

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.

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3. Relevant financial activities outside the submitted work.

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4. Intellectual Property.

This section asks about patents and copyrights, whether pending, issued, licensed and/or receiving royalties.

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

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



Section 1. Identifying Inform	ation				
Given Name (First Name) Sebastian	2. Surname (I Schneeweis:				3. Date 02-November-2018
4. Are you the corresponding author?	Yes	No	Correspond	ding Author's N oran	Name
5. Manuscript Title Risk of Psychosis with Amphetamine					
6. Manuscript Identifying Number (if you kr New England Journal of Medicine 18-13					
Section 2. The Work Under Co	onsideration	for Public	ation		
Did you or your institution at any time rece any aspect of the submitted work (including statistical analysis, etc.)? Are there any relevant conflicts of intere	but not limited				
If yes, please fill out the appropriate info			e more thar	one entity p	press the "ADD" button to add a row.
Excess rows can be removed by pressing	g the "X" butto	on.			
Name of Institution/Company	Grant•		n-Financial upport <mark>?</mark>	Other? Co	omments
J.S. Food and Drug Administration	✓				
PCORI	✓				
NIH	\checkmark				
Section 3. Relevant financial	activities ou	tside the s	ubmitted	work.	
Place a check in the appropriate boxes i of compensation) with entities as descri clicking the "Add +" box. You should rep	n the table to bed in the inst	indicate who	ether you ha	ave financial r or each entity	r; add as many lines as you need by
Are there any relevant conflicts of interest		No			
If yes, please fill out the appropriate info	ormation below	v.			
	2 Per	rsonal Nor	n-Financial	7	
Name of Entity	Grant	•	upport?	Other C	omments
WHISCON LLC		✓			ealthcare consulting company/



Name of Entity	Grant?	Personal Fees	Non-Financial Support?	Other?	Comments
Aetion Inc.				√	A healthcare software company in which I hold equity
Bayer				√	PI of research contracts to the Brigham and Women's Hospital
Vertex				√	PI of research contracts to the Brigham and Women's Hospital
Boehringer Ingelheim				√	PI of research contracts to the Brigham and Women's Hospital
Arnold Foundation				✓	PI of research contracts to the Brigham and Women's Hospital
Section 4. Intellectual Property Patents & Copyrights					
Do you have any patents, whether plann If yes, please fill out the appropriate info Excess rows can be removed by pressing	rmation b	elow. If yo	•		
Patent? Pendin	g <mark>?</mark> Issue	ed? Licens	ed?Royalties?	License	ce? Comments
US PTO #: 9378271: Database system for analysis of longitudinal data sets	✓				Owned by Aetion/no royalties
Section 5. Polationships not sovered above					
Relationships not covered above					
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Section 6.

Disclosure Statement

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Dr. Schneeweiss reports grants from U.S. Food and Drug Administration, grants from PCORI, grants from NIH, during the conduct of the study; personal fees from WHISCON LLC, other from Aetion Inc., other from Bayer, other from Vertex, other from Boehringer Ingelheim, other from Arnold Foundation, outside the submitted work; In addition, Dr. Schneeweiss has a patent US PTO #: 9378271: Database system for analysis of longitudinal data sets issued.

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Arlett 1



Section 1. Identifying Info	ormation	
1. Given Name (First Name) Peter	2. Surname (Last Name) Arlett	3. Date 04-February-2019
4. Are you the corresponding author?	Yes ✓ No	Corresponding Author's Name Shirley V Wang
5. Manuscript Title Graphical Depiction of Longitudinal	l Study Designs in Healthcare	Databases
6. Manuscript Identifying Number (if yo M18-3079	ou know it)	
Section 2. The Work Unde	r Consideration for Public	cation
	ding but not limited to grants, da	a third party (government, commercial, private foundation, etc.) for ita monitoring board, study design, manuscript preparation,
Section 3. Relevant finance	ial activities outside the s	submitted work.
of compensation) with entities as de	escribed in the instructions. Us d report relationships that wer	ether you have financial relationships (regardless of amount se one line for each entity; add as many lines as you need by the present during the 36 months prior to publication.
Section 4. Intellectual Pro		la.
Intellectual Pro	perty Patents & Copyric	ints —
Do you have any patents, whether p	olanned, pending or issued, br	oadly relevant to the work? Yes Vo

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Dr. Arlett has nothing to disclose.

