

#### **Instructions**

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Robinson 1



Section 1.	Identifying Inform	nation				
1. Given Name (Fi Karen	rst Name)	2. Surname (Last Name Robinson	·)	3. Date 05-August	-2019	
4. Are you the cor	responding author?	☐ Yes ✓ No	Correspond	Corresponding Author's Name		
5. Manuscript Title Antipsychotics for Treating Delirium in Hospitalized Adults: A Systematic Review						
6. Manuscript Ider M19-1860	ntifying Number (if you kr	now it)				
Section 2.	w	onsideration for Pul				
any aspect of the s statistical analysis, Are there any rel If yes, please fill o	ubmitted work (including etc.)? evant conflicts of intere	g but not limited to grants est?  Yes  No ormation below. If you	, data monitoring	government, commercial, pri board, study design, manusc one entity press the "ADD	ript preparation,	
Name of Institut			Non-Financial	Other? Comments		
AHRQ				✓ contract, EPC		
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Section 3.	Relevant financial	activities outside th	e submitted v	work.		
of compensation clicking the "Add Are there any rel	n) with entities as descri I +" box. You should rep evant conflicts of intere	ibed in the instructions port relationships that v est? Yes 🗸 No	. Use one line fo were <b>present du</b> o	ve financial relationships (i r each entity; add as many uring the 36 months prio	lines as you need by	
Section 4.	Intellectual Proper	rty Patents & Copy	vrights			
Do you have any	patents, whether plan	ned, pending or issued	, broadly relevar	nt to the work? Yes	✓ No	

Robinson 2



Section 5.	
Section 5.	Relationships not covered above
	elationships or activities that readers could perceive to have influenced, or that give the appearance of ncing, what you wrote in the submitted work?
Yes, the follow	wing relationships/conditions/circumstances are present (explain below):
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Dr. Robinson rep	orts other from AHRQ, during the conduct of the study; .

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Oh 1



Section 1. Identifying	Information	
1. Given Name (First Name) Esther	2. Surname (Last Name) Oh	3. Date 05-August-2019
4. Are you the corresponding auth	or? Yes 🗸 No	Corresponding Author's Name  Dale Neeham
5. Manuscript Title Antipsychotics for Treating Deli	rium in Hospitalized Adults: A Syst	tematic Review
6. Manuscript Identifying Number M19-1860	(if you know it)	
Section 2. The Work U	nder Consideration for Public	cation
	ncluding 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 fin	ancial activities outside the s	submitted work.
of compensation) with entities a	as described in the instructions. Us would 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 re present during the 36 months prior to publication.
Section 4. Intellectual	Property Patents & Copyric	ghts
Do you have any patents, wheth	ner planned, pending or issued, br	oadly relevant to the work? Yes V No

Oh 2



Section 5.	
Section 5.	Relationships not covered above
	relationships or activities that readers could perceive to have influenced, or that give the appearance of encing, what you wrote in the submitted work?
Yes, the follo	wing relationships/conditions/circumstances are present (explain below):
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Section 6.	Disclosure Statement
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Neufeld 1



Section 1. Identifying Informa	ation			
1. Given Name (First Name) Karin	2. Surname (Last Name) Neufeld		3. Date 05-August-2019	
4. Are you the corresponding author?	Yes ✓ No	Corresponding Author's Name  Dale Needham		
5. Manuscript Title "Antipsychotics for Treating Delirium in I	Hospitalized Adults: A Sy	rstematic Review"		
6. Manuscript Identifying Number (if you known M19-1860,	ow it)	_		
Section 2				
Section 2. The Work Under Co	nsideration for Publi	cation		
Did you or your institution <b>at any time</b> received any aspect of the submitted work (including statistical analysis, etc.)?  Are there any relevant conflicts of interest	but not limited to grants, d			
If yes, please fill out the appropriate infor Excess rows can be removed by pressing	rmation below. If you ha	ve more than one ent	ity press the "ADD" button to add a row.	
Name of Institution/Company	Grant	n-Financial Other	Comments	
AHRQ			Contract to complete the work	
Continu 2				
Section 3. Relevant financial a	activities outside the	submitted work.		
Place a check in the appropriate boxes in of compensation) with entities as describ clicking the "Add +" box. You should rep Are there any relevant conflicts of interes If yes, please fill out the appropriate infor	oed in the instructions. U ort relationships that we st?	se one line for each e	ntity; add as many lines as you need by	
Name of Entity	Grant	n-Financial Other?	Comments	
Merck			1 day consultation to Merck regarding potential orexin agent uses.	
Hitachi	✓		Study of Near Infrared Spectroscopy in delirium.	

Neufeld 2



Section 4. Intellectual Property Patents & Copyrights
Do you have any patents, whether planned, pending or issued, broadly relevant to the work? Yes Vo
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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Dr. Neufeld reports other from AHRQ, during the conduct of the study; personal fees from Merck, grants from Hitachi , outside the submitted work; .

