

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.

Identifying information.

The work under consideration for publication.

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3. Relevant financial activities outside the submitted work.

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4. Intellectual Property.

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

Relationships not covered above.

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Pending: The patent has been filed but not issued **Issued:** The patent has been issued by the agency

Lizanzada The materat has been licensed to an entit

Licensed: The patent has been licensed to an entity, whether earning royalties or not

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

Hoffman 1



Section 1. Identifying Inform	nation	
1. Given Name (First Name) Eric	2. Surname (Last Name) Hoffman	3. Date 21-February-2018
4. Are you the corresponding author?	☐ Yes ✓ No	Corresponding Author's Name Elizabeth C. Oelsner
5. Manuscript TitlePrognostic Significance of Large AirwayStudy of Atherosclerosis (MESA) Lung S6. Manuscript Identifying Number (if you known the White-201710-820OC	tudy	d Tomography in the General Population. The Multi-Ethnic
Section 2. The Work Under Co	onsideration for Public	ation
any aspect of the submitted work (including statistical analysis, etc.)? Are there any relevant conflicts of intere If yes, please fill out the appropriate info	y but not limited to grants, da est? Yes No ormation below. If you hav	a third party (government, commercial, private foundation, etc.) for ta monitoring board, study design, manuscript preparation, e more than one entity press the "ADD" button to add a row.
Excess rows can be removed by pressin		n-Financial Comments
Name of Institution/Company	Grant	Other Comments
NIH	V	SPIROMICS and MESA Lung
Section 3. Relevant financial	activities outside the s	ubmitted work.
of compensation) with entities as descr	ibed in the instructions. Us port relationships that wer est?	ether you have financial relationships (regardless of amount e one line for each entity; add as many lines as you need by e present during the 36 months prior to publication .
Name of Entity	Grant	o-Financial other? Comments
/IDA Diagnostics		Founder and Share Holder

Hoffman 2



Section 4. Intellectual Property Patents & Copyrights				
Do you have any patents, whether planned, pending or issued, broadly relevant to the work? Yes Vo				
Section 5. Relationships not covered above				
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?				
Yes, the following relationships/conditions/circumstances are present (explain below):				
✓ No other relationships/conditions/circumstances that present a potential conflict of interest				
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.				
Section 6. Disclosure Statement				
Based on the above disclosures, this form will automatically generate a disclosure statement, which will appear in the box below.				
Eric A. Hoffman, PhD is a founder and shareholder of VIDA Diagnostics, a company commercializing lung image analysis software developed, in part, at the University of Iowa.				

Evaluation and Feedback

 $Please\ visit\ \underline{http://www.icmje.org/cgi-bin/feedback}\ to\ provide\ feedback\ on\ your\ experience\ with\ completing\ this\ form.$

Hoffman 3



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patent

Manichaikul 1



Section 1.	Identifying Inform	nation	
1. Given Name (Fi Ani	rst Name)	2. Surname (Last Name) Manichaikul	3. Date 16-February-2018
4. Are you the cor	responding author?	Yes ✓ No	Corresponding Author's Name Elizabeth C Oelsner
		•	Tomography in the General Population. The Multi-Ethnic
	ntifying Number (if you kr	•	
Section 2.	The Work Under Co	onsideration for Public	ation
any aspect of the s statistical analysis,	ubmitted work (including	but not limited to grants, dat	a third party (government, commercial, private foundation, etc.) for a monitoring board, study design, manuscript preparation,
Section 3.	Relevant financial	activities outside the s	ubmitted work.
of compensation clicking the "Add	n) with entities as descri I +" box. You should rep	bed in the instructions. Us port relationships that wer	ether you have financial relationships (regardless of amount e one line for each entity; add as many lines as you need by e present during the 36 months prior to publication.
Are there any rel	evant conflicts of intere	est? Yes ✓ No	
Section 4			
Section 4.	Intellectual Proper	ty Patents & Copyrig	hts
Do you have any	patents, whether plan	ned, pending or issued, bro	oadly relevant to the work? ☐ Yes ✓ No

Manichaikul 2



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Dr. Manichaikul has nothing to disclose.