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Goettsch 1



Section 1. Identifying Inform	nation	
1. Given Name (First Name) Wim	2. Surname (Last Name) Goettsch	3. Date 04-February-2019
4. Are you the corresponding author?	☐ Yes 🗸 No	Corresponding Author's Name Wang, S.
5. Manuscript Title Graphical Depiction of Longitudinal St	udy Designs in Healthcare I	Databases
6. Manuscript Identifying Number (if you k M18-3079	now it)	
Section 2. The Work Under C	onsideration for Public	ation
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Do you have any patents, whether plan	nned, pending or issued, br	oadly relevant to the work? ☐ Yes ✓ No

Goettsch 2



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Royalties: Funds are coming in to you or your institution due to your patent

1

administrative support, etc.



Section 1. Identifying Inforn	nation	
Given Name (First Name) Jeremy	2. Surname (Last Name) Rassen	3. Date 22-January-2019
4. Are you the corresponding author?	☐ Yes 🗸 No	Corresponding Author's Name Shirley Wang
5. Manuscript Title Graphical Depiction of Longitudinal Stu	udy Designs in Healthcare	Databases
6. Manuscript Identifying Number (if you k	now it)	_
Section 2. The Work Under C		
The Work Under C	onsideration for Public	cation
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Section 3. Relevant financial	activities outside the	submitted work.
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Name of Entity	Grant? Personal No	n-Financial Other? Comments
Aetion		Dr. Rassen is an employee of and has an ownership stake in Aetion, Inc., a technology company that provides analytic software to the healthcare industry.
Coation 4		
Section 4. Intellectual Prope	rty Patents & Copyri	ghts
Do you have any patents, whether plan	ned, pending or issued, br	roadly relevant to the work? Yes V No

Rassen 2



Section 5. Polationships not sovered above
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Dal Pan 1



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1. Given Name (First Name) Gerald	2. Surname (Last Name) Dal Pan	3. Date 23-January-2019
4. Are you the corresponding author?	Yes 🗸 No	Corresponding Author's Name Shirley Wang, PhD
5. Manuscript Title Graphical Depiction of Longitudinal St	udy Designs in Healthcare	Databases
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Intellectual Prope	rty Patents & Copyric	ints ———
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Dal Pan 2



Section 5. Bolotic	
Relation 3.	onships not covered above
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Royalties: Funds are coming in to you or your institution due to your patent

Rothman 1



Section 1. Identifying Inform	nation					
Given Name (First Name) Kenneth	2. Surname (Last Name) Rothman	3. Date 23-January-2019				
4. Are you the corresponding author?	☐ Yes ✓ No	Corresponding Author's Name				
5. Manuscript Title Graphical Depiction of Longitudinal Stu	udy Designs in Healthcare I	Databases				
6. Manuscript Identifying Number (if you ki M18-3079	now it)	_				
Section 2. The Work Under C	Section 2. The Work Under Consideration for Publication					
	g but not limited to grants, da	a third party (government, commercial, private foundation, etc.) for ta monitoring board, study design, manuscript preparation,				
Section 3. Relevant financial	activities outside the s	ubmitted work.				
of compensation) with entities as descr	ribed in the instructions. Us port relationships that wer	ether you have financial relationships (regardless of amount e one line for each entity; add as many lines as you need by e present during the 36 months prior to publication .				
Section 4. Intellectual Prope	rty Patents & Copyrig	ihts				
Do you have any patents, whether plan	nned, pending or issued, br	oadly relevant to the work?				

Rothman 2



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):
✓ No other relationships/conditions/circumstances that present a potential conflict of interest
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Section 6. Disclosure Statement
Disclosure Statement
Based on the above disclosures, this form will automatically generate a disclosure statement, which will appear in the box below.
Dr. Rothman has nothing to disclose.

Evaluation and Feedback

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Rothman 3



Instructions

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Royalties: Funds are coming in to you or your institution due to your patent

Brown 1



Section 1.	Identifying Inform	nation		
Given Name (First Name) Jeffrey		2. Surname (Last Name) Brown		3. Date 24-January-2019
4. Are you the corresponding author?		Yes ✓ No	Corresponding Author's Name Wang	
5. Manuscript Title Graphical Depiction of Longitudinal Study Designs in Healthcare D		Databases		
6. Manuscript Ider	ntifying Number (if you kr	now it)		
Section 2.	The Work Under Co	onsideration for Publi	cation	
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 Yes				
Section 3.				
Section 3.	Relevant financial	activities outside the	submitted work.	
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Are there any rele	evant conflicts of intere	est?		
	l			
Section 4.	Intellectual Proper	ty Patents & Copyri	ghts	
Do you have any patents, whether planned, pending or issued, broadly relevant to the work? Yes Vo				

