

#### **Instructions**

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Beitler 1



Section 1.	Identifying Inform	ation			
1. Given Name (Fil Jeremy R.	rst Name)	2. Surname (Last Nam Beitler	e)	3. Date 31-August-2018	
4. Are you the corresponding author?		☐ Yes ✓ No	Corresponding A Pratik Sinha	Author's Name	
5. Manuscript Title Physiological An		ormance of the Ventila	tory Ratio in Acute Re	espiratory Distress Syndrome	
6. Manuscript Ider Blue-201804-069	ntifying Number (if you kn 920C	ow it)			
	l				
Section 2.	The Work Under Co	onsideration for Pu	blication		
any aspect of the s statistical analysis, Are there any rela If yes, please fill c	ubmitted work (including etc.)? evant conflicts of intere	but not limited to grantest? Yes Normation below. If you	s, data monitoring boar	ernment, commercial, private foundation, etc.) for rd, study design, manuscript preparation, entity press the "ADD" button to add a row	
Name of Institut	ion/Company	Grant? Personal Fees?	Non-Financial Oth	er? Comments	
National Institutes of	Health	<b>✓</b>		NIH K23HL133489	_
Continue 2					
Section 3.	Relevant financial	activities outside tl	ne submitted worl	k.	
of compensation clicking the "Add Are there any rel	) with entities as descri	bed in the instructions port relationships that	s. Use one line for eac were <b>present during</b>	nancial relationships (regardless of amount ch entity; add as many lines as you need by <b>g the 36 months prior to publication</b> .	
Section 4.	Intellectual Proper	ty Patents & Cop	yrights		
Do you have any	patents, whether planr	ned, pending or issued	d, broadly relevant to	the work? Yes V No	

Beitler 2



Section 5. Relationships not severed above
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Dr. Beitler reports grants from National Institutes of Health, during the conduct of the study; .

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1. Given Name (First Name) Carolyn	2. Surname (Last Name) Calfee		3. Date 29-August-2018
4. Are you the corresponding author?	☐ Yes ✓ No	Corresponding Auth	or's Name
5. Manuscript Title Physiological Analysis and Clinical Perf	ormance of the Ventilatory	Ratio in Acute Respi	ratory Distress Syndrome
6. Manuscript Identifying Number (if you k Blue-201804-0692OC	now it)	_	
Section 2. The Work Under C	Consideration for Public	cation	
Did you or your institution <b>at any time</b> reco any aspect of the submitted work (includin statistical analysis, etc.)?			ent, commercial, private foundation, etc.) for tudy design, manuscript preparation,
Are there any relevant conflicts of inter	rest? 🗸 Yes 🗌 No		
If yes, please fill out the appropriate inf Excess rows can be removed by pressing	•	e more than one ent	ity press the "ADD" button to add a row.
Name of Institution/Company	Grant	n-Financial Other?	Comments
NIH	<b>✓</b>		
Section 3. Belower & Grand & G			
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Name of Entity	Grant? Personal No	n-Financial other?	Comments
GSK	<b>✓</b>		
Bayer	<b>✓</b>		
Roche/Genentech			consulting



Name of Entity	Grant?	Personal Fees?	Non-Financial Support?	Other?	Comments	
Boehringer Ingelheim		<b>✓</b>			consulting	
CSL Behring		$\checkmark$			consulting	
Prometic		<b>✓</b>			consulting	
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Intellectual Propert	y Pate	ents & Co <sub>l</sub>	pyrights			
Do you have any patents, whether plann	ed, pend	ing or issue	ed, broadly releva	nt to the	work? Yes 🗸 No	
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Dr. Calfee reports grants from NIH, during the conduct of the study; grants from GSK, grants and personal fees from Bayer, personal fees from Roche/Genentech, personal fees from Boehringer Ingelheim, personal fees from CSL Behring, personal fees from Prometic, outside the submitted work; .						



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Sinha 1



Section 1.	Identifying Inform	ation	
1. Given Name (Fii Pratik	rst Name)	2. Surname (Last Name) Sinha	3. Date 29-August-2018
4. Are you the cor	responding author?	✓ Yes No	
5. Manuscript Title Physiological An		rmance of the Ventilatory Ratio in Acut	e Respiratory Distress Syndrome
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Do you have any	patents, whether plan	ned, pending or issued, broadly relevan	t to the work? Yes V No

Sinha 2



Section 5.					
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SONI 1



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4. Are you the corresponding author?	Yes ✓ No	Corresponding Author's Name Pratik Sinha
5. Manuscript Title Physiological Analysis and Clinical Per	formance of the Ventilatory	Ratio in Acute Respiratory Distress Syndrome
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Report all sources of revenue paid (or promised to be paid) directly to you or your institution on your behalf over the 36 months prior to submission of the work. This should include all monies from sources with relevance to the submitted work, not just monies from the entity that sponsored the research. Please note that your interactions with the work's sponsor that are outside the submitted work should also be listed here. If there is any question, it is usually better to disclose a relationship than not to do so.

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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.

Use this section to report 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.

#### Definitions.

**Entity:** government agency, foundation, commercial sponsor, academic institution, etc.

**Grant:** A grant from an entity, generally [but not always] paid to your organization

**Personal Fees:** Monies paid to you for services rendered, generally honoraria, royalties, or fees for consulting, lectures, speakers bureaus, expert testimony, employment, or other affiliations

**Non-Financial Support:** Examples include drugs/equipment supplied by the entity, travel paid by the entity, writing assistance, administrative support, etc.

