and Pulmonary Function: A Systematic Review and Meta-analysis		
6. Manuscript Identifying Number (if you know it) M18-0522		

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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Section 4. Intellectual Property -- Patents & Copyrights

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Dr. Ravi 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)

Mehrnaz

2. Surname (Last Name)

Ghasemiesfe

3. Date

27-April-2018

4. Are you the corresponding author?

Yes No

5. Manuscript Title

Marijuana Use, Respiratory Symptoms and Pulmonary Function: A Systematic Review and Meta-analysis

6. Manuscript Identifying Number (if you know it)

M18-0522

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Dr. Ghasemiesfe has nothing to disclose.

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Section 1. Identifying Information

1. Given Name (First Name) Salomeh	2. Surname (Last Name) Keyhani	3. Date
4. Are you the corresponding author? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Corresponding Author's Name
5. Manuscript Title Marijuana Use, Respiratory Symptoms and Pulmonary Function: A Systematic Review and Meta-analysis		
6. Manuscript Identifying Number (if you know it) M18-0522		

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Dr. Keyhani has nothing to disclose.

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1. Given Name (First Name) Deborah	2. Surname (Last Name) Korenstein	3. Date 26-April-2018
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name _____
5. Manuscript Title Marijuana Use, Respiratory Symptoms and Pulmonary Function: A Systematic Review and Meta-analysis	_____	
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1. Given Name (First Name) Peter	2. Surname (Last Name) Austin	3. Date 26-April-2018
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Mehrnaz Ghasemiesfe
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1. Given Name (First Name)

James

2. Surname (Last Name)

Frank

3. Date

26-April-2018

4. Are you the corresponding author?

Yes

No

Corresponding Author's Name

Salemeh Keyhani

5. Manuscript Title

Marijuana Use, Respiratory Symptoms and Pulmonary Function: A Systematic Review and Meta-analysis

6. Manuscript Identifying Number (if you know it)

M18-0522

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1. Given Name (First Name) Mehrdad	2. Surname (Last Name) Arjomandi	3. Date 26-April-2018
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Mehrnaz Ghasemiesfe
5. Manuscript Title Marijuana Use, Respiratory Symptoms and Pulmonary Function: A Systematic Review and Meta-analysis		
6. Manuscript Identifying Number (if you know it) M18-0522		

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Dr. Arjomandi has nothing to disclose.

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2. Surname (Last Name)

Vali

3. Date

17-May-2018

4. Are you the corresponding author?

Yes No

Corresponding Author's Name

Salomeh Keyhani

5. Manuscript Title

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