

ICMJE Form for Disclosure of Potential Conflicts of Interest

Instructions

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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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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

ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name) Cox	2. Surname (Last Name) Christopher	3. Date 09-April-2018
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Blair Wendlandt
5. Manuscript Title Risk Factors for Post-Traumatic Stress Disorder in Family Caregivers of Patients with Chronic Critical Illness		
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

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Dr. Christopher 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) Shannon

2. Surname (Last Name) Carson

3. Date 05-April-2018

4. Are you the corresponding author? Yes No Corresponding Author's Name Blair Wendlandt

5. Manuscript Title Risk Factors for Post-Traumatic Stress Disorder in Family Caregivers of Patients with Chronic Critical Illness

6. Manuscript Identifying Number (if you know it) _____

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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.

Name of Institution/Company	Grant?	Personal Fees?	Non-Financial Support?	Other?	Comments
National Institute of Nursing Research	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

Section 3. Relevant financial activities outside the submitted work.

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Are there any relevant conflicts of interest? Yes No

Section 4. Intellectual Property -- Patents & Copyrights

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Dr. Carson reports grants from National Institute of Nursing Research, during the conduct of the study; .

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name) Agathe	2. Surname (Last Name) Ceppe	3. Date 16-March-2018
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Blair Wendlandt
5. Manuscript Title Risk Factors for Post-Traumatic Stress Disorder in Family Caregivers of Patients with Chronic Critical Illness		
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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Section 4. Intellectual Property -- Patents & Copyrights

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Ms. Ceppe 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)
Blair

2. Surname (Last Name)
Wendlandt

3. Date
18-April-2018

4. Are you the corresponding author? Yes No

5. Manuscript Title
Risk Factors for Post-Traumatic Stress Disorder in Family Caregivers of Patients with Chronic Critical Illness

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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Name of Institution/Company	Grant?	Personal Fees?	Non-Financial Support?	Other?	Comments
National Institutes of Health	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Institutional T32 Grant 2Y32HL007106-41
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

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Dr. Wendlandt reports grants from National Institutes of Health, from null, during the conduct of the study; .

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Section 1. Identifying Information

1. Given Name (First Name) Laura	2. Surname (Last Name) Hanson	3. Date 19-March-2018
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Blair Wendlandt
5. Manuscript Title Risk Factors for Post-Traumatic Stress Disorder in Family Caregivers of Patients with Chronic Critical Illness		
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Dr. Hanson has nothing to disclose.

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Section 1. Identifying Information

1. Given Name (First Name)

Judith

2. Surname (Last Name)

Nelson

3. Date

3/19/2018

4. Are you the corresponding author?

Yes No

5. Manuscript Title

Risk Factors for Post-Traumatic Stress Disorder in Family Caregivers of Patients with Chronic Critical Illness

6. Manuscript Identifying Number (if you know it)

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Are there any relevant conflicts of interest? Yes No

This work was supported in part by R01-NR012413 from the National Institutes of Health. I was a Co-Principal Investigator.

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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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1. Given Name (First Name) Marion	2. Surname (Last Name) Danis	3. Date 19-March-2018
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Blair Wendlandt
5. Manuscript Title Risk Factors for Post-Traumatic Stress Disorder in Family Caregivers of Patients with Chronic Critical Illness		
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

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Section 1. Identifying Information

1. Given Name (First Name)
Summer

2. Surname (Last Name)
Choudhury

3. Date
09-April-2018

4. Are you the corresponding author?

Yes No

Corresponding Author's Name
Blair Wendlandt

5. Manuscript Title
Risk Factors for Post-Traumatic Stress Disorder in Family Caregivers of Patients with Chronic Critical Illness

6. Manuscript Identifying Number (if you know it)

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Miss. Choudhury has nothing to disclose.

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