

ICMJE Form for Disclosure of Potential Conflicts of Interest

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.

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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".

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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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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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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) Jeffrey 2. Surname (Last Name) Oristaglio 3. Date 27-August-2019

4. Are you the corresponding author? Yes No Corresponding Author's Name
Kris D'Anci

5. Manuscript Title
Treatments for Stroke Rehabilitation: A Systematic Review in Support of the U.S. Department of Veterans Affairs and U. S. Department of Defense Clinical Practice Guideline on the Management of Stroke Rehabilitation

6. Manuscript Identifying Number (if you know it)
M19-2414

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

Name of Institution/Company	Grant?	Personal Fees?	Non-Financial Support?	Other?	Comments
Veterans Administration/Department of Defense	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	VA/DoD supported evidence review underlying the publication. No additional funds were provided for preparation of the manuscript.

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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. Oristaglio has nothing to disclose.

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name) Nancy	2. Surname (Last Name) Sullivan	3. Date 19-August-2019
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name D'anci
5. Manuscript Title Treatments for Stroke Rehabilitation: A Systematic Review in Support of the U.S. Department of Veterans Affairs and U. S. Department of Defense Clinical Practice Guideline on the Management of Stroke Rehabilitation		
6. Manuscript Identifying Number (if you know it) M19-2414		

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Are there any relevant conflicts of interest? Yes No

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name) _____
Amy

2. Surname (Last Name) _____
Tsou

3. Date _____
19-August-2019

4. Are you the corresponding author? Yes No
Corresponding Author's Name _____
Kristin D'Anci

5. Manuscript Title
"Treatments for Stroke Rehabilitation: A Systematic Review in Support of the U.S. Department of Veterans Affairs and U. S. Department of Defense Clinical Practice Guideline on the Management of Stroke Rehabilitation"

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Are there any relevant conflicts of interest? Yes No

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Name of Institution/Company	Grant?	Personal Fees?	Non-Financial Support?	Other?	Comments
Va/DOD	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Funded work presented in the manuscript.

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Dr. Tsou reports that ECRI Institute received funding from the Va/DOD which supported the work presented in the manuscript.

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Section 1. Identifying Information

1. Given Name (First Name) Kristen

2. Surname (Last Name) D'Anci

3. Date 19-August-2019

4. Are you the corresponding author? Yes No

5. Manuscript Title
Treatments for Post-stroke Motor Deficits and Mood Disorders: A Systematic Review for the 2019 U.S. Department of Veterans Affairs and U.S. Department of Defense Guidelines for Stroke Rehabilitation

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Name of Institution/Company	Grant?	Personal Fees?	Non-Financial Support?	Other?	Comments
US Dept of Veteran's Affairs	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The Department of Veterans Affairs is the funding agency for the clinical practice guideline and this systematic review to support the guideline

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Dr. D'Anci reports grants from US Dept of Veteran's Affairs, during the conduct of the study; .

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Section 1. Identifying Information

1. Given Name (First Name) Stacey	2. Surname (Last Name) Uhl	3. Date 03-September-2019
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Kristin D'Anci
5. Manuscript Title "Treatments for Post-stroke Motor Deficits and Mood Disorders: A Systematic Review for the 2019 U.S. Department of Veterans Affairs and Department of Defense Guidelines for Stroke Rehabilitation"		
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