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Manichaikul 3



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Smith 1



Section 1.	Identifying Inform	ation				
1. Given Name (Fi Benjamin	irst Name)	2. Surname Smith	e (Last Name	2)		3. Date 14-February-2018
4. Are you the cor	responding author?	Yes	√ No	Correspond	ding Autho	or's Name
			s on Comp	uted Tomograp	hy in the	General Population. The Multi-Ethnic
6. Manuscript Ide White-201710-8	ntifying Number (if you kn 200C	ow it)				
Section 2.	The Work Under Co	onsideratio	on for Pul	blication		
any aspect of the s statistical analysis,	submitted work (including	but not limit	ed to grants	, data monitoring		ent, commercial, private foundation, etc.) for udy design, manuscript preparation,
If yes, please fill		rmation be	low. If you		one enti	ty press the "ADD" button to add a row.
Name of Institut	tion/Company	Grant?	Personal I	Non-Financial Support	Other?	Comments
National Institutes of	Health	✓				R01-HL130506
Section 3.	Relevant financial	activities o	outside th	e submitted	work.	
of compensation clicking the "Add Are there any rel	n) with entities as descri	bed in the incort relation	nstructions ships that ves \tag \tag \tag \tag \tag \tag \tag \ta	. Use one line fo were present d	or each er	cial relationships (regardless of amount ntity; add as many lines as you need by a 36 months prior to publication .
Name of Entity		Grant?	Personal Fees?	Non-Financial Support?	Other?	Comments
Quebec Health Resea	arch Fund	✓				FRQS Junior 1 Salary Award
AstraZeneca		✓				Investigator-initiated trial operating grant
McGill University Heanstitute	alth Center Research	✓				Operating grant

Smith 2



Section 4. Intellectual Property Patents & Copyrights	
Do you have any patents, whether planned, pending or issued, broadly relevant to the work? Yes V No	
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Section 6. Disclosure Statement	
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Dr. Smith reports grants from National Institutes of Health (R01-HL130506), during the conduct of the study; and grants from Quebec Health Research Fund (research salary support), Research Institute of the McGill University Health Center (operating support), and AstraZeneca (investigator-inititiated, industry supported trial), outside the submitted work.	

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Burke 1



Section 1.	Identifying Inform	nation		
1. Given Name (Fi	rst Name)	2. Surname (Last Name) Burke		3. Date 16-February-2018
4. Are you the cor	responding author?	Yes ✓ No	Corresponding Author's Nar Oelsner	ne
		-	d Tomography in the Gener	ral Population. The Multi-Ethnic
6. Manuscript Ider White-201710-82	ntifying Number (if you kr 20OC	now it)		
			_	
Section 2.	The Work Under Co	onsideration for Public	ation	
any aspect of the s statistical analysis,	ubmitted work (including	but not limited to grants, da	a third party (government, cor ta monitoring board, study des	mmercial, private foundation, etc.) for sign, manuscript preparation,
Section 3.	Relevant financial	activities outside the s	ubmitted work.	
of compensation clicking the "Add	the appropriate boxes i) with entities as descri	n the table to indicate wholes bed in the instructions. Us port relationships that wer	ether you have financial rela e one line for each entity; a	ationships (regardless of amount dd as many lines as you need by nonths prior to publication.
Section 4.	Intellectual Proper	rty Patents & Copyrig	ıhts	
Do you have any			oadly relevant to the work?	☐ Yes 🗸 No

Burke 2



Section 5.			
Section 5.	Relationships not covered above		
	elationships or activities that readers could perceive to have influenced, or that give the appearance of encing, what you wrote in the submitted work?		
Yes, the follo	wing relationships/conditions/circumstances are present (explain below):		
✓ No other rela	tionships/conditions/circumstances that present a potential conflict of interest		
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Section 6.	Disclosure Statement		
Based on the abo below.	ove disclosures, this form will automatically generate a disclosure statement, which will appear in the box		
Dr. Watson has r	nothing to disclose.		

