

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.

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



Section 1. Identifying Information						
Given Name (First Name) George	2. Surname Washko	(Last Nam	e)		3. Date 06-November-2018	
4. Are you the corresponding author?	Yes	✓ No	Correspond Gary M. Hu	_		
5. Manuscript Title Increased Airway Wall Thickness in Inter	stitial Lung	Abnormal	ities and Idiopat	hic Pulm	onary Fibrosis	
6. Manuscript Identifying Number (if you know White-201806-424OC.R2	ow it)					
Section 2. The Work Under Co	nsideratio	on for Pu	blication			
Did you or your institution at any time receivany aspect of the submitted work (including statistical analysis, etc.)? Are there any relevant conflicts of intere	but not limite	ed to grant	s, data monitoring			
Section 3. Relevant financial a	activities o	utside tl	ne submitted v	work.		
Place a check in the appropriate boxes ir of compensation) with entities as describ clicking the "Add +" box. You should rep Are there any relevant conflicts of intere If yes, please fill out the appropriate info	oed in the in ort relations st?	structions that s	s. Use one line fo were present d o	r each er	ntity; add as many lines as you need by	
Name of Entity	(grant•	ersonal Fees?	Non-Financial Support?	Other?	Comments	
NIH	✓				Grant Recepient	
Boehringer Ingelheim	✓			✓	Consultant, Advisory Board, Grant Recepient	
Quantitative Imaging Solutions				✓	GW is a founder and co-owner. This company provides image based consulting and develops software to enable data sharing	
PulmonX				✓	Consulting, Chair of DSMB	
RTG Interventional Medicine	✓				Grant Recepient	
anssen Pharmaceuticals				1	Grant Recepient, Consultant	



Name of Entity Grant Personal Fees Non-Financial Support Comments	
GlaxoSmithKline Consultant	
Section 4. Intellectual Property Patents & Copyrights	
Do you have any patents, whether planned, pending or issued, broadly relevant to the work? Yes Vo	
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Dr. Washko's spouse works for Biogen which is focused on developing therapies for fibrotic lung disease.	
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Dr. Washko reports grants from NIH, grants and other from Boehringer Ingelheim, other from Quantitative Imaging Solutions, other from PulmonX, grants from BTG Interventional Medicine, grants and other from Janssen Pharmaceuticals, other from GlaxoSmithKline, outside the submitted work; and Dr. Washko's spouse works for Biogen which is focused on developing therapies for fibrotic lung disease.	



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Dupuis 1



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4. Are you the cor	responding author?	☐ Yes ✓ No	Corresponding Author's Nam Gary M. Hunninghake	ne
5. Manuscript Title Increased Airway		rstitial Lung Abnormalitie:	s and Idiopathic Pulmonary F	ibrosis
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Section 4.				
Section 4.	Intellectual Proper	ty Patents & Copyri	ghts	
Do you have any	patents, whether plan	ned, pending or issued, br	roadly relevant to the work?	Yes ✓ No

Dupuis 2



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Miller 1



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5. Manuscript Title Increased Airway		rstitial Lung Abnormalities	and Idiopathic Pulmonary Fibrosis
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Do you have any	patents, whether plan	ned, pending or issued, br	oadly relevant to the work? Yes V No

Miller 2



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Dr. Miller has nothing to disclose.

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Hida 1



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Hida 2



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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

Nishino 1



Section 1. Identifying Informa				
Identifying Informa	ation			
1. Given Name (First Name) Mizuki	2. Surname (Last Name) Nishino		3. Date 05-November-2018	
4. Are you the corresponding author?	☐ Yes ✓ No	Corresponding Auth		
5. Manuscript Title Increased Airway Wall Thickness in Inters	stitial Lung Abnormalities	s and Idiopathic Pulm	nonary Fibrosis	
6. Manuscript Identifying Number (if you know White-201806-424OC.R2	ow it)			
Section 2. The Work Under Co	nsideration for Public	cation		
Did you or your institution at any time received any aspect of the submitted work (including lestatistical analysis, etc.)? Are there any relevant conflicts of interest	out not limited to grants, da	. , .	•	c.) for
Section 3. Relevant financial a	ctivities outside the s	submitted work.		
Place a check in the appropriate boxes in of compensation) with entities as describ clicking the "Add +" box. You should report there any relevant conflicts of interest lf yes, please fill out the appropriate information.	the table to indicate who bed in the instructions. Us ort relationships that wer st?	ether you have finan se one line for each e	ntity; add as many lines as you need	
Name of Entity	Grant? Personal Nor	n-Financial other	Comments	
World Care Clinical			Consultant	
Toshiba Medical Systems			Consultant	
Daiichi Sankyo			Consultant	
Merck investigator studies program	✓		Research grant to the institution	
AstraZeneca	✓		Research grant to the institution	
Canon Medical Systems	✓		Research grant to the institution	
Bayer			Honorarium	
Roche			Honorarium	

