Section 1. Identifying Inform	ation						
1. Given Name (First Name) Virginia	2. Surname (Last Name) Moyer	3. Effective Date (07-August-2008)					
4. Are you the corresponding author?	✓ Yes No						
5. Manuscript Title Screening for Gestational Diabetes Mellitus							
6. Manuscript Identifying Number (if you kn	ow it)						

Section 2. The Work Under Consideration for Publication

Moyer

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 το You	Money to Your Institution*	Name of Entity	Comments**		
1. Grant						- X	
2. Consulting fee or honorarium	4					ADE X ADD	
Support for travel to meetings for the study or other purposes		9					
 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	J					ADD X	
Provision of writing assistance, medicines, equipment, or administrative support						***	
Mover						2	

The Work Under Consideration	on for Pub	lication				
Type	No	Money Paid to You	Money to Your Institution*	Name of Entity	Comments**	
			,			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	Comment	S		
1. Board membership								
2. Consultancy						ADD		
3. Employment						ADD		
4. Expert testimony						ADD X.		
5. Grants/grants pending						ADD		
Payment for lectures including service on speakers bureaus						ADD X ADD		
7. Payment for manuscript preparation						(ASIO)		

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

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



Re	Relevant financial activities outside the submitted work									
	Type of Relationship (in alphabetical order)	No	Money Paid to You	Money to Your Institution*	Entity	Comments				
	0.1						ADD			
8	. Patents (planned, pending or issued)						×			
		_/	<i>-</i>				ADD			
9.	Royalties						.X			
10	. Payment for development of						AÓD			
	educational presentations						. 💥			
	C. 17. 1						ADD			
- 11	. Stock/stock options						ADD .			
12	. Travel/accommodations/	_/	_				وقعيد			
	meeting expenses unrelated to activities listed**						×			
							ADD			
13	. Other (err on the side of full disclosure)						×			
							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 Chedred No.



Moyer

^{*} 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	ation						
1. Given Name (First Name) Virginia	2. Surname (Last Name) Moyer	3. Effective Date (07-August-2008)					
4. Are you the corresponding author?	✓ Yes No						
5. Manuscript Title Screening for Gestational Diabetes Mellitus							
6. Manuscript Identifying Number (if you kn	ow it)						

Section 2. The Work Under Consideration for Publication

Moyer

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The Work Under Consideration for Publication							
Type	No	Money Paid το You	Money to Your Institution*	Name of Entity	Comments**		
1. Grant						- X	
2. Consulting fee or honorarium	4					ADE X ADD	
Support for travel to meetings for the study or other purposes		9					
 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	J					ADD X	
Provision of writing assistance, medicines, equipment, or administrative support						***	
Mover						2	

The Work Under Consideration	on for Pub	lication				
Type	No	Money Paid to You	Money to Your Institution*	Name of Entity	Comments**	
			,			ADD
7. Other						×
						ADD

Section 3.

Relevant financial activities outside the submitted work.

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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	Comment	S		
1. Board membership								
2. Consultancy						ADD		
3. Employment						ADD		
4. Expert testimony						ADD X.		
5. Grants/grants pending						ADD		
Payment for lectures including service on speakers bureaus						ADD X ADD		
7. Payment for manuscript preparation						(ASIO)		

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

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



Re	Relevant financial activities outside the submitted work									
	Type of Relationship (in alphabetical order)	No	Money Paid to You	Money to Your Institution*	Entity	Comments				
	0.1						ADD			
8	. Patents (planned, pending or issued)						×			
		_/	<i>-</i>				ADD			
9.	Royalties						.X			
10	. Payment for development of						AÓD			
	educational presentations						. 💥			
	C. 17. 1						ADD			
- 11	. Stock/stock options						ADD .			
12	. Travel/accommodations/	_/	_				وقعيد			
	meeting expenses unrelated to activities listed**						×			
							ADD			
13	. Other (err on the side of full disclosure)						×			
							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?

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Hide All Table Rows Chedred No.



