

Instructions

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1. Identifying information.

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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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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



Continue d			
Section 1. Identifying Infor	mation		
1. Given Name (First Name) Vineet	2. Surname (Last Nam Chopra	e)	3. Date 06-February-2019
4. Are you the corresponding author?	Yes 🖌 No	Corresponding Author Erik Dubberke	's Name
5. Manuscript Title QUANTITATIVE RESULTS OF A NATION	IAL INTERVENTION TO P	REVENT CLOSTRIDIOIDES [DIFFICILE INFECTION
6. Manuscript Identifying Number (if you M18-3545	know it)		
Section 2. The Work Under	Consideration for Pu	blication	
any aspect of the submitted work (includir statistical analysis, etc.)?	ng but not limited to grant	s, data monitoring board, stud	nt, commercial, private foundation, etc.) for dy design, manuscript preparation,
Are there any relevant conflicts of inte			
If yes, please fill out the appropriate in Excess rows can be removed by pressi		have more than one entity	y press the "ADD" button to add a row.
Name of Institution/Company	Grant? Personal Fees?	Non-Financial Support? Other?	Comments
Centers for Disease Prevention and Control contract with Health Research and Education Trust (HRET), which subcontracted with University of Michigan to support UM faculty staff effort for this contract			DC Contract 200-2015-88275 to IRET, subcontract to UM

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Are there any relevant conflicts of interest?

Yes 🖌 No

Intellectual Property -- Patents & Copyrights

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

Section 4.



Section 5. Relationships not covered above

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Dr. Chopra has nothing to disclose.

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Section 1.	Identifying Inform	nation	
1. Given Name (Fi Sanjay	rst Name)	2. Surname (Last Name) Saint	3. Date 02-May-2019
4. Are you the cor	responding author?	Yes 🖌 No Correspondir	ng Author's Name
5. Manuscript Title Quantitative Res		vention to Prevent Clostridioides difficile	Infection
6. Manuscript Ider m18-3545	ntifying Number (if you k	now 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.)?

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

Section 3. Relevant financial activities outside the submitted work.

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No

Are there any relevant conflicts of interest? \checkmark Yes

If yes, please fill out the appropriate information below.

Name of Entity	Grant?	Personal Fees ?	Non-Financial Support?	Other?	Comments	
Doximity		✓			I am on a medical advisory board of Doximity, a new social networking site for physicians. Honorarium for being a member of the medical advisory board.	
Jvion		\checkmark			I am on the scientific advisory board of Jvion, a healthcare technology company.	



Name of Entity	Grant?	Personal Fees ?	Non-Financial Support?	Other?	Comments	
Centers for Disease Prevention and Control contract with Health Research and Educational Trust (HRET), which subcontracted with University of Michigan to support UM faculty/ staff effort for this contract					CDC Contract 200-2015-88275 to HRET, subCon to UM	

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. Saint reports personal fees from Doximity, personal fees from Jvion, other from Centers for Disease Prevention and Control contract with Health Research and Educational Trust (HRET), which subcontracted with University of Michigan to support UM faculty/staff effort for this contract, outside the submitted work; .



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Section 1.							
Identifyi	ng Information						
1. Given Name (First Name) Karen	2. Surname Jones	e (Last Name)			3. Date 26-February	-2019	
4. Are you the corresponding a	uthor? Yes	✓ No	Correspond Dr. Erik Du	ding Author' Jbberke	's Name		
5. Manuscript Title Quantitative Results of a Nat	ional Intervention to Pr	event Clostric	dioides Diffic	ile Infectio	n		
6. Manuscript Identifying Numb	oer (if you know it)						
Section 2. The Work	Under Consideratio	on for Dubli	cation				
				(
Did you or your institution at an any aspect of the submitted wor statistical analysis, etc.)?							c.) for
Are there any relevant conflic	cts of interest? 🖌 Ye	es No					
If yes, please fill out the appre Excess rows can be removed			ve more than	n one entity	/ press the "ADD"	button to add a	row.
Name of Institution/Compa		Personal Nor	n-Financial Support?	Other?	Comments		
Centers for Disease Prevention and contract with Health Research and Trust subcontract; CDC Contract 200-2015-88275							
Section 3. Relevant	financial activities c	outside the s	submitted	work.			
Place a check in the appropri of compensation) with entitie clicking the "Add +" box. You Are there any relevant conflic	es as described in the ir I should report relation	nstructions. Us ships that wer	se one line fo	or each enti	ity; add as many li	ines as you need	d by

Section 4. Intellectual Property -- Patents & Copyrights

Do you have any patents, whether planned, pending or issued, broadly relevant to the work? Yes V No



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Section 1.	Identifying Inform	nation	
1. Given Name (Fi Jeffrey	rst Name)	2. Surname (Last Name Rohde) 3. Date 08-March-2019
4. Are you the cor	responding author?	Yes 🖌 No	Corresponding Author's Name Erik Dubberke
5. Manuscript Title A NOVEL, STEPP		VENTING CLOSTRIDIOID	ES DIFFICILE INFECTION: A NARRATIVE REVIEW
6. Manuscript Ider M18-3444	ntifying Number (if you kr	now it)	
	L		
Section 2.	The Work Under C	onsideration for Pub	lication
Did you or your ins	stitution at any time rece	ive payment or services fro	om 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	Non-Financial Support <mark>?</mark>	Other?	Comments	
Centers for Disease Prevention and Control contract with Health Research and Educational Trust (HRET), which subcontracted with the Society of Hospital Medicine and the University of Michigan				\checkmark	CDC Contract 200-2015-88275 to HRET	
Society of Hospital Medicine		\checkmark			Consultant fees (<\$10,000)	

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🖌 No

Are there any relevant conflicts of interest? Yes

Rohde



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. Rohde reports other from Centers for Disease Prevention and Control contract with Health Research and Educational Trust (HRET), which subcontracted with the Society of Hospital Medicine and the University of Michigan, personal fees from Society of Hospital Medicine, during the conduct of the study; .

