— Instructions —

ICMJE Form for Disclosure of Potential Conflicts of Interest

Each author of the manuscript must separately complete and save this form using his or her name in the file name. Each author's completed form must then be uploaded with the manuscript.

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 in four parts:

Section 1. Identifying information

Enter your full name and provide the manuscript title.

Section 2. The work under consideration for publication

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Section 4. Other relationships

Section 1. Identifying Information 1. Given Name _____Juan____ 2. Surname _____Erquicia_____ 3. Are you the corresponding author? Yes No x 4. Effective Date _____01/02/2018____ 5. Manuscript Title ____ 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...)? Complete each item by typing an X in answer yes or not and completing the information requested if an answer is Yes. If you have more than one relationship, add lines. 1. Grant _x__No ___Yes, money paid to you ___Yes, money paid to institution* Name of entity___ Comments†___ 2. Consulting fee or honorarium x No Yes, money paid to you Yes, money paid to institution* Name of entity Comments† 3. Support for travel to meetings for the study or other purposes x_No __Yes, money paid to you __Yes, money paid to institution* Name of entity___ Comments† 4. Fees for participation in review activities such as data monitoring boards, statistical analysis, end-point committees, and the like x No Yes, money paid to you Yes, money paid to institution* Name of entity Comments† 5. Payment for writing or reviewing the manuscript _x__No ___Yes, money paid to you ___Yes, money paid to institution* Name of entity___ Comments†____ 6. Provision of writing assistance, medicines, equipment, or administrative support x No Yes, money paid to you Yes, money paid to institution* Name of entity Comments† 7. Other _x_No ___Yes, money paid to you ___Yes, money paid to institution* Name of entity___

Comments†

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1. Board membership	
_xNoYes, money paid to youYes, money paid to institution* Name of entity	Comments
2. Consultancy	
_xNoYes, money paid to youYes, money paid to institution* Name of entity	Comments
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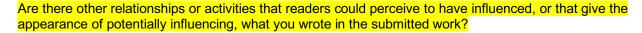
Given Name _Juan Carlos_ 2. SurnameMonllau_ Are you the corresponding author? Yes No_x
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_xNoYes, money paid to youYes, money paid to institution* Name of entity 0	Comments				
2. Consultancy					
_xNoYes, money paid to youYes, money paid to institution* Name of entity 0	Comments				
3. Employment					
_xNoYes, money paid to youYes, money paid to institution* Name of entity 0	Comments				
4. Expert testimony					
_xNoYes, money paid to youYes, money paid to institution* Name of entity 0	Comments				
5. Grants/grants pending					
_xNoYes, money paid to youYes, money paid to institution* Name of entity 0	Comments				
6. Payment for lectures including service on speakers bureaus					
_xNoYes, money paid to youYes, money paid to institution* Name of entity 0	Comments				
7. Payment for manuscript preparation					
_xNoYes, money paid to youYes, money paid to institution* Name of entity 0	Comments				
8. Patents (planned, pending or issued)					
_xNoYes, money paid to youYes, money paid to institution* Name of entity 0	Comments				
9. Royalties					
_xNoYes, money paid to youYes, money paid to institution* Name of entity 0	Comments				
10. Payment for development of educational presentations					
_xNoYes, money paid to youYes, money paid to institution* Name of entity 0	Comments				
11. Stock/stock options					
_xNoYes, money paid to youYes, money paid to institution* Name of entity 0	Comments				
12. Travel/accommodations/ meeting expenses unrelated to activities listed**					
_xNoYes, money paid to youYes, money paid to institution* Name of entity 0	Comments				
13. Other (err on the side of full disclosure)					

x	_No _	Yes, money paid to you	_Yes, money paid to institution*	Name of entity	Comments

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

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

The International Committee of Medical Journal Editors