Nishino 2



Name of Entity	Grant? Personal Fees?	Non-Financial Support?	Other? Comments		
NIH	✓		R01CA203636, U0	1CA209414	
Section 4. Intellectual Propert	y Patents & Cop	yrights			
Do you have any patents, whether planne	ed, pending or issue	d, broadly releva	nt to the work? Yes	✓ No	
Section 5. Relationships not c	overed above				
Are there other relationships or activities potentially influencing, what you wrote in			nfluenced, or that give the	e appearance of	
Yes, the following relationships/cond	itions/circumstance:	s are present (exp	olain below):		
✓ No other relationships/conditions/cire	cumstances that pre	sent a potential o	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 Statemen	nt				
Based on the above disclosures, this form below.	ı will automatically g	generate a disclos	sure statement, which will	appear in the box	
Dr. Nishino reports other from WorldCard from Merck investigator studies program other from Roche, outside the submitted	n, grants from AstraZ		•		

Evaluation and Feedback

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

Nishino 3



Instructions

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

Xu 1



Section 1. Identifying Inform	nation		
1. Given Name (First Name) Hanfei	2. Surname (Last Name) Xu	3. Date 05-November-2018	
4. Are you the corresponding author?	☐ Yes 🗸 No	Corresponding Author's Name Gary M. Hunninghake	
5. Manuscript Title Increased Airway Wall Thickness in Inte	erstitial Lung Abnormalities	s and Idiopathic Pulmonary Fibrosis	
6. Manuscript Identifying Number (if you k White-201806-424OC.R2	now it)		
		_	
Section 2. The Work Under C	onsideration for Public	cation	
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. Relevant financial	activities outside the s	submitted 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. Intellectual Prope	rty Patents & Copyrig	ghts	
Do you have any patents, whether planned, pending or issued, broadly relevant to the work? Yes Vo			

Xu 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 named in the submitted work?
Yes, the follow	ving relationships/conditions/circumstances are present (explain below):
✓ No other relat	ionships/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 aborbelow.	ve disclosures, this form will automatically generate a disclosure statement, which will appear in the box
Dr. Xu has nothin	g to disclose.

Evaluation and Feedback

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Xu 3



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

Rosas 1



Section 1.	Identifying Inform	nation	
1. Given Name (Fir	rst Name)	2. Surname (Last Name) Rosas	3. Date 02-December-2018
4. Are you the cor	responding author?	Yes ✓ No	Corresponding Author's Name Gary M. Hunninghake
5. Manuscript Title Increased Airway		rstitial Lung Abnormalities	and Idiopathic Pulmonary Fibrosis
6. Manuscript Ider White-201806-4	ntifying Number (if you kr 24OC.R2	now it)	
Section 2.	The Work Under Co	onsideration for Public	cation
any aspect of the s statistical analysis,	ubmitted work (including	but not limited to grants, da	a third party (government, commercial, private foundation, etc.) for ta monitoring board, study design, manuscript preparation,
Section 3.	Relevant financial	activities outside the s	submitted 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.	Intellectual Proper	ty Patents & Copyric	yhts
Do you have any	patents, whether plan	ned, pending or issued, br	oadly relevant to the work? Yes V No

Rosas 2



Section 5. Polationships not sovered 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?
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.
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Rosas 3



Instructions

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

San Jose Estepar 1



Section 1. Identifying Inform	ation		
1. Given Name (First Name) Raul	2. Surname (Last Name) San Jose Estepar		3. Date 29-November-2018
4. Are you the corresponding author?	☐ Yes ✓ No	Corresponding Autho	
5. Manuscript Title Increased Airway Wall Thickness in Inter	stitial Lung Abnormalities	and Idiopathic Pulmo	onary Fibrosis
6. Manuscript Identifying Number (if you know White-201806-424OC.R2	ow it)	_	
Section 2. The Work Under Co	nsideration for Public	ation	
Did you or your institution at any time receivany aspect of the submitted work (including statistical analysis, etc.)? Are there any relevant conflicts of intere If yes, please fill out the appropriate info Excess rows can be removed by pressing	but not limited to grants, da st?	ta monitoring board, stu	udy design, manuscript preparation,
Name of Institution/Company	Grant? Personal Nor	n-Financial Other?	Comments
NIH	V		
Continu 2			
Section 3. Relevant financial a	activities outside the s	ubmitted work.	
Place a check in the appropriate boxes in of compensation) with entities as descril clicking the "Add +" box. You should rep Are there any relevant conflicts of intere	bed in the instructions. Us ort relationships that wer st?	e one line for each en	tity; add as many lines as you need by
If yes, please fill out the appropriate info	rmation below.		
Name of Entity	Grant	n-Financial other?	Comments
Boehringer Ingelheim			
Toshiba Toshiba			