Moyer

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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 Inforn	nation				000 - 111 - 15 00 0 16 17 18 18 18 18 18 18 18 18 18 18 18 18 18	
1. Given Name (Firs	t Name) A	2. Surnan	ne (Last Name)		3. Effective	Date (07-Aug	just-2008)
4. Are you the corre	esponding author?	Yes	√ No	Corresponding Author's Na Virginia Moyer	me		
5. Manuscript Title Screening for Ges	tational Diabetes Mel	litus					
6. Manuscript Ident	tifying 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 Wo	rk Under Consideration f	for Pub	lication				
	Туре	No	Money Paid to You	Money to Your Institution*	Name of Entity	Comments**	
1. Grant		4					X ADD
2. Const	ulting fee or honorarium	ď					X ADD
	ort for travel to meetings for audy or other purposes						× ADD
activi board	for participation in review ties such as data monitoring ds, statistical analysis, end committees, and the like	6					X
	nent for writing or reviewing nanuscript					·	×
medi	ision of writing assistance, cines, equipment, or nistrative support						×

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)	Ų					ADD ×		
9. Royalties						ADD X		
10. Payment for development of educational presentations	9					ADD X		
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)						ADD ×		
						ADD		

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' 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 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 Gestational Diabetes Me	ellitus	
6. Manuscript Identifying Number (if you	know it)	
The second of th		

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 4	甲					×		
2. Consulting fee or honorarium	ф					ADD X ADD		
3. Support for travel to meetings for the study or other purposes	ф					×		
 Fees for participation in review activities such as data monitoring boards, statistical analysis, end point committees, and the like 						× ADD		
5. Payment for writing or reviewing the manuscript						×		
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	1					ADD × ADD	

Section 3. Relevant financial activities outside the submitted work.

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

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

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

Type of Relationship (in alphabetical order)	No	Money Paid to You	Money to Your Institution*	Entity	Comments	
9. Patents (planned pending or						ADD
Patents (planned, pending or issued)	P					×
9. Royalties	\overline{A}					ADD ×
•	1					ADD
10. Payment for development of educational presentations						×
						ADD
11. Stock/stock options	Щ					X ADD
12. Travel/accommodations/ meeting expenses unrelated to	+					×
activities listed**	Ш			an [†]		
13. Other (err on the side of full						ADD X
disclosure)	Щ					ADD
* This means money that your institution ** For example, if you report a consultance					Anna an Alain lina	עטא

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'

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Section 1.	ldentifying Inform	ation		
1. Given Name (F	irst Name) 1 a K	2. Surnam	ne (Last Name) ESeU	3. Effective Date (07-August-2008)
4. Are you the co	rresponding author?	Yes	✓ No	Corresponding Author's Name Virginia Moyer
5. Manuscript Titl Screening for G	e estational Diabetes Mell	itus	14	
6. Manuscript Ide	ntifying Number (if you kn	ow 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	1					×		
2. Consulting fee or honorarium						ADD 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 ×		
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							ADD × ADD

Section 3. Relevant financial activities outside the submitted work.

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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	Z				×		
2. Consultancy					AD X		
3. Employment					×		
4. Expert testimony					AD ×		
5. Grants/grants pending	Ø				Αυ ×		
5. Payment for lectures including service on speakers bureaus	P				X		
7. Payment for manuscript preparation	7				AD		

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

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

	No	Paid to You	Money to Your Institution*	Entity	Comments
Patents (planned, pending or issued)	Þ				A
Royalties	Ø				A
Payment for development of educational presentations					A
Stock/stock options					A
Travel/accommodations/ meeting expenses unrelated to activities listed**					
Other (err on the side of full disclosure)	Ø				A
This means money that your institutio For example, if you report a consultar				avel related to that consu	Iltancy on this line.
ection 4. Other relations	hips				
e there other relationships or acti otentially influencing, what you w				to have influenced, or t	hat give the appearance of
No other relationships/condition Yes, the following relationships/					rest

Hide All Table Rows Checked 'No'

SAVE

Section 1. Identifying Infor	mation	
1. Given Name (First Name) GLENN	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 Gestational Diabetes M	ellitus	
6. Manuscript Identifying Number (if you	know it)	·
and the second s	The second secon	

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	Money to Your Institution*	Name of Entity	Comments**				
1. Grant	9					×			
2. Consulting fee or honorarium	9	- 🗆				ADD X ADD			
Support for travel to meetings for the study or other purposes	9					× ADD			
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						×			
Provision of writing assistance, medicines, equipment, or administrative support	9					×			

