

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) Andrew	2. Surname (Last Name) Dick	3. Date 23-October-2019
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name
5. Manuscript Title		
6. Manuscript Identifying Number (if you 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.)?

Are there any relevant conflicts of interest? Yes No

Section 3. Relevant financial activities outside the submitted work.

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Are there any relevant conflicts of interest? Yes No

Section 4. Intellectual Property -- Patents & Copyrights

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Section 6. Disclosure Statement

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None

Evaluation and Feedback

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Section 1. Identifying Information

1. Given Name (First Name) Bradley 2. Surname (Last Name) Stein 3. Date 23-October-2019

4. Are you the corresponding author? Yes No Corresponding Author's Name
Ryan McBain

5. Manuscript Title
Growth and Distribution of Buprenorphine Waivered Providers in the U.S., 2007-2017

6. Manuscript Identifying Number (if you 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.)?

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?	Other?	Comments
NIDA of the NIH	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	R01DA045800-02
NIDA of the NIH	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	5P50DA046351-02

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Are there any relevant conflicts of interest? Yes No

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. Stein reports grants from NIDA of the NIH, grants from NIDA of the NIH, during the conduct of the study; .

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Section 1. Identifying Information

1. Given Name (First Name) Mark	2. Surname (Last Name) Sorbero	3. Date 11-November-2019
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Ryan McBain
5. Manuscript Title Growth and Distribution of Buprenorphine Waivered Providers in the U.S., 2007-2017		
6. Manuscript Identifying Number (if you know it) 		

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Mr. Sorbero has nothing to disclose.

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Section 1. Identifying Information

1. Given Name (First Name)
Ryan

2. Surname (Last Name)
McBain

3. Date
21-November-2019

4. Are you the corresponding author? Yes No

5. Manuscript Title
Growth and Distribution of Buprenorphine Waivered Providers in the U.S., 2007-2017

6. Manuscript Identifying Number (if you know it)
M19-2403

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Dr. McBain has nothing to disclose.

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