

Section 1. Identifying Inform	mation	7.40万元	
1. Given Name (First Name) 4. Are you the corresponding author?	2. Surname (Last Name) Yes No	Corresponding Author's Na	3. Effective Date (07-August-2008)
		Virginia Moyer	
5. Manuscript Title Screening for Hypertension in Children	n and Adolescents		
6. Manuscript Identifying 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 for any aspect of the submitted work (including but not limited to grants, data monitoring board, study design, manuscript preparation, statistical analysis, etc...)?

The Work Under Consideration for Publication									
Туре	No	Money Paid to You	Money to Your Institution*	Name of Entity	Comments**				
1. Grant	X					X ADD			
2. Consulting fee or honorarium						X			
Support for travel to meetings for the study or other purposes						×			
Fees for participation in review activities such as data monitoring boards, statistical analysis, end point committees, and the like						X ADD			
5. Payment for writing or reviewing the manuscript	Ø					×			
Provision of writing assistance, medicines, equipment, or administrative support						ADD ×			



The Work Under Consideration for Publication										
Туре	No	Money Paid to You	Money to Your Institution*	Name of Entity	Comments**					
7. Other	Ø					ADD X ADD				

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 submission.

Relevant financial activities outside the submitted work									
Type of Relationship (in alphabetical order)	No	Money Paid to You	Money to Your Institution*	Entity	Comments				
1. Board membership						×			
2. Consultancy	Ø					ADD X			
3. Employment						×			
4. Expert testimony						ADD X ADD			
5. Grants/grants pending	K					×			
Payment for lectures including service on speakers bureaus	Ø					ADD X ADD			
7. Payment for manuscript preparation	K					×			

^{*} This means money that your institution received for your efforts on this study.

^{**} Use this section to provide any needed explanation.



Relevant financial activities outside the submitted work									
Type of Relationship (in alphabetical order)	No	Money Paid to You	Money to Your Institution*	Entity	Comments				
Patents (planned, pending or issued)	A					ADD ×			
9. Royalties	×					ADD X			
10. Payment for development of educational presentations	Ø					ADD X			
11. Stock/stock options	×					ADD X			
12. Travel/accommodations/ meeting expenses unrelated to activities listed**	×					×			
13. Other (err on the side of full disclosure)						ADD X			
* This means money that your institution						ADD			

Section 4. Other relationships 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? No other relationships/conditions/circumstances that present a potential conflict of interest Yes, the following relationships/conditions/circumstances are present (explain below): 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.

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^{**} For example, if you report a consultancy above there is no need to report travel related to that consultancy on this line.



Section 1. Identifying Info	rmation	
1. Given Name (First Name) LUSTEN 4. Are you the corresponding author?	2. Surname (Last Name) BUBLINS DOMINGO Yes No Corresponding Virginia Mo	3. Effective Date (07-August-2008) ng Author's Name yer
5. Manuscript Title Screening for Hypertension in Childre	en and Adolescents	
6. Manuscript Identifying Number (if you	know it)	

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The Work Under Consideration for Publication										
Туре	No	Money Paid to You	Money to Your Institution*	Name of Entity	Comments**					
1. Grant						X ADD				
2. Consulting fee or honorarium	M					X ADD				
Support for travel to meetings for the study or other purposes	Ø					X				
4. Fees for participation in review activities such as data monitoring boards, statistical analysis, end point committees, and the like						X				
5. Payment for writing or reviewing the manuscript						×				
Provision of writing assistance, medicines, equipment, or administrative support	M					ADD ×				

The Work Under Consideration for Publication										
Туре	No	Money Paid to You	Money to Your Institution*	Name of Entity	Comments**					
7 04						ADD				
7. Other						ADD				

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Relevant financial activities outside the submitted work											
Type of Relationship (in alphabetical order)	No	Money Paid to You	Money to Your Institution*	Entity	Comments						
1. Board membership	Ø					×					
2. Consultancy	\boxtimes					ADD X ADD					
3. Employment	10					X					
4. Expert testimony	Ø					×					
5. Grants/grants pending				American Heart Association		X ADD					
Payment for lectures including service on speakers bureaus	Ø			COC		×					
7. Payment for manuscript preparation						ADD ×					

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Type of Relationship (in alphabetical order)	No	Money Paid to You	Money to Your Institution	Entity	Comments				
8. Patents (planned, pending or issued)	ď					ADD ×			
9. Royalties	Ø			,		ADD X			
10. Payment for development of educational presentations				Genentech Ri one-time Ep Course	oche idemiology	ADD X			
11. Stock/stock options	YO			Course	. 01	×			
12. Travel/accommodations/ meeting expenses unrelated to activities listed**						×			
13. Other (err on the side of full disclosure)						ADD ×			
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Other relationships Are there other relationships or activities that readers could perceive to have influenced, or that give the appearance of

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No other relationships/conditions/circumstances that present a potential conflict of interest

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Hide All Table Rows Checked 'No'