Evaluation and Feedback

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Burke 3



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Michos 1



Section 1. Identifying Inform	ation		
1. Given Name (First Name) Erin	2. Surname (Last Nam Michos	e)	3. Date 14-February-2018
4. Are you the corresponding author?	Yes No		
 5. Manuscript Title Prognostic Significance of Large Airway Study of Atherosclerosis (MESA) Lung St 6. Manuscript Identifying Number (if you kn White-201710-820OC 	tudy	outed Tomograp	ohy in the General Population. The Multi-Ethnic
Section 2. The Work Under Co	onsideration for Pu	blication	
	but not limited to grant	s, data monitoring	(government, commercial, private foundation, etc.) for g board, study design, manuscript preparation,
Section 3. Relevant financial	activities outside tl	ne submitted	work.
of compensation) with entities as descri	bed in the instructions port relationships that st?	s. Use one line fo	ave financial relationships (regardless of amount or each entity; add as many lines as you need by luring the 36 months prior to publication.
Name of Entity	Grant? Personal Fees?	Non-Financial Support?	Other? Comments
Siemens Healthcare Diagnostics			Honorarium for being a blinded adjudicator in a clinical trial
BioQuest Global			Honorarium for International Speaker lecture
Section 4. Intellectual Proper Do you have any patents, whether plans			ant to the work? ☐ Yes 📝 No

Michos 2



Section 5. Relationships not severed above
Relationships not covered above
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Dr. Michos reports personal fees from Siemens Healthcare Diagnostics, personal fees from BioQuest Global, outside the submitted work; .

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Michos 3



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

Kaufman 1



Section 1.	Identifying Inform	ation		
1. Given Name (Fi	rst Name)	2. Surname (Last Name) Kaufman		3. Date 16-February-2018
4. Are you the cor	responding author?	Yes ✓ No	Corresponding Author's Nam Oelsner	ne
		•	d Tomography in the Genera	al Population. The Multi-Ethnic
6. Manuscript Ider White-201710-82	ntifying Number (if you kr 200C	now it)		
Section 2.	The Work Under Co	onsideration for Public	ation	
any aspect of the s statistical analysis,	ubmitted work (including	but not limited to grants, dat	a third party (government, com ta monitoring board, study des	nmercial, private foundation, etc.) for ign, manuscript preparation,
Section 3.				
Section 5.	Relevant financial	activities outside the s	ubmitted work.	
of compensation) with entities as descri	bed in the instructions. Us	e one line for each entity; ac	tionships (regardless of amount dd as many lines as you need by onths prior to publication.
Are there any rel	evant conflicts of intere	est?	-	
	ı			
Section 4.	Intellectual Proper	ty Patents & Copyrig	hts	
Do you have any	patents, whether plan	ned, pending or issued, bro	oadly relevant to the work?	☐ Yes 🗸 No

Kaufman 2



Section 5.						
Section 5.	Relationships not covered above					
	elationships or activities that readers could perceive to have influenced, or that give the appearance of ncing, what you wrote in the submitted work?					
Yes, the follow	Yes, the following relationships/conditions/circumstances are present (explain below):					
✓ No other relat	cionships/conditions/circumstances that present a potential conflict of interest					
	nuscript acceptance, journals will ask authors to confirm and, if necessary, update their disclosure statements nals may ask authors to disclose further information about reported relationships.					
Section 6.	Disclosure Statement					
Based on the abo below.	ve disclosures, this form will automatically generate a disclosure statement, which will appear in the box					
Dr. Watson has n	othing to disclose.					

Evaluation and Feedback

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Kaufman 3



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Nguyen 1



Section 1.	Identifying Inform	nation				
1. Given Name (Fi	rst Name)	2. Surname (Last Name) Nguyen	_	3. Date 16-February-2018		
4. Are you the corresponding author?		Yes ✓ No	Corresponding Author's Name	e		
		•	I Tomography in the Genera	al Population. The Multi-Ethnic		
6. Manuscript Ider White-201710-82	ntifying Number (if you kr 200C	now it)				
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Section 3.	Relevant financial	activities outside the s	ubmitted 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 publication . Are there any relevant conflicts of interest? Yes Yes No						
Section 4.	Intellestual Duame	itu. Dotouto 9 Commin	hee			
		ty Patents & Copyrig				
Do you have any patents, whether planned, pending or issued, broadly relevant to the work? Yes Vo						

Nguyen 2



Section 5.				
	Relationships not covered above			
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?				
Yes, the follo	wing relationships/conditions/circumstances are present (explain below):			
✓ No other rela	tionships/conditions/circumstances that present a potential conflict of interest			
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Rotter 1



