

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.

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

Cullen 1



Section 1.	Identifying Inform	ation		
1. Given Name (Fii John	rst Name)	2. Surname (Last Name) Cullen		3. Date 05-August-2019
4. Are you the cor	responding author?	Yes ✓ No	Corresponding Author's Nar Renee Butkuss	me
5. Manuscript Title "Firearm-Related Organizations"		e United States: A Call to A	Action from the Nation?s Le	ading Physician Professional
6. Manuscript Ider M19-2441,	ntifying Number (if you kr	now it)	_	
Section 2.				
Section 2.	The Work Under Co	onsideration for Public	cation	
any aspect of the s statistical analysis,	ubmitted work (including	but not limited to grants, da	a third party (government, cor ta monitoring board, study des	mmercial, private foundation, etc.) for sign, manuscript preparation,
Section 3.	Relevant financial	activities outside the s	submitted work.	
of compensation clicking the "Add	the appropriate boxes i) with entities as descri	n the table to indicate who bed in the instructions. Us port relationships that wer	ether you have financial rela se one line for each entity; a	ationships (regardless of amount dd as many lines as you need by onths prior to publication.
Section 4.				
Section 4.	Intellectual Proper	ty Patents & Copyrig	ghts	
Do you have any	patents, whether plan	ned, pending or issued, br	oadly relevant to the work?	Yes No

Cullen 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
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. Cullen has nothing to disclose.

Evaluation and Feedback

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Cullen 3



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earning royalties or not **Royalties:** Funds are coming in to you or your institution due to your

patent

Benjamin 1



Section 1. Identifying Info	ormation	
identifying fill	omation	
1. Given Name (First Name) Georges	2. Surname (Last Name) Benjamin	3. Date 05-August-2019
4. Are you the corresponding author?	✓ Yes No	
Organizations		m the Nation?s Leading Physician Professional
6. Manuscript Identifying Number (if yo M19-2441	ou know it)	
Section 2. The Work Under	r Consideration for Publication	
any aspect of the submitted work (inclustratistical analysis, etc.)? Are there any relevant conflicts of ir	ding but not limited to grants, data monitori	ty (government, commercial, private foundation, etc.) for ing board, study design, manuscript preparation,
Section 3. Relevant finance	ial activities outside the submitte	d work.
of compensation) with entities as de	escribed in the instructions. Use one line dreport relationships that were present nterest? Yes No information below.	have financial relationships (regardless of amount for each entity; add as many lines as you need by a during the 36 months prior to publication.
Name of Entity	Grant? Personal Non-Financia Fees? Support?	Other? Comments
JS Centers for Disease Control & Prevention		APHA, the organization which I lead, has grants for violence prevention
Section 4. Intellectual Pro	perty Patents & Copyrights	
Do you have any patents, whether p	planned, pending or issued, broadly rele	vant to the work? Yes V No

Benjamin 2



Section 5.	
Section 3.	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):
No other rela	tionships/conditions/circumstances that present a potential conflict of interest
•	er of the American Journal of Public Health which publishes research which has included firearms research. I role in the review or selection of articles for publication.
	nuscript acceptance, journals will ask authors to confirm and, if necessary, update their disclosure statements rals may ask authors to disclose further information about reported relationships.
Section 6.	Disclosure Statement
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publisher of the	orts grants from US Centers for Disease Control & Prevention, outside the submitted work; and I am the American Journal of Public Health which publishes research which has included firearms research. I have no he review or selection of articles for publication

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Harris 1



Section 1. Identifying Inform	nation	
1. Given Name (First Name) Patrice	2. Surname (Last Name) Harris	3. Date 05-August-2019
4. Are you the corresponding author?	Yes No	
5. Manuscript Title Firearm Related Injury and Death in the Organizations	e United States: A call to Action f rom the Nation's Lea	ading Physician Professional
6. Manuscript Identifying Number (if you kr M19-2441	now it)	
Section 2. The Work Under C	onsideration for Publication	
	vive payment or services from a third party (government, cog g but not limited to grants, data monitoring board, study do est? Yes V No	
Section 3. Polyvant financial	activities outside the submitted work.	
Place a check in the appropriate boxes of compensation) with entities as descr	in the table to indicate whether you have financial re ibed in the instructions. Use one line for each entity; port relationships that were present during the 36 r	add as many lines as you need by
Section 4. Intellectual Proper	rty Patents & Copyrights	
	ned, pending or issued, broadly relevant to the work	? ☐ Yes ✓ No

Harris 2



Section 5.	
	Relationships not covered above
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Continue	
Section 6.	Disclosure Statement
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Maier 1



Section 1. Identifying Inform	nation	
1. Given Name (First Name) Ronald	2. Surname (Last Name) Maier	3. Date 06-August-2019
4. Are you the corresponding author?	Yes No	
5. Manuscript Title Firearm-Related Injury and Death in the Organizations	e United States: A Call to Action from the Nation's Lea	nding Physician Professional
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	ned, pending or issued, broadly relevant to the work	? ☑ Yes 🗸 No

Maier 2



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Maier 3



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Schwartz 1



Section 1. Identi	fying Information	
Given Name (First Name) Bruce	2. Surname (Last Nan Schwartz	ne) 3. Date 06-August-2019
4. Are you the correspondin	g author? Yes 🗸 No	Corresponding Author's Name Robert M McLean
5. Manuscript Title Firearm-Related Injury an	d Death in the United States	
6. Manuscript Identifying Nu M19-2441	umber (if you know it)	
Section 2. The Wo	ork Under Consideration for P	ublication
	work (including but not limited to gran	from a third party (government, commercial, private foundation, etc.) for its, data monitoring board, study design, manuscript preparation, No
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Section 4. Intelle	ctual Property Patents & Cop	pyrights
Do you have any patents,	whether planned, pending or issue	ed, broadly relevant to the work? Yes V No

Schwartz 2



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

McLean 1



1. Given Name (First Name) Robert McLean 3. Date 05-August-2019 4. Are you the corresponding author? Yes No Corresponding Author's Name renee butkus 5. Manuscript Title Firearms-Related Injury and Death in the United States: A Call to Action from the Nation's Leading Physician Professional Organizations 6. Manuscript Identifying Number (if you know it) M19-2441 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. 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	Section 1.	Identifying Inform	nation	
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Section 5. Polationships 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
At the time of manuscript acceptance, journals will ask authors to confirm and, if necessary, update their disclosure statement 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. McLean has nothing to disclose.

Evaluation and Feedback

Please visit http://www.icmje.org/cgi-bin/feedback 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.

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.

Report all sources of revenue paid (or promised to be paid) directly to you or your institution on your behalf over the 36 months prior to submission of the work. This should include all monies from sources with relevance to the submitted work, not just monies from the entity that sponsored the research. Please note that your interactions with the work's sponsor that are outside the submitted work should also be listed here. If there is any question, it is usually better to disclose a relationship than not to do so.

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.

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

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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

Yasuda 1



Section 1. Identifying Inform	mation	
Given Name (First Name) Kyle	2. Surname (Last Name) Yasuda	3. Date 06-August-2019
4. Are you the corresponding author?	☐ Yes ✓ No	Corresponding Author's Name
 Manuscript Title Firearm-Related Injury and Death in the United States: A Call to Action from the Nation's Leading Physician Professional Organizations Manuscript Identifying Number (if you know it) 		
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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		
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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 statement 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. Yasuda has nothing to disclose.		

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