Brown 2



Section 5. Relationships not sovered above				
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):				
✓ No other relationships/conditions/circumstances that present a potential conflict of interest				
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Section 6. Disclosure Statement				
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Wang` 1



Section 1. Identifying Inform	ation				
1. Given Name (First Name) Shirley	2. Surname (Last Name) Wang`		3. Date 24-January-2018		
4. Are you the corresponding author?	✓ Yes No				
5. Manuscript Title Graphical Depiction of Longitudinal Study Designs in Healthcare Databases					
6. Manuscript Identifying Number (if you kn M18-3079	6. Manuscript Identifying Number (if you know it) M18-3079				
Section 2. The Work Under Co	onsideration for Public	ation			
Did you or your institution at any time recei any aspect of the submitted work (including statistical analysis, etc.)? Are there any relevant conflicts of intere	but not limited to grants, dat				
Section 3. Relevant financial	activities outside the s	ubmitted work.			
Place a check in the appropriate boxes i of compensation) with entities as descri clicking the "Add +" box. You should rep Are there any relevant conflicts of intere If yes, please fill out the appropriate info	n the table to indicate whe bed in the instructions. Use port relationships that were st?	ther you have financial re e one line for each entity;	add as many lines as you need by		
Name of Entity	Grant? Personal Non	-Financial Other? Co	pmments		
Boehringer Ingelheim	V		elated work		
Novartis	✓	unre	elated work		
L&1		unre	elated work		
Section 4. Intellectual Proper					
Intellectual Proper	ty Patents & Copyrig	hts			
Do you have any patents, whether plant	ned, pending or issued, bro	padly relevant to the worl	k? ☐ Yes 🗸 No		

Wang` 2



Section 5. Polationships not severed above
Relationships not covered above
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Dr. Wang` reports grants from Boehringer Ingelheim, Novartis, and J & J to Brigham and Women's Hospital outside the submitted work.

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Wang`



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Royalties: Funds are coming in to you or your institution due to your patent

Happe 1



Section 1.	Identifying Inform	nation		
1. Given Name (First Name) Laura		2. Surname (Last Name) Happe	3. Date 01-February-2019	
4. Are you the corresponding author?		Yes ✓ No	Corresponding Author's Name Shirley Wang	
5. Manuscript Title Graphic depiction of longitudinal study designs in healthcare datal		<i>r</i> designs in healthcare dat	abases	
6. Manuscript Ider	ntifying Number (if you kr	now it)		
			-	
Section 2.	The Work Under C	onsideration for Public	cation	
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 You				
Section 3.	Relevant financial	activities outside the s	submitted work.	
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Section 4.	Intellectual Prope	rty Patents & Copyric	ghts	
Do you have any patents, whether planned, pending or issued, broadly relevant to the work? Yes Vo				

Happe 2



Section 5.				
	Relationships not covered above			
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Section 6.				
Section 6.	Disclosure Statement			
Based on the abo below.	ove disclosures, this form will automatically generate a disclosure statement, which will appear in the box			
Dr. Happe has n	othing to disclose.			

Evaluation and Feedback

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Happe 3



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Murk 1



Section 1. Identifying Inform	ation		
identifying inform	ation		
1. Given Name (First Name) William	2. Surname (Last Name) Murk		3. Date 23-January-2019
4. Are you the corresponding author?	you the corresponding author? Yes No Corresponding Author's Name Shirley V Wang		r's Name
5. Manuscript Title Graphical Depiction of Longitudinal Study Designs in Healthcare Databases			
6. Manuscript Identifying Number (if you kn M18-3079	ow it)		
		_	
Section 2. The Work Under Co	onsideration for Public	cation	
Did you or your institution at any time receing any aspect of the submitted work (including statistical analysis, etc.)? Are there any relevant conflicts of intere	but not limited to grants, da		
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Name of Entity	Grant? Personal Fees? S	n-Financial other?	Comments
Aetion, Inc.			Dr. Murk is an employee of and holds stock options in Aetion, Inc.
Section 4. Intellectual Proper	ty Patents & Copyri	ghts	
Do you have any patents, whether plann	ned, pending or issued, bi	oadly relevant to the v	work? Yes V

Murk 2



Section 5. Polationships not sovered above
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Murk 3