

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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Section 1.	Identifying Infor	mation			
1. Given Name (Fi Anna	rst Name)	2. Surname (Last Name) Conlon	3. Date 03-April-2019		
4. Are you the corresponding author?		Yes 🖌 No	Corresponding Author's Name David Paje		
5. Manuscript Title Use of Periphera		theters in Patients with A	dvanced Chronic Kidney Disease: A Prospective Cohort Study		
6. Manuscript Ider M18-2937	ntifying Number (if you k	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.)?

🖌 No

Are there any relevant conflicts of interest?	Yes
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Are there any relevant conflicts of interest?		Yes	\checkmark	No
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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	\checkmark	No



Section 5. Relationships not covered above

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Dr. Conlon has nothing to disclose.

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Section 1.	Identifying Infor	Identifying Information				
1. Given Name (Fi Vineet	rst Name)	2. Surname (Last Name) Chopra	3. Date 26-April-2019			
4. Are you the cor	responding author?	✓ Yes No				

5. Manuscript Title

Use of Peripherally Inserted Central Catheters in Patients with Advanced Chronic Kidney Disease: A Prospective Cohort Study

6. Manuscript Identifying Number (if you know it)

M18-2937

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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	1.
Excess rows can be removed by pressing the "X" button.	

Name of Institution/Company	Grant?	Personal Fees?	Non-Financial Support <mark>?</mark>	Other?	Comments	
AHRQ	\checkmark				1 R18 HS025891-01	

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Are there any relevant conflicts of interest? Yes 🗸 No

ction 4.	Intellectual Pro	perty Patents	& Copyrights
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Do you have any patents, whether planned, pending or issued, broadly relevant to the work? Yes 🗸 No

Se



Section 5. Relationships not covered above

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Dr. Chopra reports grants from AHRQ, during the conduct of the study; .

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ast Name) 3. Date 08-March-2019
No Corresponding Author's Name Vineet Chopra
ts with Advanced Chronic Kidney Disease: A Prospective Cohort Study

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Are there any relevant conflicts of interest?	Yes
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Are there any relevant conflicts of interest?	Y	'es	\checkmark	No
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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	🖌 No	
		•	



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Section 1.	Identifying Inform	nation	
1. Given Name (Fi Scott	rst Name)	2. Surname (Last Name) Flanders	3. Date 11-March-2019
4. Are you the corresponding author?		Yes 🖌 No	Corresponding Author's Name David Paje
5. Manuscript Title Use of Periphera		heters in Patients with Ac	Ivanced Chronic Kidney Disease: A Prospective Cohort Study
6. Manuscript Ide	ntifying Number (if you kr	now it)	

M18-2937

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No

Are there any relevant conflicts of interest? Yes

If yes, please fill out the appropriate information below.

Name of Entity	Grant?	Personal Fees?	Non-Financial Support?	Other?	Comments	
Expert Testimony		\checkmark				
Blue Cross Blue Shield of Michigan	\checkmark					
Agency for Healthcare Research and Quality	\checkmark					
Wiley Publishing		\checkmark				



Section 4. Intellectual Property -- Patents & Copyrights

Do you have any patents, whether planned, pending or issued, broadly relevant to the work? Yes Ves

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Dr. Flanders reports personal fees from Expert Testimony, grants from Blue Cross Blue Shield of Michigan, grants from Agency for Healthcare Research and Quality , personal fees from Wiley Publishing, outside the submitted work; .

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1. Given Name (First Name) Mary	2. Surname (Last Name) Rogers	3. Date 08-March-2019
4. Are you the corresponding author?	Yes 🖌 No	Corresponding Author's Name
5. Manuscript Title Jse of Peripherally Inserted Central 5. Manuscript Identifying Number (if yo		vanced Chronic Kidney Disease: A Prospective Cohort Stu

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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.)?

🖌 No

Are there any relev	vant conflicts of	interest?	Yes
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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**.

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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 🖌 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?

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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. Bernstein has nothing to disclose.

Evaluation and Feedback