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1. Given Name (First Name) Adelila	2. Surname (Last Name)	3. Effective Date (07-August-2008)
4. Are you the corresponding author?	Yes ✓ No	Corresponding Author's Name Virginia Moyer
5. Manuscript Title Screening for Hypertension in Childre	en and Adolescents	
6. Manuscript Identifying Number (if you	know it)	

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The Work Under Consideration for Publication									
Туре	No	Money Paid to You	Money to Your Institution*	Name of Entity	Comments**				
1. Grant	9					X ADD			
2. Consulting fee or honorarium						X ADD			
Support for travel to meetings for the study or other purposes						X			
4. Fees for participation in review activities such as data monitoring boards, statistical analysis, end point committees, and the like	9					×			
5. Payment for writing or reviewing the manuscript						X			
Provision of writing assistance, medicines, equipment, or administrative support						×			

The Work Under Consideration for Publication								
Туре	No	Money Paid to You	Money to Your Institution*	Name of Entity	Comments**			
7. Other	ď					ADD X ADD		

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Type of Relationship (in alphabetical order)	No	Money Paid to You	Money to Your Institution*	Entity	Comments			
1. Board membership	Y					×		
2. Consultancy	9					ADD X		
3. Employment	9					×		
4. Expert testimony						ADD X		
5. Grants/grants pending						X		
Payment for lectures including service on speakers bureaus						×		
7. Payment for manuscript preparation	d					ADD ×		

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Relevant financial activities outside the submitted work								
Type of Relationship (in alphabetical order)	No	Money Paid to You	Money to Your Institution*	Entity	Comments			
8. Patents (planned, pending or issued)	ď					ADD X		
9. Royalties	7					X ADD		
10. Payment for development of educational presentations						×		
11. Stock/stock options						ADD X ADD		
12. Travel/accommodations/ meeting expenses unrelated to activities listed**						×		
13. Other (err on the side of full disclosure)	U					ADD X		

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^{**} For example, if you report a consultancy above there is no need to report travel related to that consultancy on this line.



Section 1. Identifying Infor	mation	
1. Given Name (First Name) SUSAN	2. Surname (Last Name) CURRY	3. Effective Date (07-August-2008)
4. Are you the corresponding author?	☐ Yes ✓ No	Corresponding Author's Name Virginia Moyer
5. Manuscript Title Screening for Hypertension in Childre	n and Adolescents	
6. Manuscript Identifying Number (if you	know it)	

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The Work Under Consideration for Publication								
Туре	No	Money Paid to You	Money to Your Institution*	Name of Entity	Comments**			
1. Grant	À					X ADD		
2. Consulting fee or honorarium	×					×		
Support for travel to meetings for the study or other purposes	X					ADD		
						ADD		
Fees for participation in review activities such as data monitoring boards, statistical analysis, end point committees, and the like	(X)					×		
						ADD		
Payment for writing or reviewing the manuscript	X					×		
Provision of writing assistance, medicines, equipment, or administrative support	凶					ADD		

The Work Under Consideration for Publication								
Type	No	Money Paid to You	Money to Your Institution*	Name of Entity	Comments**			
						ADD		
7. Other	X					×		
					¥	ADD		

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Relevant financial activities outside the submitted work								
Type of Relationship (in alphabetical order)	No	Money Paid to You	Money to Your Institution*	Entity	Comments			
1. Board membership	\boxtimes					×		
2. Consultancy						ADD X ADD		
3. Employment	\square			*		×		
4. Expert testimony	X					ADD X		
5. Grants/grants pending						ADD		
Payment for lectures including service on speakers bureaus	\boxtimes					ADD		
7. Payment for manuscript preparation	凶					ADD X		

^{*} This means money that your institution received for your efforts on this study.

^{**} Use this section to provide any needed explanation.



Relevant financial activities out:	Relevant financial activities outside the submitted work								
Type of Relationship (in alphabetical order)	No	Money Paid to You	Money to Your Institution*	Entity	Comments				
O Detecto (planted and dis-						ADD			
Patents (planned, pending or issued)	X					×			
						ADD			
9. Royalties	X					×			
10 Demont for June 100						ADD			
10. Payment for development of educational presentations	X					×			
						ADD			
11. Stock/stock options	X					×			
12. Travel/accommodations/						ADD			
meeting expenses unrelated to activities listed**	X					×			
activities listed						ADD			
13. Other (err on the side of full disclosure)	区					×			
						ADD			

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^{**} For example, if you report a consultancy above there is no need to report travel related to that consultancy on this line.

Section 1. Identifying Inform	nation	
Given Name (First Name) M Are you the corresponding author?	2. Surname (Last Name) E Se (3. Effective Date (07-August-2008) Corresponding Author's Name Virginia Moyer
Manuscript Title Screening for Hypertension in Children Manuscript Identifying Number (if you keep to be a second or second		

Section 2. The Work Under Consideration for Publication

Did you or your institution at any time receive payment or services from a third party for any aspect of the submitted work (including but not limited to grants, data monitoring board, study design, manuscript preparation, statistical analysis, etc...)?