Relevant financial activities outside the submitted work									
Type of Relationship (in alphabetical order)	No	Money Paid to You	Money to Your Institution*	Entity	Comments				
		_				ADD			
Patents (planned, pending or issued)	U					×			
						ADD			
9. Royalties	4					×			
						ADD			
Payment for development of educational presentations						×			
						ADD			
11. Stock/stock options	4					×			
						ADD			
 Travel/accommodations/ meeting expenses unrelated to activities listed** 						×			
						ADD			
Other (err on the side of full disclosure)	U					×			
						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 rela	ationships/conditions/circumstances that present a potential conflict of interest	
Yes, the follo	owing relationships/conditions/circumstances are present (explain below):	
At the time of m	nanuscript acceptance, journals will ask authors to confirm and, if necessary, update their disclosure statement	s.

Hide All Table Rows Checked 'No'

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

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. Giv	en 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	e
	nuscript Title ning for Gestational Diabetes Me	ellitus		

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	P					X ADD			
2. Consulting fee or honorarium						×			
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						×			
Provision of writing assistance, medicines, equipment, or administrative support						ADD ×			

	The Work Under Consideration for Publication									
No	Money Paid to You	Money to Your Institution*	Name of Entity	Comments**						
<u></u>					ADD × ADD					
	ļ ļ	No Paid to You		No Paid Your Name of Entity to You Institution*	No Paid Your Name of Entity Comments** to You Institution*					

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)	No	Money Paid to You	Money to Your Institution*	Entity	Comments
. Board membership				atini ka di kacamatan di Kabupatèn Kabupatèn Kabupatèn Kabupatèn Kabupatèn Kabupatèn Kabupatèn Kabupatèn Kabup Kabupatèn Kabupatèn	.
?. Consultancy	-				AC ×
. Employment					AC >
. Expert testimony					AC
Grants/grants pending					AD
Payment for lectures including service on speakers bureaus					AC
. Payment for manuscript preparation			. 🔲		At S

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

Type of Relationship (in alphabetical order)	No	Money Paid to You	Money to Your Institution*	Entity	Comments
Patents (planned, pending or issued)	Image: Control of the				AC >
9. Royalties	-				A(>
10. Payment for development of educational presentations)
11. Stock/stock options					AI
12. Travel/accommodations/ meeting expenses unrelated to activities listed**	4) AI
13. Other (err on the side of full disclosure)					Al Al
* This means money that your institutior ** For example, if you report a consultan				vel related to that consu	ultancy on this line.
Section 4. Other relations	hip <u>s</u>				
Are there other relationships or active potentially influencing, what you wr	rities tha		•	have influenced, or t	hat give the appearance of
No other relationships/condition Yes, the following relationships/					rest
At the time of manuscript acceptanc	e, journ	als will ask	authors to confi	rm and, if necessary, u	update their disclosure stateme

Hide All Table Rows Checked 'No'

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

SAVE

Section 1. Identifying Infor	nation	
1. Given Name (First Name)	2. Surname (Last Name)	3. Effective Date (07-August-2008)
David	Surywan	
4. Are you the corresponding author?	Yes ✓ No	Corresponding Author's Name
		Virginia Moyer
5. Manuscript Title Screening for Gestational Diabetes Me	llitus	
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	2					×			
2. Consulting fee or honorarium						ADD 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						×			
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			/				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	I					×			
2. Consultancy	d					DD X			
3. Employment					<i>.</i>	X			
4. Expert testimony						DD X			
5. Grants/grants pending					A	DD X			
6. Payment for lectures including service on speakers bureaus	d					DD X			
7. Payment for manuscript preparation	ď					adi 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	side the	: supmiti	ea work		
Type of Relationship (in alphabetical order)	No	Money Paid to You	Money to Your Institution*	Entity	Comments
3. Patents (planned, pending or issued)					
). Royalties					
Payment for development of educational presentations					
. Stock/stock options					
2. Travel/accommodations/ meeting expenses unrelated to activities listed**					
3. Other (err on the side of full disclosure)					
This means money that your institution * For example, if you report a consultance.				el related to that consu	Itancy on this line.
Section 4. Other relationsl	nips				
Are there other relationships or active potentially influencing, what you wro				nave influenced, or th	nat give the appearance of
No other relationships/conditions	s/circum	stances th	at present a pote	ntial conflict of inter	est
Yes, the following relationships/c	ondition	s/circums	tances are presen	it (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

