Authors Conflict of Interest Disclosure Questionnaire



Circulation: Cardiovascular Quality and Journal **Manuscript** # CIRCCQO/2019/006037R1 **Outcomes IP Address** Date September 5, 2019 04:20 GMT 173.20.158.244 Utilization of advanced cardiovascular therapies in the United States and Title Canada: an analysis of New York and Ontario administrative data Peter Cram, Saket Girotra, John Matelski, Maria Koh, Bruce Landon, Lu Authors Han, Douglas Lee, and Dennis Ko

Instructions for Authors Conflict of Interest Disclosure

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 includes the questions from the International Committee of Medical Journal Editors (ICMJE) Form for Disclosure of Potential Conflicts of Interest and is divided into 6 subsections. Each author should submit a separate form and is responsible for the accuracy and completeness of the submitted information.

Authors are expected to provide detailed information about all relevant financial interests, activities, relationships, and affiliations (other than those affiliations listed in the title page of the manuscript) including, but not limited to, employment, affiliation, funding and grants received or pending, consultancies, honoraria or payment, speakers bureaus, stock ownership or options, expert testimony, royalties, donation of medical equipment, or patents and copyrights planned, pending, or issued.

1. 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".

3. 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

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4. Intellectual property.

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

5. 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 3 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

Section 1. Identifying Information

| Author: Saket Girotra |
|---------------------------------|
| Date: September 5, 2019 |
| ☐ I am the Corresponding Author |

Manuscript Title: Utilization of advanced cardiovascular therapies in the United States and Canada: an analysis of New York and Ontario administrative data

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)?

No

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 1 line for each entity; add as many lines as you need by clicking the "Add" button to add a row. Excess rows can be removed by pressing the "Remove" button. You should report relationships that were **present during the 36 months prior to submission**.

No

Section 4. Intellectual Property -- Patents & Copyrights

Do you have any patents or copyrights, whether planned, pending, or issued, broadly relevant to the work?

No

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?

No other relationships/conditions/circumstances that present a potential conflict of interest

At the time of manuscript acceptance, the journal will ask authors to confirm and, if necessary, update their disclosure statements. On occasion, the journal may ask authors to disclose further information about reported relationships.

Section 6. Disclosure Statement

box below after you click the "Generate Disclosure Statement" button. Any subsequent changes will also update the disclosure statement automatically after clicking the "Submit" button.

Dr Girotra has nothing to disclose.

By completing this form, I confirm that the information reported is accurate. I understand that, where appropriate, this information may be disclosed publicly. I further understand that the American Heart Association, Inc., reserves the right to decline to publish my work if the Organization believes a significant conflict of interest exists.

Saket Girotra

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