The Work Under Consideration for Publication								
Туре	No	Money Paid to You	Money to Your Institution*	Name of Entity	Comments**			
1. Grant						X ADD		
2. Consulting fee or honorarium						X		
Support for travel to meetings for the study or other purposes						X		
4. Fees for participation in review activities such as data monitoring boards, statistical analysis, end point committees, and the like						X		
5. Payment for writing or reviewing the manuscript	Ø					×		
Provision of writing assistance, medicines, equipment, or administrative support	d					X		

The Work Under Consideration for Publication								
Туре	No	Money Paid to You	Money to Your Institution*	Name of Entity	Comments**			
7. Other	,					ADD X ADD		

Section 3. Relevant

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Relevant financial activities outside the submitted work								
Type of Relationship (in alphabetical order)	No	Money Paid to You	Money to Your Institution*	Entity	Comments			
1. Board membership						X ADD		
2. Consultancy						×		
3. Employment						ADD X		
4. Expert testimony						×		
5. Grants/grants pending	Z					ADD X		
Payment for lectures including service on speakers bureaus						×		
7. Payment for manuscript preparation	Ø					ADD ×		

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^{**} Use this section to provide any needed explanation.



Relevant financial activities out	side the	e submitt	ted work			THE STATE OF			
Type of Relationship (in alphabetical order)	No	Money Paid to You	Money to Your Institution*	Entity	Comments				
Patents (planned, pending or issued)						ADD			
9. Royalties	Z					ADD ×			
10. Payment for development of educational presentations	\square					ADD ×			
11. Stock/stock options	Ø					ADD X			
12. Travel/accommodations/ meeting expenses unrelated to activities listed**						ADD			
13. Other (err on the side of full disclosure)	Ø					ADD X			
* This means money that your institution received for your efforts. ** For example, if you report a consultancy above there is no need to report travel related to that consultancy on this line.									
Section 4. Other relationsh	nips								
Are there other relationships or activi potentially influencing, what you wro				o have influenced, or the	at give the appearance	of			

At the time of manuscript acceptance, journals will ask authors to confirm and, if necessary, update their disclosure statements.

Hide All Table Rows Checked 'No'

No other relationships/conditions/circumstances that present a potential conflict of interest Yes, the following relationships/conditions/circumstances are present (explain below):

On occasion, journals may ask authors to disclose further information about reported relationships.



Section 1. Identifying Infor	mation							
1. Given Name (First Name) GLENN	2. Surname (Last Name) FLORES	3. Effective Date (07-August-2008)						
4. Are you the corresponding author?	Yes No	Corresponding Author's Name Virginia Moyer						
5. Manuscript Title Screening for Hypertension in Children and Adolescents								
6. Manuscript Identifying Number (if you	know it)							

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The Work Under Consideration for Publication									
Туре	No	Money Paid to You	Money to Your Institution*	Name of Entity	Comments**				
1. Grant	9					×			
2. Consulting fee or honorarium				x		ADD X ADD			
Support for travel to meetings for the study or other purposes	9					×			
4. Fees for participation in review activities such as data monitoring boards, statistical analysis, end point committees, and the like						X ADD			
5. Payment for writing or reviewing the manuscript						×			
Provision of writing assistance, medicines, equipment, or administrative support	9					×			

The Work Under Consideration for Publication									
Туре	No	Money Paid to You	Money to Your Institution*	Name of Entity	Comments**				
		/				ADD			
7. Other	4					×			
						ADD			

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Relevant financial activities outside the submitted work									
Type of Relationship (in alphabetical order)	No	Money Paid to You	Money to Your Institution*	Entity	Comments				
1. Board membership	T					×			
2. Consultancy	4					ADD X			
3. Employment	4					×			
4. Expert testimony						ADD X			
5. Grants/grants pending	9					ADD X			
Payment for lectures including service on speakers bureaus	9					ADD			
7. Payment for manuscript preparation	9					ADD			

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Relevant financial activities outside the submitted work								
Type of Relationship (in alphabetical order)	No	Money Paid to You	Money to Your Institution*	Entity	Comments			
8. Patents (planned, pending or issued)					ADD X			
9. Royalties	4				ADD ×			
10. Payment for development of educational presentations					ADD ×			
11. Stock/stock options	4				ADD ADD			
12. Travel/accommodations/ meeting expenses unrelated to activities listed**	9				×			
13. Other (err on the side of full disclosure)	7				ADD X ADD			

Section 4.	Other relationships
	relationships or activities that readers could perceive to have influenced, or that give the appearance of encing, what you wrote in the submitted work?
No other rel	ationships/conditions/circumstances that present a potential conflict of interest
Yes, the follow	owing relationships/conditions/circumstances are present (explain below):
	nanuscript acceptance, journals will ask authors to confirm and, if necessary, update their disclosure statements. urnals may ask authors to disclose further information about reported relationships.