San Jose Estepar 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
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
	der and co-owner of Quantitative Imaging Solutions which is a company that provides image based develops software to enable data sharing.
	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
personal fees fro	epar reports grants from NIH, during the conduct of the study; personal fees from Boehringer Ingelheim, om Toshiba, outside the submitted work; and he is also a founder and co-owner of Quantitative Imaging is a company that provides image based consulting and develops software to enable data sharing

Evaluation and Feedback

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San Jose Estepar 3



Instructions

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

Hunninghake 1



Section 1. Identifying Info					
Identifying Information					
1. Given Name (First Name) Gary	2. Surname (Last Name) Hunninghake		3. Date 05-November-2018		
4. Are you the corresponding author?	✓ Yes No				
5. Manuscript Title Increased Airway Wall Thickness in I	nterstitial Lung Abnormalitio	es and Idiopathic Pulmo	nary Fibrosis		
6. Manuscript Identifying Number (if yo White-201806-424OC.R2	u know it)				
Section 2					
Section 2. The Work Unde	r Consideration for Publ	ication			
any aspect of the submitted work (includes statistical analysis, etc.)? Are there any relevant conflicts of in	ding but not limited to grants, o		nt, commercial, private foundation, etc.) for dy design, manuscript preparation,		
Section 3. Relevant finance	ial activities outside the	submitted work.			
of compensation) with entities as de clicking the "Add +" box. You should	scribed in the instructions. Use report relationships that we	Jse one line for each ent	al relationships (regardless of amount city; add as many lines as you need by 36 months prior to publication .		
Are there any relevant conflicts of in					
If yes, please fill out the appropriate	information below.				
Name of Entity	Grant? Personal No	on-Financial Support?	Comments		
Genentech					
Borhringer-Ingelheim					
Medna LLC					
Mitsubishi Chemical					
Gerson Lehrman Group					

Hunninghake 2



Section 4. Intellectual Property - Patents & Conversable			
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?			
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Dr. Hunninghake reports personal fees from Genentech, personal fees from Borhringer-Ingelheim, personal fees from Medna LLC, personal fees from Mitsubishi Chemical, personal fees from Gerson Lehrman Group, outside the submitted work; .			

Evaluation and Feedback

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

Hunninghake 3



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Ross 1



Section 1.	Identifying Inform	ation		
1. Given Name (Fi James	rst Name)	2. Surname (Last Name) Ross		3. Date 05-November-2018
4. Are you the cor	responding author?	Yes 🗸 No	Corresponding Au	
5. Manuscript Title Increased Airway		rstitial Lung Abnormalitie	es and Idiopathic Pu	lmonary Fibrosis
6. Manuscript Ider White-201806-4	ntifying Number (if you kn 24OC.R2	ow it)		
	l			
Section 2.	The Work Under Co	onsideration for Publ	ication	
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 grants, our st? Yes No ormation below. If you have	lata monitoring board	ment, commercial, private foundation, etc.) for study design, manuscript preparation, ntity press the "ADD" button to add a row.
Name of Institut	ion/Company	Grant? Personal No	on-Financial Support?	? Comments
NIH		✓		
	l			
Section 3.	Relevant financial	activities outside the	submitted 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.	Intellectual Proper	ty Patents & Copyr	ights	
Do you have any	patents, whether plans	ned, pending or issued, b	proadly relevant to tl	ne work? ☐ Yes ✓ No

Ross 2



Section 5. Polationships 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?
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.
Dr. Ross reports grants from NIH, during the conduct of the study;.

Evaluation and Feedback

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Ross 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.