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Section 1. Identifying Information	ation						
1. Given Name (First Name) Andrew	2. Surname (Last Nar Rolle	ne)	3. Date 27-March-2019				
4. Are you the corresponding author?	Yes 🖌 No	Correspond	ling Autho	or's Name			
5. Manuscript Title QUALITATIVE ASSESSMENT OF A STATE PARTNER FACILITATED HEALTH CARE-ASSOCIATED INFECTION PREVENTION NATIONAL COLLABORATIVE							
6. Manuscript Identifying Number (if you kno	ow it)						
Section 2. The Work Under Co	onsideration for P	ublication					
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If yes, please fill out the appropriate info Excess rows can be removed by pressing		u have more than	one enti	ty press the "ADD" button to add a rov	ι.		
Name of Institution/Company	Grant? Personal Fees?	Non-Financial Support?	Other?	Comments			
Centers for Disease Prevention and Control				CDC Contract 200-2015-88275 to HRET			

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

Section 4. Intellectual Property -- Patents & Copyrights Do you have any patents, whether planned, pending or issued, broadly relevant to the work? Yes Yes Image: Section 4.



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Mr. Rolle reports other from Centers for Disease Prevention and Control, during the conduct of the study; .

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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.

5. 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



Section 1. Identifying Inform	nation	
1. Given Name (First Name) Ashley	2. Surname (Last Name) Snyder	3. Date 06-February-2018
4. Are you the corresponding author?		nding Author's Name Dubberke
5. Manuscript Title QUANTITATIVE RESULTS OF A NATION	AL INTERVENTION TO PREVENT CLOST	RIDIOIDES DIFFICILE INFECTION
6. Manuscript Identifying Number (if you k	now it)	
Section 2. The Work Under C	onsideration for Publication	
The work onder C		
		y (government, commercial, private foundation, etc.) for ng board, study design, manuscript preparation,
Are there any relevant conflicts of inter	est? 🗌 Yes 🖌 No	
Section 3. Relevant financial	activities outside the submittee	l work.

Section 4. Intellectual Property -- Patents & Copyrights

Do you have any patents, whether planned, pending or issued, broadly relevant to the work? [Yes	\checkmark	No	
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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

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. Snyder has nothing to disclose.

Evaluation and Feedback



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.

1. 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.

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Section 1.	Identifying Inform	nation	
1. Given Name (Fi Erik	rst Name)	2. Surname (Last Name) Dubberke	3. Date 08-February-2019
4. Are you the cor	responding author?	✓ Yes No	
5. Manuscript Title QUANTITATIVE F		AL INTERVENTION TO PREVENT CLOSTRIDIOIDES	DIFFICILE INFECTION
6. Manuscript Ider	ntifying Number (if you k	now it)	
Section 2.	The Work Under C	onsideration for Publication	
	•	eive payment or services from a third party (governmer g but not limited to grants, data monitoring board, stu	•

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 [?]	Non-Financial Support <mark>?</mark>	Other?	Comments	
Centers for Disease Prevention and Control contract with Health Research and Educational Trust (HRET), which subcontracted with University of Michigan to support UM faculty/ staff effort for this contract					CDC Contract 200-2015-88275 to HRET, subcontract to UM	

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? Yes No

If yes, please fill out the appropriate information below.

Name of Entity	Grant?	Personal Fees	Non-Financial Support?	Other?	Comments	
Pfizer	\checkmark					



Name of Entity	Grant?	Personal Fees ?	Non-Financial Support?	Other?	Comments	
Pfizer		\checkmark				
Merck	\checkmark					
Merck		\checkmark				
Valneva		\checkmark				
Rebiotix	\checkmark					
Rebiotix		\checkmark				
Achaogen		\checkmark				
Biofire		\checkmark				
Abbott		\checkmark				
Synthetic Biologics		\checkmark				

Section 4.

Intellectual Property -- Patents & Copyrights

Do you have any patents, whether planned, pending of issued, broadly relevant to the work?	broadly relevant to the work? Yes	o you have any patents, whether planned, pending or issued, broad
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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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Dr. Dubberke reports grants from Centers for Disease Control and Prevention, during the conduct of the study; grants from Pfizer, personal fees from Pfizer, grants from Merck, personal fees from Merck, personal fees from Valneva, grants from Rebiotix, personal fees from Rebiotix, personal fees from Achaogen, personal fees from Biofire, personal fees from Abbott, personal fees from Synthetic Biologics, outside the submitted work; .

Evaluation and Feedback