Hide All Table Rows Checked 'No'

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Section 1. Identifying Infor	mation	
1. Given Name (First Name) 4. Are you the corresponding author?	2. Surname (Last Name) ☐ a ret ☐ Yes ✓ No	3. Effective Date (07-August-2008) Corresponding Author's Name Virginia Moyer
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The Work Under Consideration for Publication									
Туре	No	Money Paid to You	Money to Your Institution*	Name of Entity	Comments**				
1. Grant	7					× ADD			
2. Consulting fee or honorarium	ф					X ADD			
Support for travel to meetings for the study or other purposes	þ					×			
4. Fees for participation in review activities such as data monitoring boards, statistical analysis, end point committees, and the like						ADD X			
5. Payment for writing or reviewing the manuscript						ADD X			
Provision of writing assistance, medicines, equipment, or administrative support	þ					X			

The Work Under Consideration for Publication									
Туре	No	Money Paid to You	Money to Your Institution*	Name of Entity	Comments**				
	1/					ADD			
7. Other	X					×			
	11					ADD			

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1. Board membership	Ф					×			
2. Consultancy						ADD X ADD			
3. Employment	ф					×			
4. Expert testimony						ADD X			
5. Grants/grants pending						×			
Payment for lectures including service on speakers bureaus						ADD X			
7. Payment for manuscript preparation						×			

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Relevant financial activities outside the submitted work									
Type of Relationship (in alphabetical order)	No	Money Paid to You	Money to Your Institution*	Entity	Comments				
Patents (planned, pending or issued)	ф					ADD ×			
9. Royalties	þ					ADD			
10. Payment for development of educational presentations	þ					ADD ×			
11. Stock/stock options						ADD ×			
12. Travel/accommodations/ meeting expenses unrelated to activities listed**						ADD ×			
13. Other (err on the side of full disclosure)	+					ADD X			
* This means money that your institution ** For example, if you report a consultance				avel related to that consulta	ncy on this line.	ADD			
Section 4. Other relationsh	nips								
Are there other relationships or activi potentially influencing, what you wro				have influenced, or tha	t give the appearance	of			
No other relationships/conditions Yes, the following relationships/co					t				
At the time of manuscript acceptance On occasion, journals may ask author	e, journal s to disc	s will ask a lose furthe	uthors to conf r information a	irm and, if necessary, upo about reported relationsl	date their disclosure st nips.	atements.			
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1. Grant	A					X ADD
2. Consulting fee or honorarium						X ADD
Support for travel to meetings for the study or other purposes	Q					X
4. Fees for participation in review activities such as data monitoring boards, statistical analysis, end point committees, and the like	□ ∀					×
5. Payment for writing or reviewing the manuscript	Q					X
Provision of writing assistance, medicines, equipment, or administrative support	R					×



The Work Under Consideration for Publication						
Туре	No	Money Paid to You	Money to Your Institution*	Name of Entity	Comments**	
White the second	EXPENSION FOR PROPERTY.		ENGAS DE SEURS E			ADD
7. Other						×
						ADD)

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1. Board membership						×
2. Consultancy						X ADD
3. Employment					E STATE OF THE STA	×
4. Expert testimony	Q					ADD × ADD
5. Grants/grants pending	Q					X
Payment for lectures including service on speakers bureaus	Q					×
Payment for manuscript preparation	Q					X

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Type of Relationship (in alphabetical order)	No	Money Paid to You	Money to Your Institution*	Entity	Comments	
8. Patents (planned, pending or issued)						ADD X
9. Royalties						ADD ×
10. Payment for development of educational presentations						ADD X
11. Stock/stock options	□\/					ADD X ADD
12. Travel/accommodations/ meeting expenses unrelated to activities listed**	Q					×
13. Other (err on the side of full disclosure)	P					ADD X ADD

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1. Grant						×
						ADD
2. Consulting fee or honorarium	d					×
						ADD
3. Support for travel to meetings for	P					×
the study or other purposes						ADD
Fees for participation in review activities such as data monitoring boards, statistical analysis, end paint committees and the like.	d					×
point committees, and the like						ADD
5. Payment for writing or reviewing the manuscript	d					×
	1	/				ADD
Provision of writing assistance, medicines, equipment, or administrative support						×



The Work Under Consideration for Publication						
Type	No	Money Paid to You	Money to Your Institution*	Name of Entity	Comments**	
以外的数据的时间的大型人员的工作。		I fee				ADD
7. Other						×
						ADD

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 submission.

Relevant financial activities outside the submitted work						
Type of Relationship (in alphabetical order)	No	Money Paid to You	Money to Your Institution*	Entity	Comments	
1. Board membership						×
2. Consultancy						ADD X ADD
3. Employment						×
4. Expert testimony	V					ADD X ADD
5. Grants/grants pending	Ø					X
Payment for lectures including service on speakers bureaus						×
7. Payment for manuscript	9		0			ADD

^{*} This means money that your institution received for your efforts on this study.