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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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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

Coxson 1



Section 1. Identifying Inform	mation		
1. Given Name (First Name) Harvey	2. Surname (Last Name) Coxson	3. Date 18-November-2018	
4. Are you the corresponding author?	☐ Yes ✓ No	Corresponding Author's Name Gary M. Hunninghake	
5. Manuscript Title Increased Airway Wall Thickness in Inte	erstitial Lung Abnormalities	and Idiopathic Pulmonary Fibrosis	
6. Manuscript Identifying Number (if you k White-201806-424OC.R2	now it)		
Section 2. The Work Under C	Consideration for Public	cation	
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. Polyant financia	la attituta a castila alia a	ordered Second consults	
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. Intellectual Prope	erty Patents & Copyric	ghts	
Do you have any patents, whether plan			

Coxson 2



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?
	wing relationships/conditions/circumstances are present (explain below): ationships/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
Dr. Coxson has r	nothing to disclose.

Evaluation and Feedback

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Coxson 3



Instructions

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Other: Anything not covered under the previous three boxes

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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

DIAZ 1



Section 1. Identifying Inform	ation		
1. Given Name (First Name) Alejandro	2. Surname (Last Name) DIAZ		3. Date 05-November-2018
4. Are you the corresponding author?	☐ Yes ✓ No	Corresponding Author	
5. Manuscript Title Increased Airway Wall Thickness in Inter	rstitial Lung Abnormalitie:	s and Idiopathic Pulm	onary Fibrosis
6. Manuscript Identifying Number (if you kn White-201806-424OC.R2	ow it)		
Section 2. The Work Under Co	onsideration for Publi	cation	
Did you or your institution at any time recei any aspect of the submitted work (including statistical analysis, etc.)?			ent, commercial, private foundation, etc.) for udy design, manuscript preparation,
Are there any relevant conflicts of interes			
If yes, please fill out the appropriate info Excess rows can be removed by pressing	•	e more than one enti	ity press the "ADD" button to add a row.
Name of Institution/Company	Grant	n-Financial other?	Comments
NIH	✓		NIH grants K01-HL118714 R01-HL133137-A1
Section 3. Polyvent financial	activities outside the s	unlaura ista al una ula	
Relevant financial	activities outside the s	submitted work.	
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Are there any relevant conflicts of intere	est? Yes ✓ No		
Section 4. Intellectual Proper	ty Patents & Copyri	ghts	
Do you have any patents, whether planned, pending or issued, broadly relevant to the work? Yes Vo			

DIAZ 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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Section 6. Disclosure Statement
Based on the above disclosures, this form will automatically generate a disclosure statement, which will appear in the box below.
Dr Diaz has received research grants from NIH

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DIAZ 3



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Relationships not covered above.

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Definitions.

Hatabu

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

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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

1

administrative support, etc.



Section 1. Identifying Inforn	nation			
1. Given Name (First Name) Hiroto	2. Surname (Last Name) Hatabu	3. Date 20-November-2018		
4. Are you the corresponding author?	☐ Yes 🗸 No	Corresponding Author's Name Gary M. Hunninghake		
5. Manuscript Title Increased Airway Wall Thickness in Interstitial Lung Abnormalities and Idiopathic Pulmonary Fibrosis				
6. Manuscript Identifying Number (if you ki White-201806-424OC.R2	now it)	_		
Section 2. The Work Under C	onsideration for Public	cation		
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. Relevant financial	activities outside the s	submitted 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 inter- If yes, please fill out the appropriate inf				
ii yes, piease iiii out the appropriate iiii	omation below.			
Name of Entity	Grant? Personal Noi	n-Financial Other? Comments		
Canon Medical Systems	✓			
Konica-Minolta Inc	✓			
Mitsubishi Chemical Inc		Consulting and Advisory		
Section 4. Intellectual Property				
Intellectual Prope	rty Patents & Copyric	ghts		
Do you have any patents, whether plan	nned, pending or issued, br	oadly relevant to the work? Yes V No		

Hatabu 2



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Instructions

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

Poli 1



Section 1. Identifying Inforn	nation			
1. Given Name (First Name) Sergio	2. Surname (Last Name) Poli	3. Date 08-November-2018		
4. Are you the corresponding author?	☐ Yes ✓ No	Corresponding Author's Name Gary M. Hunninghake MD MPH		
5. Manuscript Title Increased Airway Wall Thickness in Inte	erstitial Lung Abnormalitie	s and Idiopathic Pulmonary Fibrosis		
6. Manuscript Identifying Number (if you ki White-201806-424OC.R2	now it)			
Section 2. The Work Under C	onsideration for Publi	cation		
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. Relevant financial	activities outside the	submitted work.		
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Section 4. Intellectual Prope	rty Patents & Copyri	ghts		
Do you have any patents, whether planned, pending or issued, broadly relevant to the work? Yes Vo				

Poli 2



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 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		
Dr. Poli has noth	ing to disclose.		