Section 1.	Identifying Inform	nation				
, ,		2. Surname (Last Name) Rotter	3. Date 16-February-2018			
4. Are you the corresponding author?		Yes ✓ No	Corresponding Author's Name Oelsner			
		•	d Tomography in the General Population. The Multi-Ethnic			
6. Manuscript Ide White-201710-8	ntifying Number (if you kr 200C	now it)				
Section 2.	The Work Under Co	onsideration for Public	ation			
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						
Section 3.	Relevant financial	activities outside the s	ubmitted work.			
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Section 4.	Intellectual Drawer	ity. Potonto 9 Commin	late			
		ty Patents & Copyrig				
Do you have any	patents, whether plan	ned, pending or issued, bro	oadly relevant to the work? Yes Vo			

Rotter 2



Section 5.	
Section 5.	Relationships not covered above
	elationships or activities that readers could perceive to have influenced, or that give the appearance of ncing, what you wrote in the submitted work?
Yes, the follow	ving relationships/conditions/circumstances are present (explain below):
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Schwartz 1



Section 1. Identifying Inform	nation					
Given Name (First Name) Joseph	2. Surname (Last Name) Schwartz	3. Date 16-February-2018				
4. Are you the corresponding author? Yes Volume No		Corresponding Author's Name Oelsner				
5. Manuscript Title Prognostic Significance of Large Airway Dimensions on Computed Tomography in the General Population. The Multi-Ethnic Study of Atherosclerosis (MESA) Lung Study 6. Manuscript Identifying Number (if you know it) White-201710-820OC						
Section 2. The Work Under C	onsideration for Public	ation				
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Section 3. Polovant financial	activities outside the s	ubmitted work				
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Section 4. Intellectual Prope	rty Patents & Copyrig	yhts				
Do you have any patents, whether plan	ned, pending or issued, bro	oadly relevant to the work? Yes V No				

Schwartz 2



Section 5.				
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Watson 1



Section 1. Identifying Inform	nation					
1. Given Name (First Name) Karol 2. Surname (Last Name) Watson			3. Date 16-February-2018			
4. Are you the corresponding author? Yes Vo		Corresponding Author's Name				
5. Manuscript Title Prognostic Significance of Large Airway Dimensions on Computed Tomography in the General Population. The Multi-Ethnic Study of Atherosclerosis (MESA) Lung Study 6. Manuscript Identifying Number (if you know it) White-201710-820OC						
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Section 4. Intellectual Proper	rty Patents & Copyrig	ıhts				
Do you have any patents, whether plan			Yes No			

Watson 2



Section 5. Relationships not sovered above
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pert testimony, employment, or other affiliations patent

pn-Financial Support: Examples include drugs/equipment

Donohue 1



Section 1.	Identifying Inform	nation			
1. Given Name (First Name) Kathleen		2. Surname (Last Name) Donohue	3. Date 14-February-2018		
4. Are you the corresponding author?		☐ Yes ✓ No	Corresponding Author's Name		
5. Manuscript Title Prognostic Significance of Large Airway Dimensions on Computed Tomography in the General Population. The Multi-Ethnic Study of Atherosclerosis (MESA) Lung Study 6. Manuscript Identifying Number (if you know it) White-201710-820OC					
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Section 3.	Relevant financial	activities outside the s	ubmitted work.		
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Section 4.	Intellectual Proper	rty Patents & Copyrig	hts		
Do you have any	patents, whether plan	ned, pending or issued, bro	oadly relevant to the work? Yes V No		

Donohue 2



Section 5. Relationships not sovered above
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Donohue 3



Instructions

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4. Intellectual Property.

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

Relationships not covered above.