Section 1.	Identifying Inform	mation		
•	rst Name) CSC CC responding author?	2. Surname (Last Name) Leo Stein Yes No	Corresponding Author's Nan Virginia Moyer	3. Effective Date (07-August-2008)
	e estational Diabetes Me ntifying Number (if you k			

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	[j]					×	
2. Consulting fee or honorarium						ADD X ADD	
Support for travel to meetings for the study or other purposes	Q'					×	
4. Fees for participation in review activities such as data monitoring boards, statistical analysis, end point committees, and the like						ADD X ADD	
5. Payment for writing or reviewing the manuscript						×	
6. Provision of writing assistance, medicines, equipment, or administrative support						ADD X	

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

Section 3. Relevant financial activities outside the submitted work.

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Type of Relationship (in alphabetical order)	No	Money Paid to You	Money to Your Institution*	Entity	Comments
Board membership					
Consultancy					
Employment	Ø				
xpert testimony					
Grants/grants pending	V				
ayment for lectures including ervice on speakers bureaus	d				
ayment for manuscript reparation					

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

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

Type of Relationship (in alphabetical order)	No	Money Paid to You	Money to Your Institution*	Entity	Comments
Patents (planned, pending or issued)	9				
. Royalties				·	·
Payment for development of educational presentations	G)				
1. Stock/stock options					
2. Travel/accommodations/ meeting expenses unrelated to activities listed**					
. Other (err on the side of full disclosure)					
This means money that your institution for example, if you report a consultance				related to that consu	ultancy on this line.
					•
Section 4. Other relationsh	nips				

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'

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

SAVE

Section 1. Identifying Infor	mation		
1. Given Name (First Name)	2. Surname (Last Name)	· C	3. Effective Date (07-August-2008)
4. Are you the corresponding author?	Yes No	Corresponding Author's Nat Virginia Moyer	me
5. Manuscript Title Screening for Gestational Diabetes Mo	ellitus		
6. Manuscript Identifying Number (if you	know it)		

Section 2. The Work Under Consideration for Publication

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The Work Under Consideration for Publication								
Type	No	Money Paid to You	Money to Your Institution*	Name of Entity	Comments**			
1. Grant						×		
2. Consulting fee or honorarium						ADD × ADD		
3. 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 ×		
5. Payment for writing or reviewing the manuscript						ADD ×		
Provision of writing assistance, medicines, equipment, or administrative support	J /					ADD X		

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

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	Ø					ADD ×	
3. Employment	Ø					ADD X	
4. Expert testimony						ADD X	
5. Grants/grants pending						ADD X	
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.

Type of Relationship (in alphabetical order)	No	Money Paid to You	Money to Your Institution*	Entity	Comments	
8. Patents (planned, pending or issued)						ľ
9. Royalties	Ø					<i>)</i>
Payment for development of educational presentations	Ø					A
1. Stock/stock options						<u>^</u>
 Travel/accommodations/ meeting expenses unrelated to activities listed** 						_^
3. Other (err on the side of full disclosure)						A
This means money that your institution * For example, if you report a consultanc	received	for your effo here is no r	orts. need to report trav	el related to that consul	Itancy on this line.	A

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

Ma

Section 1. Identifying Information									
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 Gestational Diabetes M	ellitus								
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						
Type	No	Money Paid to You	Money to Your Institution*	Name of Entity	Comments**	
1. Grant	DX.					×
2. Consulting fee or honorarium	×					ADD X ADD
3. Support for travel to meetings for the study or other purposes	囚					×
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						ADD 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	为					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.