^{**} Use this section to provide any needed explanation.



Relevant financial activities outside the submitted work						
Type of Relationship (in alphabetical order)	No	Money Paid to You	Money to Your Institution*	Entity	Comments	
8. Patents (planned, pending or issued)	9				ADD ADD	
9. Royalties					X ADD	
Payment for development of educational presentations					X ADD	
11. Stock/stock options					X	
12. Travel/accommodations/ meeting expenses unrelated to activities listed**					×	
13. Other (err on the side of full disclosure)	Q/				ADD ×	

Section 4. Other relationships
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?
No other relationships/conditions/circumstances that present a potential conflict of interest
Yes, the following relationships/conditions/circumstances are present (explain below):
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.
Hide All Table Rows Checked 'No' SAVE

^{*} This means money that your institution received for your efforts.

^{**} For example, if you report a consultancy above there is no need to report travel related to that consultancy on this line.

Section 1. Identifying Inform	mation	国制度的数据(1)。 11
1. Given Name (First Name)	2. Surname (Last Name)	3. Effective Date (07-August-2008)
4. Are you the corresponding author?	Yes No Corresponding Author Virginia Moyer	s Name
5. Manuscript Title Screening for Hypertension in Childre	n and Adolescents	
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 for any aspect of the submitted work (including but not limited to grants, data monitoring board, study design, manuscript preparation, statistical analysis, etc...)?

The Work Under Consideration for Publication										
Туре	No	Money Paid to You	Money to Your Institution*	Name of Entity	Comments**					
1. Grant						X ADD				
2. Consulting fee or honorarium	\Box					X ADD				
Support for travel to meetings for the study or other purposes						×				
4. Fees for participation in review activities such as data monitoring boards, statistical analysis, end point committees, and the like						ADD X				
5. Payment for writing or reviewing the manuscript						X				
Provision of writing assistance, medicines, equipment, or administrative support						×				



The Work Under Consider						Pil 1
Туре	No	Money Paid to You	Money to Your Institution*	Name of Entity	Comments**	
	STORY TO PERSON THE INVESTIGATION OF			ASSESSED RESIDENCE OF THE PARTY		ADD
7. Other						×
						ADD

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 submission.

Relevant financial activities outside the submitted work									
Type of Relationship (in alphabetical order)	No	Money Paid to You	Money to Your Institution*	Entity	Comments				
1. Board membership						×			
2. Consultancy						ADD X ADD			
3. Employment	Ø					×			
4. Expert testimony						X ADD			
5. Grants/grants pending	Ø					X			
Payment for lectures including service on speakers bureaus	Ø					×			
7. Payment for manuscript preparation						ADD X			

^{*} This means money that your institution received for your efforts on this study.

^{**} Use this section to provide any needed explanation.



Relevant financial activities outside the submitted work									
Type of Relationship (in alphabetical order)	No	Money Paid to You	Money to Your Institution*	Entity	Comments				
8. Patents (planned, pending or issued)					ADD X				
9. Royalties	d				ADD X				
10. Payment for development of educational presentations					×				
11. Stock/stock options	Ø				ADD X				
12. Travel/accommodations/ meeting expenses unrelated to activities listed**	Ø				×				
13. Other (err on the side of full disclosure)	Ø				ADD X				

Section 4.

Other relationships 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?

No other relationships/conditions/circumstances that present a potential conflict of interest

Yes, the following relationships/conditions/circumstances are present (explain below):

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Hide All Table Rows Checked 'No'

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^{**} For example, if you report a consultancy above there is no need to report travel related to that consultancy on this line.

Section 1. Identifying Infor	mation	
1. Given Name (First Name)	2. Surname (Last Name)	3. Effective Date (07-August-2008)
4. Are you the corresponding author?	Yes No	Corresponding Author's Name Virginia Moyer
5. Manuscript Title Screening for Hypertension in Childre	n and Adolescents	
6. Manuscript Identifying Number (if you	know it)	

Section 2. Th

The Work Under Consideration for Publication

Did you or your institution at any time receive payment or services from a third party for any aspect of the submitted work (including but not limited to grants, data monitoring board, study design, manuscript preparation, statistical analysis, etc...)?

The Work Under Consideration for Publication								
Туре	No	Money Paid to You	Money to Your Institution*	Name of Entity	Comments**			
1. Grant	贝					X ADD		
2. Consulting fee or honorarium	X					×		
Support for travel to meetings for the study or other purposes	Ø					×		
Fees for participation in review activities such as data monitoring boards, statistical analysis, end point committees, and the like	K)					ADD X		
5. Payment for writing or reviewing the manuscript	×					×		
Provision of writing assistance, medicines, equipment, or administrative support	×				¥	ADD ×		



The Work Under Consideration for Publication									
Туре	No	Money Paid to You	Money to Your Institution*	Name of Entity	Comments**				
7. Other	文					ADD × ADD			

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 submission.