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Other: Anything not covered under the previous three boxes

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

Barr 1



Section 1. Identifying Inf	formation					
Identifying Information						
1. Given Name (First Name) R Graham	2. Surname (Last Name) Barr	3. Date 16-February-2018				
4. Are you the corresponding author?	☐ Yes ✓ No	Corresponding Author's Name Oelsner				
5. Manuscript Title Prognostic Significance of Large Air	rway Dimensions on Compute	ed Tomography in the General Population				
6. Manuscript Identifying Number (if yo White-201710-820OC	ou know it)					
Section 2. The Work Unde	er Consideration for Public	cation				
any aspect of the submitted work (inclustatistical analysis, etc.)?	uding but not limited to grants, da	n a third party (government, commercial, private foundation, etc.) for ata monitoring board, study design, manuscript preparation,				
Are there any relevant conflicts of in		we make than one entity proce the "ADD" button to add a row				
Excess rows can be removed by pre		ve more than one entity press the "ADD" button to add a row.				
Name of Institution/Company	Grant	n-Financial Other? Comments				
NIH						
Section 3. Polovant finance						
Relevant finance	cial activities outside the s	submitted work.				
of compensation) with entities as d	escribed in the instructions. Used the described in the instructions that we nterest?	nether you have financial relationships (regardless of amount lese one line for each entity; add as many lines as you need by ere present during the 36 months prior to publication.				
of compensation) with entities as declicking the "Add +" box. You should Are there any relevant conflicts of in	escribed in the instructions. Used report relationships that we need that we need to be information below. Grant Personal No.	se one line for each entity; add as many lines as you need by				
of compensation) with entities as declicking the "Add +" box. You should Are there any relevant conflicts of in If yes, please fill out the appropriate	escribed in the instructions. Used report relationships that we need that we need to be information below. Grant Personal No.	se one line for each entity; add as many lines as you need by the present during the 36 months prior to publication. n-Financial Other? Comments				
of compensation) with entities as declicking the "Add +" box. You should have there any relevant conflicts of in If yes, please fill out the appropriate Name of Entity	escribed in the instructions. Used report relationships that we need that we need to be information below. Grant? Personal Fees? S	se one line for each entity; add as many lines as you need by the present during the 36 months prior to publication. n-Financial Other? Comments				

Barr 2



Name of Entity	Grant? Personal Fees?	Non-Financial Support?	Other? Comments			
JpToDate			Royalties			
Section 4. Intellectual Proper	ty Patents & Cop	yrights				
Do you have any patents, whether planr	ned, pending or issued	d, broadly relevan	at to the work? ☐ Yes 🗸	No		
Section 5. Relationships not o	covered above					
Are there other relationships or activities potentially influencing, what you wrote			ifluenced, or that give the app	oearance of		
Yes, the following relationships/cond	ditions/circumstances	are present (expl	lain below):			
✓ No other relationships/conditions/ci	rcumstances that pres	sent a potential co	onflict of interest			
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.						
Section 6. Disclosure Stateme	ent					
Based on the above disclosures, this form will automatically generate a disclosure statement, which will appear in the box below.						
Dr. Barr reports grants from NIH during the conduct of the study; grants from Alpha1 Foundation, Foundation for the NIH, and COPD Foundation and personal fees from UpToDate outside the submitted work.						

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

Oelsner 1



Section 1.	Identifying Inform	ation					
Given Name (First Name) Elizabeth		2. Surname (Last Name) Oelsner			3. Date 21-September-2017		
4. Are you the cor	responding author?	✓ Yes [No				
Prognostic Signi Study of Atheros	 5. Manuscript Title Prognostic Significance of Large Airway Dimensions on Computed Tomography in the General Population. The Multi-Ethnic Study of Atherosclerosis (MESA) Lung Study. 6. Manuscript Identifying Number (if you know it) 						
	ı						
Section 2.	The Work Under Co	onsideratio	n 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							
Section 3.	Relevant financial	activities o	utside the submitted v	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 publication . Are there any relevant conflicts of interest? Yes Vo							
Section 4.							
Section 4.	Intellectual Proper	ty Patent	s & Copyrights				
Do you have any	patents, whether plan	ned, pending	or issued, broadly relevar	nt to the work?	Yes 🗸 No		

Oelsner 2



Section 5.	Relationships not covered above						
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?							
Yes, the follo	Yes, the following relationships/conditions/circumstances are present (explain below):						
✓ No other rela	tionships/conditions/circumstances that present a potential conflict of interest						
	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.						
Section 6.	Disclosure Statement						
Based on the abo	ove disclosures, this form will automatically generate a disclosure statement, which will appear in the box						
Dr. Oelsner has i	nothing to disclose.						