Evaluation and Feedback

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Poli 3



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1

administrative support, etc.



Section 1. Identifying Inform	ation			
Given Name (First Name) Edwin	2. Surname (Last Name) Silverman		3. Date 05-November-2018	
4. Are you the corresponding author?	☐ Yes ✓ No	Corresponding Author		
5. Manuscript Title Increased Airway Wall Thickness in Inter	stitial Lung Abnormalities	and Pulmonary Fibr	osis	
6. Manuscript Identifying Number (if you kn White-201806-424OC.R2	ow it)	_		
Continu 2				
Section 2. The Work Under Co	onsideration for Public	ation		
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If yes, please fill out the appropriate info 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? Personal Nor	n-Financial Other?	Comments	
GlaxoSmithKline	V V		Consultancy, Travel Expenses, Grant for ECLIPSE Study	
Section 3. Relevant financial a	activities outside the s	ubmitted work.		
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Are there any relevant conflicts of interest? Yes No If yes, please fill out the appropriate information below.				
if yes, please fill out the appropriate information below.				
Name of Entity	Grant	n-Financial other?	Comments	
Novartis			Honorarium for participating in an educational symposium	

Silverman 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					
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Dr. Silverman reports grants, personal fees and other from GlaxoSmithKline, during the conduct of the study; personal fees from Novartis, outside the submitted work.					

Evaluation and Feedback

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Silverman 3



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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.

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.

For grants you have received for work outside the submitted work, you should disclose support ONLY from entities that could be perceived to be affected financially by the published work, such as drug companies, or foundations supported by entities that could be perceived to have a financial stake in the outcome. Public funding sources, such as government agencies, charitable foundations or academic institutions, need not be disclosed. For example, if a government agency sponsored a study in which you have been involved and drugs were provided by a pharmaceutical company, you need only list the pharmaceutical company.

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.

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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 autil

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

O'Connor 1



Section 1. Identifying Inform	ation		
Given Name (First Name) George	2. Surname (Last Name) O'Connor		3. Date 05-November-2018
4. Are you the corresponding author?	Yes 🗸 No	Corresponding A Gary M. Hunnin	
5. Manuscript Title Increased Airway Wall Thickness in Inte	rstitial Lung Abnormaliti	es and Idiopathic Pu	ulmonary Fibrosis
6. Manuscript Identifying Number (if you kr White-201806-424OC.R2	now it)		
Section 2. The Work Under Co	onsideration for Pub	lication	
Did you or your institution at any time rece any aspect of the submitted work (including statistical analysis, etc.)? Are there any relevant conflicts of intere	but not limited to grants, o		nment, commercial, private foundation, etc.) for d, study design, manuscript preparation,
If yes, please fill out the appropriate info	ormation below. If you ha	ave more than one	entity press the "ADD" button to add a row.
Excess rows can be removed by pressing	g the "X" button.		
Name of Institution/Company	Grant	on-Financial Support?	Comments
NIH	✓		
Section 3. Relevant financial	activities outside the	submitted work	
	bed in the instructions.	Use one line for eac	nancial relationships (regardless of amount h entity; add as many lines as you need by the 36 months prior to publication.
Are there any relevant conflicts of interest			
If yes, please fill out the appropriate info	ormation below.		
Name of Entity	Grant	on-Financial Support?	Comments
Astra Zeneca			Consulting regarding medications for asthma and COPD
lannsen Pharmaceutials	✓		I am a co-investigator on a grant to my institution

O'Connor 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.				
Dr. O'Connor reports grants from NIH, during the conduct of the study; other from AstraZeneca, grants from Jannsen Pharmaceutials, outside the submitted work; .				

Evaluation and Feedback

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

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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.

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3. Relevant financial activities outside the submitted work.

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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

Araki 1



Section 1.	Identifying Inform	ation		
,		2. Surname (Last Name) Araki	3. Date 05-November-2018	
4. Are you the corresponding author?		☐ Yes ✓ No	Corresponding Author's Name Gary M. Hunninghake	
5. Manuscript Title Increased Airway		rstitial Lung Abnormalities	s and Idiopathic Pulmonary Fibrosis	
6. Manuscript Ider White-201806-4	ntifying Number (if you kn 24OC.R2	ow it)		
Section 2.	The Work Under Co	onsideration for Public	cation	
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	submitted 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 Patents & Copyric	hts	
Do you have any patents, whether planned, pending or issued, broadly relevant to the work? Yes Vo				

Araki 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	ationships/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.	
Dr. Araki has nothing to disclose.	

Evaluation and Feedback

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

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