Type of Relationship (in		Money	Money to	开发发中国第	经产生等原理
alphabetical order)	No	Paid to You	Your Institution*	Entity	Comments
. Board membership	TO THE STATE OF TH			ATTORN MESSAGE	
. Consultancy	TX.				
Employment	文				
Expert testimony	史				
Grants/grants pending	A				
Payment for lectures including service on speakers bureaus	(A)				
Payment for manuscript preparation	H				

^{*} This means money that your institution received for your efforts on this study.

^{**} Use this section to provide any needed explanation.



Relevant financial activities outside the submitted work									
Type of Relationship (in alphabetical order)	No	Money Paid to You	Money to Your Institution*	Entity	Comments				
8. Patents (planned, pending or issued)	*					ADD			
9. Royalties	P					ADD X			
10. Payment for development of educational presentations	P					ADD			
11. Stock/stock options	Þ					ADD ×			
12. Travel/accommodations/ meeting expenses unrelated to activities listed**	A					ADD ×			
13. Other (err on the side of full disclosure)	央					ADD X ADD			
* This means money that your institution ** For example, if you report a consultance				el related to that consulta	ncy on this line.	NOD			

Section 4. Other relationships

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?

No other relationships/conditions/circumstances that present a potential conflict of interest

Yes, the following relationships/conditions/circumstances are present (explain below):

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.

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Section 1. Identifying Infor	mation	
1. Given Name (First Name)	2. Surname (Last Name)	3. Effective Date (07-August-2008)
4. Are you the corresponding author?	☐ Yes ✓ No	Corresponding Author's Name Virginia Moyer
5. Manuscript Title Screening for Hypertension in Childre	n and Adolescents	
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 for any aspect of the submitted work (including but not limited to grants, data monitoring board, study design, manuscript preparation, statistical analysis, etc...)?

The Work Under Consideration for Publication									
Туре	No	Money Paid to You	Money to Your Institution*	Name of Entity	Comments**				
1. Grant	Ø					X ADD			
2. Consulting fee or honorarium	B					X ADD			
Support for travel to meetings for the study or other purposes		A		USPSTF		×			
4. Fees for participation in review activities such as data monitoring boards, statistical analysis, end point committees, and the like						X			
5. Payment for writing or reviewing the manuscript						X			
Provision of writing assistance, medicines, equipment, or administrative support	A					X			

The Work Under Considerat	ion for Pub	lication				
Туре	No	Money Paid to You	Money to Your Institution*	Name of Entity	Comments**	
7. Other	Ø					ADD X ADD

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 submission.

Type of Relationship (in alphabetical order)		Money Paid to You	Money to Your Institution*	Entity	Comments
	No				
. Board membership					
. Consultancy	囚				
Employment	×				
. Expert testimony					
. Grants/grants pending	B				
5. Payment for lectures including service on speakers bureaus					
. Payment for manuscript preparation	KL.				

^{*} This means money that your institution received for your efforts on this study.

^{**} Use this section to provide any needed explanation.

Relevant financial activities outside the submitted work									
Type of Relationship (in alphabetical order)	No	Money Paid to You	Money to Your Institution*	Entity	Comments				
Patents (planned, pending or issued)						ADD X			
9. Royalties	A					ADD X ADD			
10. Payment for development of educational presentations						×			
11. Stock/stock options						ADD X ADD			
12. Travel/accommodations/ meeting expenses unrelated to activities listed**	Q					×			
13. Other (err on the side of full disclosure)	Ø					ADD X ADD			

Section 4. Other relationships

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?

Vo other relationships/conditions/circumstances that present a potential conflict of interest Yes, the following relationships/conditions/circumstances are present (explain below):

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^{**} For example, if you report a consultancy above there is no need to report travel related to that consultancy on this line.



Section 1. Identifying Information	
1. Given Name (First Name) Phillips 2. Surname (Last Name)	e) 3. Effective Date (07-August-2008)
4. Are you the corresponding author? Yes Vo	Corresponding Author's Name Virginia Moyer
5. Manuscript Title Screening for Hypertension in Children and Adolescents	
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 for any aspect of the submitted work (including but not limited to grants, data monitoring board, study design, manuscript preparation, statistical analysis, etc...)?

The Work Under Consideration for Publication								
Туре	No	Money Paid to You	Money to Your Institution*	Name of Entity	Comments**			
1. Grant	V					× ADD		
2. Consulting fee or honorarium						X		
Support for travel to meetings for the study or other purposes	6					×		
4. Fees for participation in review activities such as data monitoring boards, statistical analysis, end point committees, and the like	d					ADD X		
5. Payment for writing or reviewing the manuscript	1					X		
Provision of writing assistance, medicines, equipment, or administrative support	d					ADD		



The Work Under Consideration for Publication								
Туре	No	Money Paid to You	Money to Your Institution*	Name of Entity	Comments**			
7. Other	V					ADD X ADD		

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 submission.

