

## ICMJE Form for Disclosure of Potential Conflicts of Interest

### Instructions

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#### 4. Intellectual Property.

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## ICMJE Form for Disclosure of Potential Conflicts of Interest

### Section 1. Identifying Information

1. Given Name (First Name) Michelle	2. Surname (Last Name) Eakin	3. Date 03-June-2019
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name _____
5. Manuscript Title Responses to a Daughter's Question about Prognosis when the Patient is Expected to Die: A Qualitative Analysis	_____	
6. Manuscript Identifying Number (if you know it)	_____	

### Section 2. The Work Under Consideration 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

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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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Dr. Eakin 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)  
Alison

2. Surname (Last Name)  
Turnbull

3. Date  
29-May-2019

4. Are you the corresponding author?  Yes  No

Corresponding Author's Name  
Scott Vasher, MD

5. Manuscript Title  
Responses to a Daughter's Question about Prognosis when the Patient is Expected to Die: A Qualitative Analysis

6. Manuscript Identifying Number (if you know it)

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Dr. Turnbull 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)  
Scott

2. Surname (Last Name)  
Vasher

3. Date  
31-May-2019

4. Are you the corresponding author?  Yes  No

5. Manuscript Title  
Responses to a Daughter's Question about Prognosis when the Patient is Expected to Die: A Qualitative Analysis

6. Manuscript Identifying Number (if you know it)

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### Section 1. Identifying Information

1. Given Name (First Name) Sandra      2. Surname (Last Name) Zaeh      3. Date 03-June-2019

4. Are you the corresponding author?     Yes     No      Corresponding Author's Name  
Scott Vasher

5. Manuscript Title  
Responses to a Daughter's Question about Prognosis when the Patient is Expected to Die: A Qualitative Analysis

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Are there any relevant conflicts of interest?     Yes     No

If yes, please fill out the appropriate information below.

Name of Entity	Grant?	Personal Fees?	Non-Financial Support?	Other?	Comments
T32HL007534-36 (NHLBI)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

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Dr. Zaeh reports grants from T32HL007534-36 (NHLBI), outside the submitted work; .

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