

ICMJE Form for Disclosure of Potential Conflicts of Interest

Instructions

The purpose of this form is to provide readers of your manuscript with information about your other interests that could influence how they receive and understand your work. The form is designed to be completed electronically and stored electronically. It contains programming that allows appropriate data display. Each author should submit a separate form and is responsible for the accuracy and completeness of the submitted information. The form is in six parts.

1. Identifying information.

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4. Intellectual Property.

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

5. Relationships not covered above.

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name) Charlene

2. Surname (Last Name) McEvoy

3. Date 11-February-2016

4. Are you the corresponding author? Yes No Corresponding Author's Name Roberto Benzo

5. Manuscript Title "Health Coaching and COPD Re-hospitalization: a randomized study".

6. Manuscript Identifying Number (if you know it) Blue-201512-2503OC

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Are there any relevant conflicts of interest? Yes No

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Name of Institution/Company	Grant?	Personal Fees?	Non-Financial Support?	Other?	Comments
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I was funded by the NIH grant disclosed
Charlene McEvoy
2/11/16

Evaluation and Feedback

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Section 1. Identifying Information

1. Given Name (First Name) John	2. Surname (Last Name) Connett	3. Date 11-February-2016
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Roberto Benzo
5. Manuscript Title "Health Coaching and COPD Re-hospitalization: a randomized study".		
6. Manuscript Identifying Number (if you know it) Blue-201512-2503OC		

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*no conflict of interests
John Connett PhD
2/12/16*

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Section 1. Identifying Information

1. Given Name (First Name) Johanna

2. Surname (Last Name) Hoult

3. Date 11-February-2016

4. Are you the corresponding author? Yes No Corresponding Author's Name Roberto Benzo

5. Manuscript Title "Health Coaching and COPD Re-hospitalization: a randomized study".

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*nothing to disclose other than the NIH grant
Johanna Hoult
2/11/16*

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Section 1. Identifying Information

1. Given Name (First Name) Kate 2. Surname (Last Name) Lorig 3. Date 11-February-2016

4. Are you the corresponding author? Yes No Corresponding Author's Name
Roberto Benzo

5. Manuscript Title
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NIH	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	(NHBLI) R01HL094680 (PI Roberto Benzo)
Royalties from Bull Publishing Company	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	The study used the self management book I wrote

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I received consulting fees received to help develop the intervention as part of the NIH grant and the royalties from Bull Publishing Company as disclosed above
Kate Lorig
2/11/16

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1. Given Name (First Name) Kristin

2. Surname (Last Name) Vickers

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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)
Pamela

2. Surname (Last Name)
Neuenfeldt

3. Date
10-February-2016

4. Are you the corresponding author?

Yes No

Corresponding Author's Name
Roberto Benzo

5. Manuscript Title
Health Coaching and COPD Re-hospitalization: a randomized study

6. Manuscript Identifying Number (if you know it)

unk

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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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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Ms. Neuenfeldt has nothing to disclose.

Sandra Neuenfeldt
10 Feb 2016

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)
Paul

2. Surname (Last Name)
Novotny

3. Date
11-February-2016

4. Are you the corresponding author? Yes No
Corresponding Author's Name
Roberto Benzo

5. Manuscript Title
"Health Coaching and COPD Re-hospitalization: a randomized study".

6. Manuscript Identifying Number (if you know it)
Blue-201512-2503OC

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Are there any relevant conflicts of interest? Yes No

If yes, please fill out the appropriate information below. If you have more than one entity press the "ADD" button to add a row. Excess rows can be removed by pressing the "X" button.

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NIH	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	(NHBLI) R01HL094680 (PI Roberto Benzo)

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Section 4. Intellectual Property -- Patents & Copyrights

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ICMJE Form for Disclosure of Potential Conflicts of Interest

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nothing to disclose other than the NIH grant noted above
Paul Novotny
2/11/16

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name) Roberto 2. Surname (Last Name) Benzo 3. Date 11-February-2016

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I was the principal investigator in the grant disclosed
Roberto Benzo
Feb 11, 2016

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name) Sharon 2. Surname (Last Name) Tucker 3. Date 11-February-2016

4. Are you the corresponding author? Yes No Corresponding Author's Name
Roberto Benzo

5. Manuscript Title
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6. Manuscript Identifying Number (if you know it)
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I was funded by the NIH grant noted above
Sharon Tucker
2/11/16

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