Relevant financial activities outside the submitted work							
Type of Relationship (in alphabetical order)	No	Money Paid to You	Money to Your Institution*	Entity	Comments		
1. Board membership						×	
2. Consultancy						X ADD	
3. Employment						×	
4. Expert testimony						×	
5. Grants/grants pending	1					ADD	
Payment for lectures including service on speakers bureaus						ADD ×	
7. Payment for manuscript preparation						ADD	

^{*} This means money that your institution received for your efforts on this study.

^{**} Use this section to provide any needed explanation.



Relevant financial activities outside the submitted work								
Type of Relationship (in alphabetical order)	No	Money Paid to You	Money to Your Institution*	Entity	Comments			
Patents (planned, pending or issued)						ADD		
9. Royalties						ADD X ADD		
Payment for development of educational presentations						×		
11. Stock/stock options						ADD X ADD		
12. Travel/accommodations/ meeting expenses unrelated to activities listed**	d					×		
13. Other (err on the side of full disclosure)	V					ADD X ADD		

^{*} This means money that your institution received for your efforts.

Section 4. Other relationships

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?

No other relationships/conditions/circumstances that present a potential conflict of interest

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^{**} For example, if you report a consultancy above there is no need to report travel related to that consultancy on this line.



Section 1. Identifying Inform	nation	
 Given Name (First Name) Hichael Are you the corresponding author? 	2. Surname (Last Name) Rquae Yes No	3. Effective Date (07-August-2008) Corresponding Author's Name
Manuscript Title Screening for Hypertension in Children Manuscript Identifying Number (if you keep)		Virginia Moyer

Section 2. The Work Under Consideration for Publication

Did you or your institution at any time receive payment or services from a third party for any aspect of the submitted work (including but not limited to grants, data monitoring board, study design, manuscript preparation, statistical analysis, etc...)?

The Work Under Consideration for Publication									
Туре	No	Money Paid to You	Money to Your Institution*	Name of Entity	Comments**				
1. Grant	d					X ADD			
2. Consulting fee or honorarium	Ø					X			
Support for travel to meetings for the study or other purposes						×			
Fees for participation in review activities such as data monitoring boards, statistical analysis, end point committees, and the like						×			
5. Payment for writing or reviewing the manuscript	1					ADD X ADD			
Provision of writing assistance, medicines, equipment, or administrative support	1					×			



The Work Under Consideration for Publication								
Туре	No	Paid	Money to Your Institution*	Name of Entity	Comments**			
7. Other						ADD × ADD		

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Relevant financial activities outside the submitted work									
Type of Relationship (in alphabetical order)	No	Money Paid to You	Money to Your Institution*	Entity	Comments				
1. Board membership	7					×			
2. Consultancy	8					ADD X			
3. Employment	0					X			
4. Expert testimony						X			
5. Grants/grants pending			2	grants from	NOW, CDC,	X			
Payment for lectures including service on speakers bureaus	d			Inbruel M. Foundati	NIH, CDC, on Cover Society while Decision	×			
7. Payment for manuscript preparation	1					ADD			

^{*} This means money that your institution received for your efforts on this study.

^{**} Use this section to provide any needed explanation.



Relevant financial activities outside the submitted work									
Type of Relationship (in alphabetical order)	No	Money Paid to You	Money to Your Institution	Entity	Comments				
8. Patents (planned, pending or issued)	d					ADD ×			
9. Royalties				textbook chap	ten a	ADD × ADD			
10. Payment for development of educational presentations	d			ri pius		X ADD			
11. Stock/stock options						X ADD			
12. Travel/accommodations/ meeting expenses unrelated to activities listed**		d		travel for me	etigo-	×			
13. Other (err on the side of full disclosure)				travel for meeting or aspiring prevention - Pontus ship on Prevention		ADD X			

Section 4. Other relationships
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?
No other relationships/conditions/circumstances that present a potential conflict of interest
Yes, the following relationships/conditions/circumstances are present (explain below):
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.
uc
Hide All Table Rows Checked 'No' SAVE

^{*} This means money that your institution received for your efforts.

^{**} For example, if you report a consultancy above there is no need to report travel related to that consultancy on this line.

1. Given Name (First Name) 2. Surname (Last Name) 3. Effective Date (07-August-2008) 4. Are you the corresponding author? Virginia Moyer 5. Manuscript Title Screening for Hypertension in Children and Adolescents 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 for any aspect of the submitted work (including but not limited to grants, data monitoring board, study design, manuscript preparation, statistical analysis, etc...)?

The Work Under Consideration for Publication								
Туре	No	Money Paid to You	Money to Your Institution*	Name of Entity	Comments**			
1. Grant	中					X ADD		
2. Consulting fee or honorarium	中					× ADD		
Support for travel to meetings for the study or other purposes	þ					×		
4. Fees for participation in review activities such as data monitoring boards, statistical analysis, end point committees, and the like	F					X		
5. Payment for writing or reviewing the manuscript	4					X		
Provision of writing assistance, medicines, equipment, or administrative support						×		



The Work Under Consideration for Publication								
	Туре	No	Money Paid to You	Money to Your Institution*	Name of Entity	Comments**		
Service de la contraction de l			/				ADD	
7. Other							×	
							ADD	

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 submission.