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)			Board Member of Diabetes Sisters, Inc. No financial support	X ADD			
2. Consultancy	Ţ.			No financial support	X ADD			
3. Employment	X				X			
4. Expert testimony	Ø				×			
5. Grants/grants pending			戾	NIDOK Front Funding	ADD X ADD			
Payment for lectures including service on speakers bureaus	∇			, 0	X			
7. Payment for manuscript preparation	M				×			

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

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

Type of Relationship (in alphabetical order)	No	Money Paid to You	Money to Your Institution*	Entity	Comments	
8. Patents (planned, pending or issued)						AD >
9. Royalties						AC >
Payment for development of educational presentations						AC >
1. Stock/stock options						>
2. Travel/accommodations/ meeting expenses unrelated to activities listed**						A £
3. Other (err on the side of full disclosure)						AD >
This means money that your institution * For example, if you report a consultance				avel related to that consu	iltancy on this line.	AC
Other relationsl Are there other relationships or active potentially influencing, what you wro	ities tha		•	o have influenced, or t	hat give the appeara	nce of
No other relationships/condition: Yes, the following relationships/c					est	
At the time of manuscript acceptanc On occasion, journals may ask autho						re stateme
					Nauda N	

Section 1.	Identifying Infor	mation		
1. Given Name (F	Tirst Name) Do U alls		ne (Last Name) いんい	3. Effective Date (07-August-2008)
4. Are you the co	rresponding author?	Yes	✓ No	Corresponding Author's Name Virginia Moyer
5. Manuscript Tit Screening for G	le estational Diabetes M	ellitus		
6. Manuscript Ide	entifying 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						
Type	No	Money Paid to You	Money to Your Institution*	Name of Entity	Comments**	
1. Grant	N.					×
2. Consulting fee or honorarium	Ø				•	ADD X ADD
Support for travel to meetings for the study or other purposes		Ø		US PSTF		×
4. Fees for participation in review activities such as data monitoring boards, statistical analysis, end point committees, and the like	T.					ADD ×
5. Payment for writing or reviewing the manuscript	X					X
Provision of writing assistance, medicines, equipment, or administrative support	#			1		×

The Work Under Consideration for Publication						
Туре	No	Money Paid to You	Money to Your Institution*	Name of Entity	Comments**	
7. Other	R					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	Ø				×		
2. Consultancy		Ø		Served as a consultant to Sanoti on design of. comperative effectiveness studies en diahetch	ADD × ADD		
3. Employment				compartive effectiveness	×		
4. Expert testimony	4			studies en dishet	ADD X		
5. Grants/grants pending	ф			*	×		
Payment for lectures including service on speakers bureaus					ADD X		
7. Payment for manuscript preparation					×		

^{*} 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 Money Money to						
Type of Relationship (in alphabetical order)	No	Paid to You	Your Institution*	Entity	Comments	
recommit America Baser, on the activities of the Antonio Scholie Station	Late Mark 1873			19. SCHOOL OF STANCIA AT A TACH SALIT WALLAND	er Lauderick and Rote Rijk and De Cor George Lieb (C.A.)	ADE
8. Patents (planned, pending or issued)	P					×
9. Royalties	ф					ADE ×
						ADD
Payment for development of educational presentations	ф					×
11. Stock/stock options						ADE ×
						ADE
 Travel/accommodations/ meeting expenses unrelated to activities listed** 	ф					×
						ADE
 Other (err on the side of full disclosure) 	ф					×
· · · · · · · · · · · · · · · · · · ·		بد م				ADE
* This means money that your institution** For example, if you report a consultant				avel related to that consu	ıltancy on this line.	

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

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 Nar Virginia Moyer	me
5. Manuscript Title Screening for Gestational Diabetes M	ellitus		
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	Co-PI, Center Duildes Tran	actual Real	× ADD	
2. Consulting fee or honorarium	Ø			NIDDKI	~ .	X ADD	
3. Support for travel to meetings for the study or other purposes	d					X ADD	
 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	d					X ADD	
Provision of writing assistance, medicines, equipment, or administrative support						×	

Section 1. Identifying Info	rmation	
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 Gestational Diabetes N	Mellitus	
6. Manuscript Identifying Number (if you	ı know it)	
the state of the same to the s		

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						
Type	No	Money Paid to You	Money to Your Institution*	Name of Entity	Comments**	
1. Grant						X ADD
2. Consulting fee or honorarium						X ADD
3. 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						×
Provision of writing assistance, medicines, equipment, or administrative support						ADD ×