Other: Anything not covered under the previous three boxes

**Pending:** The patent has been filed but not issued

**Issued:** The patent has been issued by the agency

**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

Ho 1



Section 1.	Identifying Inform	nation		
1. Given Name (Fi	rst Name)	2. Surname (Last Name) Ho		3. Date 01-September-2018
4. Are you the corresponding author?		Yes ✓ No	Corresponding Author's Name Pratik Sinha	
5. Manuscript Title Physiological An		ormance of the Ventilatory	Ratio in Acute Respiratory [	Distress Syndrome
6. Manuscript Ider Blue-201804-069	ntifying Number (if you kr 920C	now it)		
Section 2.	The Work Under Co	onsideration for Public	cation	
any aspect of the s statistical analysis,	ubmitted work (including	g but not limited to grants, da	a third party (government, con ta monitoring board, study des	nmercial, private foundation, etc.) for sign, manuscript preparation,
Section 3.	Relevant financial	activities outside the s	submitted work.	
of compensation clicking the "Add	) with entities as descri	ibed in the instructions. Us port relationships that wer	se one line for each entity; ac	ntionships (regardless of amount dd as many lines as you need by onths prior to publication.
Section 4.	Intellectual Proper	rty Patents & Copyri <u>c</u>	yhts	
Do you have any	patents, whether plan	ned, pending or issued, br	oadly relevant to the work?	☐ Yes ✓ No

Ho 2



Section 5.					
Section 5.	Relationships not covered above				
	relationships 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	Yes, the following relationships/conditions/circumstances are present (explain below):				
✓ No other rela	tionships/conditions/circumstances that present a potential conflict of interest				
	anuscript acceptance, journals will ask authors to confirm and, if necessary, update their disclosure statements rnals 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				
Kelly Ho has not	hing to disclose.				

## **Evaluation and Feedback**

Please visit <a href="http://www.icmje.org/cgi-bin/feedback">http://www.icmje.org/cgi-bin/feedback</a> to provide feedback on your experience with completing this form.

Ho 3



#### **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.

# 2. The work under consideration for publication.

This section asks for information about the work that you have submitted for publication. The time frame for this reporting is that of the work itself, from the initial conception and planning to the present. The requested information is about resources that you received, either directly or indirectly (via your institution), to enable you to complete the work. Checking "No" means that you did the work without receiving any financial support from any third party -- that is, the work was supported by funds from the same institution that pays your salary and that institution did not receive third-party funds with which to pay you. If you or your institution received funds from a third party to support the work, such as a government granting agency, charitable foundation or commercial sponsor, check "Yes".

### Relevant financial activities outside the submitted work.

This section asks about your financial relationships with entities in the bio-medical arena that could be perceived to influence, or that give the appearance of potentially influencing, what you wrote in the submitted work. You should disclose interactions with ANY entity that could be considered broadly relevant to the work. For example, if your article is about testing an epidermal growth factor receptor (EGFR) antagonist in lung cancer, you should report all associations with entities pursuing diagnostic or therapeutic strategies in cancer in general, not just in the area of EGFR or lung cancer.

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



Section 1. Identifying Infor	mation			
1. Given Name (First Name) Michael	2. Surname (Last Name) Matthay		3. Date 29-August-2018	
4. Are you the corresponding author?	Yes No	Author's Name D		
5. Manuscript Title Physiological Analysis and Clinical Per	formance of the Ventilato	ry Ratio in Acute f	Respiratory Distress Syndrome	
6. Manuscript Identifying Number (if you I Blue-201804-0692OC	know it)			
Section 2. The Work Under (	Consideration for Pub	lication		
Did you or your institution <b>at any time</b> recany aspect of the submitted work (includir statistical analysis, etc.)?  Are there any relevant conflicts of inte	ng but not limited to grants,	, , ,	•	
Section 3. Polous at financia	l activities outside the	andone stand ma	ulo.	
Place a check in the appropriate boxes of compensation) with entities as desc clicking the "Add +" box. You should re Are there any relevant conflicts of inte If yes, please fill out the appropriate in	s in the table to indicate we ribed in the instructions. I eport relationships that we rest?  Yes  No	hether you have t Use one line for ea	inancial relationships (regardless of ar ach entity; add as many lines as you ne	ed by
Name of Entity	Grant? Personal N	on-Financial Support?	her? Comments	
Bayer Pharmaceuticals, Inc	<b>✓</b>		Observational study of ARDS	
GlaxoSmithKline	✓		Observational study of Sepsis	
Amgen	<b>✓</b>		Mouse study of acute lung injury	
NIH/FDA	<b>✓</b>		Research and clinical trials of ARDS and Sepsis	
Department of Defense	<b>✓</b>		Clinical trial of ARDS	
CS Berhling			Consultant ARDS	
Boehringer-Ingelheim			Consultant ARDS	



Name of Entity	Grant?	Personal Fees?	Non-Financial Support?	Other?	Comments				
Cerus Therapeutics		rees•	Support		Consultant ARDS				
Quark Pharmaceuticals		<u> </u>			Consultant ARDS				
hesan Pharmaceuticals		<b>✓</b>			Consultant Lung Pathology				
Section 4. Intellectual Property									
Intellectual Propert	ty Pate	ents & Co <sub>l</sub>	pyrights						
Do you have any patents, whether plann	ned, pend	ing or issue	ed, broadly releva	nt to the	work? Yes V No				
Section 5. Relationships not o	overed	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 Stateme	nt.								
Based on the above disclosures, this form below.	n will auto	omatically (	generate a discios	sure state	ement, which will appear in the box				
Dr. Matthay reports grants from Bayer P NIH/FDA, grants from Department of De personal fees from Cerus Therapeutics, p Pharmaceuticals, outside the submitted	efense, pe personal f	rsonal fees	from CS Berhling	, persona	al fees from Boehringer-Ingelheim,				



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