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Needham 1



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4. Are you the cor	responding author?	✓ Yes No			
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any aspect of the s statistical analysis, Are there any rela If yes, please fill o	ubmitted work (including etc.)? evant conflicts of intere	but not limited to grant est?  Yes  Normation below. If you	s, data monitoring	g board, study o	commercial, private foundation, etc.) for design, manuscript preparation, press the "ADD" button to add a row.
Name of Institut	ion/Company	Grant? Personal Fees?	Non-Financial Support?	Other? Co	omments
AHRQ				<b>√</b> con	ntract for this work
Continue 2	l				
Section 3.	Relevant financial	activities outside tl	ne submitted	work.	
of compensation clicking the "Add Are there any rel	) with entities as descri	bed in the instructions  oort relationships that	s. Use one line fo were <b>present d</b>	or each entity	relationships (regardless of amount r; add as many lines as you need by s months prior to publication.
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Do you have any	patents, whether plan	ned, pending or issued	d, broadly releva	ant to the wor	rk? Yes 🗸 No

Needham 2



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Nikooie 1



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1. Given Name (Fi Roozbeh	rst Name)	2. Surname (Last Name) Nikooie	)	3. Date 05-August-2	2019	
4. Are you the corresponding author?		☐ Yes ✓ No	-	Corresponding Author's Name  Dale M. Needham		
5. Manuscript Title Antipsychotics fo		Hospitalized Adults: A S	ystematic Review	1		
6. Manuscript Ider M19-1860	ntifying Number (if you kr	now it)				
Section 2.	The Work Under Co	onsideration for Pub	olication			
any aspect of the s statistical analysis, Are there any rel If yes, please fill o	ubmitted work (including etc.)? evant conflicts of intere	g but not limited to grants, est? Yes No ormation below. If you h	data monitoring bo	overnment, commercial, priva oard, study design, manuscri ne entity press the "ADD"	ipt preparation,	
Name of Institut	ion/Company	Grant? Personal Fees?	Ion-Financial O	ther? Comments		
AHRQ				✓ AHRQ contract		
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Do you have any	patents, whether plan	ned, pending or issued,	broadly relevant	to the work? Yes	✓ No	

Nikooie 2



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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.

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

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**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

Zhang 1



Section 1.	Identifying Inform	nation			
1. Given Name (Fi Allen	rst Name)	2. Surname (Last Name) Zhang		3. Date 07-August-2019	
4. Are you the corresponding author?		☐ Yes ✓ No	Corresponding Author's Name		
5. Manuscript Title Antipsychotics fo		Hospitalized Adults: A Sy	stematic Review		
6. Manuscript Idei M19-1860	ntifying Number (if you kr	now it)			
Section 2					
Section 2.	The Work Under Co	onsideration for Publ	ication		
any aspect of the s statistical analysis, Are there any rel If yes, please fill o	ubmitted work (including etc.)? evant conflicts of intere	g but not limited to grants, onest?  Yes No ormation below. If you have	data monitoring board	mment, commercial, private foundation, etc.) for , study design, manuscript preparation, ntity press the "ADD" button to add a row.	
Name of Institut	ion/Company	Grant	on-Financial Othe	r? Comments	
Agency for Healthcar	e Research and Quality		<b>□</b>	contract	
	l				
Section 3.	Relevant financial	activities outside the	submitted work.		
of compensation clicking the "Adc Are there any rel	ı) with entities as descri	ibed in the instructions. Uport relations were that we	Jse one line for each	ancial relationships (regardless of amount entity; add as many lines as you need by the 36 months prior to publication.	
Section 4.	Intellectual Proper	rty Patents & Copyr	ights		
Do you have any	patents, whether plan	ned, pending or issued, k	proadly relevant to t	he work? Yes 🗸 No	

Zhang 2



Section 5.	
Deculon 5.	Relationships not covered above
	relationships or activities that readers could perceive to have influenced, or that give the appearance of encing, what you wrote in the submitted work?
Yes, the follo	wing relationships/conditions/circumstances are present (explain below):
✓ No other rela	tionships/conditions/circumstances that present a potential conflict of interest
	anuscript acceptance, journals will ask authors to confirm and, if necessary, update their disclosure statements rnals may ask authors to disclose further information about reported relationships.
Section 6.	Disclosure Statement
Based on the abo	ove disclosures, this form will automatically generate a disclosure statement, which will appear in the box
Dr. Zhang repor	ts other from Agency for Healthcare Research and Quality, during the conduct of the study; .

### **Evaluation and Feedback**

Please visit <a href="http://www.icmje.org/cgi-bin/feedback">http://www.icmje.org/cgi-bin/feedback</a> to provide feedback on your experience with completing this form.

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#### **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.

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.

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Wilson 1



Section 1. Identifying Inform	nation		
1. Given Name (First Name) Lisa	2. Surname (Last Name) Wilson	3. Date 05-August-2019	
4. Are you the corresponding author?	Yes ✓ No	Corresponding Author's Name	
5. Manuscript Title Antipsychotics for Treating Delirium in	Hospitalized Adults: A Sys	tematic Review	
6. Manuscript Identifying Number (if you kr M19-1860	now it)		
Section 2. The Work Under Co	onsideration for Publi	cation	
any aspect of the submitted work (including statistical analysis, etc.)? Are there any relevant conflicts of intere	g but not limited to grants, dates:  Pest? Yes No  Dormation below. If you have	ata monitoring board,	ment, commercial, private foundation, etc.) for study design, manuscript preparation, atity press the "ADD" button to add a row.
Name of Institution/Company	Grant	n-Financial upport?	? Comments
Agency for Healthcare Research and Quality			Contract No. HHSA290201500006l / HHSA29032008T
Section 3. Relevant financial	activities outside the s	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 <b>present during the 36 months prior to publication</b> .  Are there any relevant conflicts of interest? Yes Vo			
Section 4. Intellectual Proper	rty Patents & Copyri	ghts	
Do you have any patents, whether plan	ned, pending or issued, br	oadly relevant to th	e work? Yes V No

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Section 5. Polationships not severed 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
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
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Ms. Wilson reports other from Agency for Healthcare Research and Quality, during the conduct of the study; .

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