Relevant financial activities outside the submitted work							
Type of Relationship (in alphabetical order)	No	Money Paid to You	Money to Your Institution*	Entity	Comments		
1. Board membership	中					×	
2. Consultancy	ф					ADD ×	
3. Employment	ф					×	
4. Expert testimony	4					ADD X	
5. Grants/grants pending	4					X	
Payment for lectures including service on speakers bureaus	ф					×	
Payment for manuscript preparation						ADD ×	

^{*} This means money that your institution received for your efforts on this study.

^{**} Use this section to provide any needed explanation.



Relevant financial activities out	side the	e submit	ted work			
Type of Relationship (in alphabetical order)	No	Money Paid to You	Money to Your Institution*	Entity	Comments	
Patents (planned, pending or issued)	ф					ADD X
9. Royalties						ADD ×
10. Payment for development of educational presentations	#					× ADD
11. Stock/stock options	þ					× ADD
12. Travel/accommodations/ meeting expenses unrelated to activities listed**	þ					×
13. Other (err on the side of full disclosure)	Image: Control of the					ADD X
* This means money that your institution ** For example, if you report a consultance				avel related to that consulta	ancy on this line.	
Section 4. Other relationsh	nips					好题
Are there other relationships or active potentially influencing, what you wro				o have influenced, or tha	t give the appearance	of
No other relationships/conditions Yes, the following relationships/c					t	
At the time of manuscript acceptance	e, journa	Is will ask	authors to conf	firm and, if necessary, upo	date their disclosure s	tatements.

Hide All Table Rows Checked 'No'

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On occasion, journals may ask authors to disclose further information about reported relationships.

Section 1.	Identifying Infor	mation	
1. Given Name (F Virginia	First Name)	2. Surname (Last Name) Moyer	3. Effective Date (07-August-2008)
4. Are you the co	rresponding author?	✓ Yes No	
5. Manuscript Tit Screening for H	le ypertension in Childre	n and Adolescents	
6. Manuscript Ide	entifying Number (if you	know it)	9

Section 2. The Work Under Consideration for Publication

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Did you or your institution at any time receive payment or services from a third party for any aspect of the submitted work (including but not limited to grants, data monitoring board, study design, manuscript preparation, statistical analysis, etc...)?

The Work Under Consideration for Publication						
Type	No	Money Paid to You	Money to Your Institution*	Name of Entity	Comments**	
1. Grant	9					×
	/					ADD
2. Consulting fee or honorarium	0					×
						ADD
Support for travel to meetings for the study or other purposes						×
						ADD
 Fees for participation in review activities such as data monitoring boards, statistical analysis, end point committees, and the like 	9					×
						ADD
Payment for writing or reviewing the manuscript	9					×
						ADD
 Provision of writing assistance, medicines, equipment, or administrative support 	4					×



The Work Under Conside	ration for Pub	lication		Section of the second	The second	A ME
Туре	No	Money Paid to You	Money to Your Institution*	Name of Entity	Comments**	
		/				ADD
7. Other	9					×
				-		ADD

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 submission.

Complete each row by checking "No" or providing the requested information. If you have more than one relationship click the "Add" button to add a row. Excess rows can be removed by clicking the "X" button.

Type of Relationship (in alphabetical order)	No	Money Paid to You	Money to Your Institution*	Entity	Comments	
. Board membership	9		K-LAW			
		/				
2. Consultancy						1
		/_				1
3. Employment						
4. Expert testimony						
n Expere testimony						
5. Grants/grants pending	P	П				
				2		1
6. Payment for lectures including service on speakers bureaus						
						T.
7. Payment for manuscript preparation	0					1

Moyer

^{*} This means money that your institution received for your efforts on this study.

^{**} Use this section to provide any needed explanation.



Relevant financial activities or	utside the	submit	ted work	· Carrier	TO NO. OF THE PARTY OF THE PART
Type of Relationship (in alphabetical order)	No	Money Paid to You	Money to Your Institution*	Entity	Comments
		/			A
8. Patents (planned, pending or issued)					
					A
9. Royalties					
10. Payment for development of		/_			A
educational presentations	L				
11 Stack letack antions					A
11. Stock/stock options					A
 Travel/accommodations/ meeting expenses unrelated to activities listed** 					
					Al
Other (err on the side of full disclosure)					
					A
* This means money that your institution ** For example, if you report a consultation				avel related to that consult	ancy on this line.
			•		
Section 4. Other relation					
Other relation					
Are there other relationships or act potentially influencing, what you v				o have influenced, or th	at give the appearance of
No other relationships/condition	ns/circum	stances th	at present a po	otential conflict of intere	st
Yes, the following relationships	/condition	s/circums	tances are pre	sent (explain below):	

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.

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