

## ICMJE Form for Disclosure of Potential Conflicts of Interest

### Instructions

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#### 4. Intellectual Property.

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## ICMJE Form for Disclosure of Potential Conflicts of Interest

### Section 1. Identifying Information

1. Given Name (First Name)

Aaron

2. Surname (Last Name)

Harris

3. Date

27-October-2015

4. Are you the corresponding author?

☒ Yes ☐ No

5. Manuscript Title

Appropriate Antibiotic Use for Acute Respiratory Tract Infections in Adults: Advice for High Value Care from the American College of Physicians and the Centers for Disease Control and Prevention

6. Manuscript Identifying Number (if you know it)

M15-1840

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The authors have no conflicts to disclose.

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### Section 1. Identifying Information

1. Given Name (First Name)  
Lauri

2. Surname (Last Name)  
Hicks

3. Date  
29-October-2015

4. Are you the corresponding author?

☐ Yes

☒ No

Corresponding Author's Name  
Aaron Harris

5. Manuscript Title  
Appropriate Antibiotic Use for Acute Respiratory Tract Infections in Adults: Advice for High Value Care from the American College of Physicians and the Centers for Disease Control and Prevention

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M15-1840

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Dr. Hicks has nothing to disclose.

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1. Given Name (First Name)  
Amir

2. Surname (Last Name)  
Qaseem

3. Date  
17-September-2015

4. Are you the corresponding author?

☐ Yes

☒ No

Corresponding Author's Name

5. Manuscript Title

Appropriate Antibiotic Use for Acute Respiratory Tract Infections in Adults: Advice for High Value Care from the American College of Physicians and the Centers for Disease Control and Prevention

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### Section 1. Identifying Information

1. Given Name (First Name)

Jeff

2. Surname (Last Name)

Wiese

3. Date

01-April-2015

4. Are you the corresponding author?

☐

Yes

☒

No

Corresponding Author's Name

Unknown

5. Manuscript Title

A Value Framework for Cancer Screening: Advice from the High Value Task Force of ACP

6. Manuscript Identifying Number (if you know it)

M14-2327

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1. Given Name (First Name)  
carrie

2. Surname (Last Name)  
horwitch

3. Date  
03-December-2015

4. Are you the corresponding author?

☐ Yes

☒ No

Corresponding Author's Name  
Aaron Harris

5. Manuscript Title

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#### 4. Intellectual Property.

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

## ICMJE Form for Disclosure of Potential Conflicts of Interest

### Section 1. Identifying Information

1. Given Name (First Name)

linda

2. Surname (Last Name)

humphrey

3. Date

08-April-2015

4. Are you the corresponding author?

☐ Yes

☒ No

Corresponding Author's Name

5. Manuscript Title

Appropriate Antibiotic Use for Acute Respiratory Tract Infections in Adults: Advice for High Value Care from the American College of Physicians and the Centers for Disease Control and Prevention

6. Manuscript Identifying Number (if you know it)

### Section 2. The Work Under Consideration for Publication

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Are there any relevant conflicts of interest?

☐ Yes

☒ No

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Are there any relevant conflicts of interest?

☐ Yes

☒ No

### Section 4. Intellectual Property -- Patents & Copyrights

Do you have any patents, whether planned, pending or issued, broadly relevant to the work?

☐ Yes

☒ No

## ICMJE Form for Disclosure of Potential Conflicts of Interest

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### Section 5. Relationships not covered above

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### Section 6. Disclosure Statement

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Dr. humphrey has nothing to disclose.

### Evaluation and Feedback

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## ICMJE Form for Disclosure of Potential Conflicts of Interest

### Section 1. Identifying Information

1. Given Name (First Name)  
Robert

2. Surname (Last Name)  
McLean

3. Date  
10-April-2015

4. Are you the corresponding author?

☐ Yes

☒ No

Corresponding Author's Name

5. Manuscript Title

Appropriate Antibiotic Use for Acute Respiratory Tract Infections in Adults: Advice for High Value Care from the American College of Physicians and the Centers for Disease Control and Prevention

6. Manuscript Identifying Number (if you know it)

uncertain

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☐ Yes

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☒ No

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☒ No

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## ICMJE Form for Disclosure of Potential Conflicts of Interest

### Section 1. Identifying Information

1. Given Name (First Name)  
Tanveer

2. Surname (Last Name)  
Mir

3. Date  
03-April-2015

4. Are you the corresponding author?

☐ Yes ☒ No

Corresponding Author's Name  
Amir Qaseem MD, PhD

5. Manuscript Title  
Appropriate Antibiotic Use for Acute Respiratory Tract Infections in Adults: Advice for High Value Care from the American College of Physicians and the Centers for Disease Control and Prevention

6. Manuscript Identifying Number (if you know it)

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Are there any relevant conflicts of interest? ☐ Yes ☒ No

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Are there any relevant conflicts of interest? ☐ Yes ☒ No

### Section 4. Intellectual Property -- Patents & Copyrights

Do you have any patents, whether planned, pending or issued, broadly relevant to the work? ☐ Yes ☒ No

## ICMJE Form for Disclosure of Potential Conflicts of Interest

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Dr. Mir has nothing to disclose.