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Folsom 1



Section 1.	Identifying Inform	nation				
1. Given Name (First Name)Aaron4. Are you the corresponding author?		2. Surname (Last Name) Folsom	3. Date 15-February-2018			
		Yes ✓ No	Corresponding Author's Nam Elizabeth C. Oelsner	ne		
		-	d Tomography in the Genera	al Population. The Multi-Ethnic		
	ntifying Number (if you kr					
Section 2.	The Work Under Co	onsideration for Public	ation			
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						
	l .					
Section 3.	Relevant financial	activities outside the s	ubmitted work.			
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Are there any rel	evant conflicts of intere	est? Yes ✓ No				
	l.					
Section 4.	Intellectual Proper	rty Patents & Copyrig	hts			
Do you have any patents, whether planned, pending or issued, broadly relevant to the work? Yes Vo						

Folsom 2



Section 5.							
Section 5.	Relationships not covered above						
	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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Jacobs 1



Section 1.	Identifying Inform	nation				
1. Given Name (Fi	rst Name)	2. Surname (Last Name) Jacobs	3. Date 16-February-2018			
4. Are you the corresponding author?		Yes ✓ No	Corresponding Author's Name	e		
5. Manuscript Title Prognostic Significance of Large Airway Dimensions on Computed Tomography in the General Population. The Multi-Ethnic Study of Atherosclerosis (MESA) Lung Study						
6. Manuscript Ider White-201710-82	ntifying Number (if you kr 200C	now 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 Vo						
Section 3.						
Section 5.	Relevant financial	activities outside the s	ubmitted work.			
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Are there any relevant conflicts of interest? Yes Vo						
	ı					
Section 4.	Intellectual Proper	ty Patents & Copyrig	hts			
Do you have any patents, whether planned, pending or issued, broadly relevant to the work? Yes Vo						

Jacobs 2



Section 5. Relationships not severed above
Relationships not covered above
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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Dr. Jacobs has nothing to disclose.

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Kalhan 1



	Section 1. Identifying Informa	ation			
	Given Name (First Name) Ravi	Surname (Last Name) Kalhan		3. Date 16-February-2018	
	4. Are you the corresponding author?	☐ Yes ✓ No	Corresponding Autho	r's Name	
	 Manuscript Title Prognostic Significance of Large Airway Study of Atherosclerosis (MESA) Lung St Manuscript Identifying Number (if you know White-201710-820OC 	udy	Tomography in the	General Population. The Multi-Eth	nic
	Section 2. The Work Under Co	nsideration for Public	ation		
	Did you or your institution at any time received any aspect of the submitted work (including least statistical analysis, etc.)? Are there any relevant conflicts of interest	ve payment or services from a but not limited to grants, dat	a third party (governme	•	c.) for
	Section 3. Relevant financial a	activities outside the s	ubmitted work.		
	Place a check in the appropriate boxes in of compensation) with entities as described clicking the "Add +" box. You should report there any relevant conflicts of interest lf yes, please fill out the appropriate information.	oed in the instructions. Use ort relationships that were st?	e one line for each en	tity; add as many lines as you need	d by
	Name of Entity	Grant? Personal Non	-Financial other?	Comments	
Α	ptus Health				
В	oston Scientific				
A	CCP Enterprises				
A	straZeneca				
C	VS Caremark				
P	ri-Med				
G	laxoSmithKline	✓			
В	TG-PneumRx				

Kalhan 2



Name of Entity	Grant? Personal Fees?	Non-Financial Support?	Other? Comments	s				
Spiration	✓							
Section 4. Intellectual Proper	ty Patents & Co	pyrights						
Do you have any patents, whether planned, pending or issued, broadly relevant to the work? Yes Volume								
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Section 6. Disclosure Stateme	ent							
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Dr. Kalhan reports personal fees from Aptus Health, personal fees from Boston Scientific, personal fees from ACCP Enterprises, personal fees from AstraZeneca, from CVS Caremark, personal fees from Pri-Med, grants from GlaxoSmithKline, grants from BTG-PneumRx, grants from Spiration, outside the submitted work; .								

Evaluation and Feedback

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Kalhan 3