The Work Under Consideration for Publication									
Type	No	Money Paid to You	Money to Your Institution*	Name of Entity	Comments**				
7. Other						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					ADD ×		
3. Employment	9				ADD ×		
4. Expert testimony					ADD ×		
5. Grants/grants pending		` 🗆			ADC		
Payment for lectures including service on speakers bureaus					ADE ⊁		
7. Payment for manuscript preparation					ADE ×		

^{*} 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			
						ADD		
Patents (planned, pending or issued)						×		
						ADD		
9. Royalties						×		
						ADD		
Payment for development of educational presentations						×		
						ADD		
11. Stock/stock options						×		
12. Travel/accommodations/						ADD		
meeting expenses unrelated to activities listed**						×		
						ADD		
Other (err on the side of full disclosure)						×		
						ADD		

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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William 72. Phi	Uips 8/7/2013
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^{*} 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?	Yes No Correspondition Virginia Moy	ng Author's Name
5. Manuscript TitleScreening for Gestational Diabetes Me6. Manuscript Identifying Number (if you k		

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	A				X ADD			
2. Consulting fee or honorarium	Ø				. X ADD			
Support for travel to meetings for the study or other purposes	Ø				X ADD			
 Fees for participation in review activities such as data monitoring boards, statistical analysis, end point committees, and the like 	Ď				×			
5. Payment for writing or reviewing the manuscript	[\$\frac{1}{2}				×			
Provision of writing assistance, medicines, equipment, or administrative support	Ø				×			

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

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 out					
Type of Relationship (in alphabetical order)	No	Money Paid to You	Money to Your Institution	Entity	Comments
. Board membership	M				
. Consultancy	Ø			•	
3. Employment					
l. Expert testimony	Ø				,
. Grants/grants pending				American Hec NIH CDC	ed
i. Payment for lectures including service on speakers bureaus	Дb			CUC	
Payment for manuscript preparation	V				

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

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

3. Patents (planned, pending or issued) 4. Royalties 5. Payment for development of educational presentations 6. Stock/stock options 7. Travel/accommodations/meeting expenses unrelated to activities listed** 7. Other (err on the side of full disclosure) 7. This means money that your institution received for your efforts.	Type of Relationship (in alphabetical order)	No	Money Paid to You	Money to Your Institution	Entity	Comments
Payment for development of educational presentations Stock/stock options Travel/accommodations/ meeting expenses unrelated to activities listed** Other (err on the side of full disclosure) One time Ep dumiology Council for development of provided the provided for the formula of the form		M				
Stock/stock options Travel/accommodations/ meeting expenses unrelated to activities listed** Other (err on the side of full disclosure)	Royalties	×				, ,
Travel/accommodations/ meeting expenses unrelated to activities listed** Other (err on the side of full disclosure)	,			X	one tine Epder for Benevite	miology Courch Pache
meeting expenses unrelated to activities listed** Other (err on the side of full disclosure)	. Stock/stock options	Ø				
disclosure)	meeting expenses unrelated to					
his means money that your institution received for your efforts.		A				
For example, if you report a consultancy above there is no need to report travel related to that consultancy on this line.					travel related to that consu	Itancy on this line.
	ection 4. Other relationsl	nips				

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'

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Section 1. Identifying Information	
1. Given Name (First Name) 2. Surname (Last Name) 2. Surname (Last Name)	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 Gestational Diabetes Mellitus	
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								
Type	No	Money Paid to You	Money to Your Institution*	Name of Entity	Comments**			
1. Grant	ij/					×		
2. Consulting fee or honorarium						ADD X		
3. Support for travel to meetings for the study or other purposes	A					×		
4. Fees for participation in review activities such as data monitoring boards, statistical analysis, end point committees, and the like						ADD ×		
5. Payment for writing or reviewing the manuscript						ADD X		
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 × ADD	

Section 3. Relevant financial activities outside the submitted work.

