

## ICMJE Form for Disclosure of Potential Conflicts of Interest

### Instructions

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#### 1. Identifying information.

#### 2. The work under consideration for publication.

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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)  
Marina

2. Surname (Last Name)  
Mourtzakis

3. Date  
15-August-2017

4. Are you the corresponding author?  Yes  No

5. Manuscript Title  
Skeletal Muscle Ultrasound in Critical Care: A Tool in Need of Translation

6. Manuscript Identifying Number (if you know it)  
White-201612-967PS.R5

### 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.)?

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Are there any relevant conflicts of interest?  Yes  No

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## ICMJE Form for Disclosure of Potential Conflicts of Interest

### Section 1. Identifying Information

1. Given Name (First Name)  
Selina

2. Surname (Last Name)  
Parry

3. Date  
17-August-2017

4. Are you the corresponding author?

Yes  No

Corresponding Author's Name  
Marina Mourtazkis

5. Manuscript Title  
Skeletal muscle ultrasound in critical care: a tool in need of translation

6. Manuscript Identifying Number (if you know it)

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

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Dr. Parry has nothing to disclose.

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### Section 1. Identifying Information

1. Given Name (First Name)  
Bronwen

2. Surname (Last Name)  
Connolly

3. Date  
15-August-2017

4. Are you the corresponding author?

Yes  No

Corresponding Author's Name  
Marina Mourtzakis

5. Manuscript Title  
Skeletal Muscle Ultrasound in Critical Care: A Tool in Need of Translation

6. Manuscript Identifying Number (if you know it)  
White-201612-967PS.R5

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Dr. Connolly has nothing to disclose.

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15-August-2017

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Marina Mourtzakis

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White-201612-967PS.R5

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If yes, please fill out the appropriate information below.

Name of Entity	Grant?	Personal Fees?	Non-Financial Support?	Other?	Comments
GlaxoSmithKleine	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Specialist Advisory Board Membership
Fresenius Kabi	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Specialist Advisory Board Membership
Lyric Pharmaceuticals	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Consultancy

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Dr. Puthuchery reports personal fees and other from GlaxoSmithKleine, personal fees and other from Fresenius Kabi, personal fees and other from Lyric Pharmaceuticals, outside the submitted work; .

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