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## ICMJE Form for Disclosure of Potential Conflicts of Interest

### Section 1. Identifying Information

1. Given Name (First Name)  
Darilyn

2. Surname (Last Name)  
Moyer

3. Date  
09-February-2015

4. Are you the corresponding author?

☐ Yes

☒ No

Corresponding Author's Name

5. Manuscript Title

Appropriate Antibiotic Use for Acute Respiratory Tract Infections in Adults: Advice for High Value Care from the American College of Physicians and the Centers for Disease Control and Prevention

6. Manuscript Identifying Number (if you know it)

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Are there any relevant conflicts of interest? ☐ Yes ☒ No

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Are there any relevant conflicts of interest? ☐ Yes ☒ No

### Section 4. Intellectual Property -- Patents & Copyrights

Do you have any patents, whether planned, pending or issued, broadly relevant to the work? ☐ Yes ☒ No

## ICMJE Form for Disclosure of Potential Conflicts of Interest

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### Section 5.

#### Relationships not covered above

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Elected Chair of the Board of Governors, American College of Physicians

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### Section 6.

#### Disclosure Statement

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Dr. Moyer reports and Elected Chair of the Board of Governors, American College of Physicians.

### Evaluation and Feedback

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## ICMJE Form for Disclosure of Potential Conflicts of Interest

### Section 1. Identifying Information

1. Given Name (First Name)

Thomas

2. Surname (Last Name)

Tape

3. Date

04-February-2015

4. Are you the corresponding author?

☐ Yes

☒ No

Corresponding Author's Name

5. Manuscript Title

Appropriate Antibiotic Use for Acute Respiratory Tract Infections in Adults: Advice for High Value Care from the American College of Physicians and the Centers for Disease Control and Prevention

6. Manuscript Identifying Number (if you know it)

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Are there any relevant conflicts of interest?

☐ Yes

☒ No

### Section 4. Intellectual Property -- Patents & Copyrights

Do you have any patents, whether planned, pending or issued, broadly relevant to the work?

☐ Yes

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## ICMJE Form for Disclosure of Potential Conflicts of Interest

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Dr. Tape has nothing to disclose.

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## ICMJE Form for Disclosure of Potential Conflicts of Interest

### Section 1. Identifying Information

1. Given Name (First Name)  
Sanjay

2. Surname (Last Name)  
Desai

3. Date  
04-December-2015

4. Are you the corresponding author?

☐ Yes

☒ No

Corresponding Author's Name

5. Manuscript Title

Appropriate Antibiotic Use for Acute Respiratory Tract Infections in Adults: Advice for High Value Care from the American College of Physicians and the Centers for Disease Control and Prevention

6. Manuscript Identifying Number (if you know it)

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

Are there any relevant conflicts of interest? ☐ Yes ☒ No

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Are there any relevant conflicts of interest? ☐ Yes ☒ No

### Section 4. Intellectual Property -- Patents & Copyrights

Do you have any patents, whether planned, pending or issued, broadly relevant to the work? ☐ Yes ☒ No

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#### 4. Intellectual Property.

This section asks about patents and copyrights, whether pending, issued, licensed and/or receiving royalties.

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## ICMJE Form for Disclosure of Potential Conflicts of Interest

### Section 1. Identifying Information

1. Given Name (First Name)  
Kelley

2. Surname (Last Name)  
Skeff

3. Date  
03-December-2015

4. Are you the corresponding author?

☐ Yes

☒ No

Corresponding Author's Name  
Aaron Harris

5. Manuscript Title  
Appropriate Antibiotic Use for Acute Respiratory Tract Infections in Adults: Advice for High Value Care from the American College of Physicians and the Centers for Disease Control and Prevention"

6. Manuscript Identifying Number (if you know it)

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Are there any relevant conflicts of interest? ☐ Yes ☒ No

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Are there any relevant conflicts of interest? ☐ Yes ☒ No

### Section 4. Intellectual Property -- Patents & Copyrights

Do you have any patents, whether planned, pending or issued, broadly relevant to the work? ☐ Yes ☒ No

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Dr. Skeff has nothing to disclose.

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### Section 1. Identifying Information

1. Given Name (First Name)  
John

2. Surname (Last Name)  
Biebelhausen

3. Date  
10-December-2015

4. Are you the corresponding author?

☐ Yes ☒ No

Corresponding Author's Name  
Aaron M. Harris

5. Manuscript Title

Appropriate Antibiotic Use for Acute Respiratory Tract Infections in Adults: Advice for High Value Care from the American College of Physicians and the Centers for Disease Control and Prevention

6. Manuscript Identifying Number (if you know it)

M15-1840

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### Section 1. Identifying Information

1. Given Name (First Name) Feinberg	2. Surname (Last Name) Lawrence	3. Date 07-December-2015
4. Are you the corresponding author? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Corresponding Author's Name Aaron M. Harris, MD
5. Manuscript Title Appropriate Use of Antibiotics for Respiratory Tract Infections in Adults: ....		
6. Manuscript Identifying Number (if you know it) M15-1840		

### Section 2. The Work Under Consideration for Publication

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

Are there any relevant conflicts of interest? ☐ Yes ☒ No

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Dr. Lawrence has nothing to disclose.

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