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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	0 /				×						
2. Consultancy	U				ADD 3 ADD						
3. Employment	O				×						
4. Expert testimony	1				ADD X						
5. Grants/grants pending					ADD X						
Payment for lectures including service on speakers bureaus					ADD ×						
7. Payment for manuscript preparation	U				ADD ×						

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

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

Type of Relationship (in alphabetical order)	No	Money Paid to You	Money to Your Institution*	Entity	Comments
Patents (planned, pending or	^				
issued)					
Royalties	N				
•	ليتيا		ш.		
. Payment for development of educational presentations					
. Stock/stock options	W				
. Travel/accommodations/ meeting expenses unrelated to activities listed**					
. Other (err on the side of full	_/				
disclosure)	لنا				
This means money that your institution For example, if you report a consultan	received	for your eff	forts.	I related to that concil	Itangy on this line

Section 4. Oth	er relationships			
	nships or activities that readers could p g, what you wrote in the submitted wor		or that give the appearance of	
No other relationsh	nips/conditions/circumstances that pre	esent a potential conflict of i	nterest	
Yes, the following r	relationships/conditions/circumstance	s are present (explain below):	
	ript acceptance, journals will ask authomay ask authors to disclose further info			ments.

Hide All Table Rows Checked 'No'

SAVE

Section 1. Identifying Infor	mation	
1. Given Name (First Name) 兵(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 Gestational Diabetes Me	ellitus	
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	9					X ADD					
2. Consulting fee or honorarium	4					× 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						ADD X					
Payment for writing or reviewing the manuscript	þ					ADD					
Provision of writing assistance, medicines, equipment, or administrative support	P					ADD ×					



The Work Under Consideration for Publication										
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.

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	4					ADD X ADD					
3. Employment	h					×					
4. Expert testimony	F					ADD X					
5. Grants/grants pending						×					
Payment for lectures including service on speakers bureaus						ADD X					
7. Payment for manuscript preparation	4					×					

^{*} 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 th	e submitt	ed work		
Type of Relationship (in alphabetical order)	No	Money Paid to You	Money to Your Institution*	Entity	Comments
8. Patents (planned, pending or issued)	P				ADE X
9. Royalties	ф				ADD
10. Payment for development of educational presentations	ф				×
11. Stock/stock options	ф				×
12. Travel/accommodations/ meeting expenses unrelated to activities listed**	4				×
13. Other (err on the side of full disclosure)					ADD
* This means money that your institution ** For example, if you report a consultant				avel related to that consult	rancy on this line.
Section 4. Other relations	hips				
Are there other relationships or active potentially influencing, what you wro	rities tha			o have influenced, or th	at give the appearance of
No other relationships/condition			1.50		st
Yes, the following relationships/o					doto their displantation
At the time of manuscript acceptanc On occasion, journals may ask autho					
		1000		-	

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Section 1. Identifying Infor	mation	
Given Name (First Name) Joy	2. Surname (Last Name) Melnikow	3. Effective Date (07-August-2008) 08-January-2014
4. Are you the corresponding author?	☐ Yes ✓ No	Corresponding Author's Name Virginia Moyer
5. Manuscript Title Screening for Gestational Diabetes M	ellitus	
6. Manuscript Identifying Number (if you	know it)	
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...)?

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



The Work Un	der Consideration for Pu	blication				
	Гуре No	Money Paid to You	Money to Your Institution*	Name of Entity	Comments**	
						ADD
7. Other	\checkmark					×
	\$ 7 −3 0	V				ADD
	ney that your institution receive on to provide any needed explai		orts on this study	<i>i.</i>		
Section 3.	Relevant financial act	vities outs	side the subn	nitted 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.

100 miles	Relevant financial activities outsi	逐步问题的情况。					
	Type of Relationship (in alphabetical order)	No	Money Paid to You	Money to Your Institution*	Entity	Comments	
37	1. Board membership	V			manus taleed, and his manufacture of the last taleed to be a second	Annual Value of the Annual Section 20 to 10 to 1	×
	2. Consultancy	\checkmark					ADD X
	3. Employment	✓	П				×
	4. Expert testimony	✓					ADD X
	5. Grants/grants pending	\checkmark					×
	C. Davis and facility at many including						ADD
	Payment for lectures including service on speakers bureaus	\checkmark					×
	7. Payment for manuscript	√					ADD
	preparation	•					



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	\checkmark					ADD ×
Payment for development of educational presentations	✓					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 ×
* 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 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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