

Instructions

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

Deng 1



Section 1.	Identifying Inform	ation	
1. Given Name (Firs Chunqin	t Name)	2. Surname (Last Name) Deng	3. Date 06-October-2019
4. Are you the corre	esponding author?	Yes ✓ No	Corresponding Author's Name R. James White
5. Manuscript Title Combination The	rapy with Oral Trepros	stinil for Pulmonary Arteria	al Hypertension
6. Manuscript Ident Blue-201908-1640	ifying Number (if you kn	ow it)	
Section 2.	The Work Under Co	onsideration for Publi	cation
any aspect of the su statistical analysis, e	bmitted work (including	but not limited to grants, da	a third party (government, commercial, private foundation, etc.) for ata monitoring board, study design, manuscript preparation,
Section 3.	Relevant financial	activities outside the s	submitted work.
of compensation) clicking the "Add -	with entities as descri	bed in the instructions. Use port relationships that we	ether you have financial relationships (regardless of amount se one line for each entity; add as many lines as you need by re present during the 36 months prior to publication .
Section 4.	Intellectual Proper	ty Patents & Copyri	ghts
Do you have any p	patents, whether plani	ned, pending or issued, br	roadly relevant to the work? Yes No

Deng 2



Coetion F	
Section 5.	Relationships not covered above
	elationships or activities that readers could perceive to have influenced, or that give the appearance of ncing, what you wrote in the submitted work?
✓ Yes, the follow	ving relationships/conditions/circumstances are present (explain below):
No other relat	tionships/conditions/circumstances that present a potential conflict of interest
Employee of the	sponsor company, United Therapeutics.
	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 abo below.	ve disclosures, this form will automatically generate a disclosure statement, which will appear in the box
Employee of the	sponsor company, United Therapeutics.

Evaluation and Feedback

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Section 1. Identifying Inform	mation		
1. Given Name (First Name) Akram	2. Surname (Last Name) Khan		3. Date 07-October-2019
4. Are you the corresponding author?	☐ Yes ✓ No	Corresponding A R. James White	uthor's Name
5. Manuscript Title Combination Therapy with Oral Trepro	ostinil for Pulmonary Arte	rial Hypertension	
6. Manuscript Identifying Number (if you k	now it)		
Section 2. The Work Under C	Consideration for Pub	lication	
Did you or your institution at any time reco any aspect of the submitted work (includin statistical analysis, etc.)?			rnment, commercial, private foundation, etc.) for d, study design, manuscript preparation,
Are there any relevant conflicts of inter		avo moro than one	ontity proce the "ADD" button to add a row
Excess rows can be removed by pressir		ave more than one	entity press the "ADD" button to add a row.
Name of Institution/Company	Grant'	on-Financial Othe	er? Comments
United Therapeutics	/		enrollment in research studies.
Section 3. Polovant financial		1 20 1 1	
Relevant financia	activities outside the	submitted work	ζ,
	ribed 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 inter			
If yes, please fill out the appropriate inf	formation below.		
Name of Entity	Grant'	on-Financial Support?	er? Comments
Lung LLC	✓		enrollment in research studies.
Glaxo Smith Kline			enrollment in research studies.
Johnson & Johnson	✓		enrollment in research studies.



Name of Entity	Grant?	Personal Fees	Non-Financial Support	Other?	Comments	
AstraZeneca	\checkmark				enrollment in research studies.	
Reata Pharmaceuticals	✓				enrollment in research studies.	
United therapeutics	✓				enrollment in research studies.	
Section 4. Intellectual Propert	y Pate	ents & Co	pyrights			
Do you have any patents, whether plann	ed, pend	ing or issue		nt to the	work? Yes 🗸 No	
Section 5. Relationships not c	overed	above				
Are there other relationships or activities potentially influencing, what you wrote i				nfluence	d, or that give the appearance of	
Yes, the following relationships/cond	litions/cir	cumstance	es are present (exp	olain belo	w):	
✓ No other relationships/conditions/cir						
At the time of manuscript acceptance, jo On occasion, journals may ask authors to					• •	
Section 6. Disclosure Statement						
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Dr. Khan reports grants from United Therapeutics, during the conduct of the study; grants from Lung LLC, grants from Glaxo Smith Kline, grants from Johnson & Johnson, grants from AstraZeneca, grants from Reata Pharmaceuticals, grants from United therapeutics, outside the submitted work; .						



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Jerjes-Sanchez 1



Section 1. Identifying Inform	nation					
Given Name (First Name) Carlos	2. Surname (Last Name) Jerjes-Sanchez	3. Date 07-October-2019				
4. Are you the corresponding author?	☐ Yes 🗸 No	Corresponding Author's Name R. James White				
5. Manuscript Title Combination Therapy with Oral Treprostinil for Pulmonary Arterial Hypertension						
6. Manuscript ldentifying Number (if you k	now it)					
Section 2. The Work Under C	onsideration for Public	cation				
	g but not limited to grants, da	a third party (government, commercial, private foundation, etc.) for ta monitoring board, study design, manuscript preparation,				
Section 3. Polovant financial						
Place a check in the appropriate boxes of compensation) with entities as descr	ribed in the instructions. Us port relationships that wer	ether you have financial relationships (regardless of amount se one line for each entity; add as many lines as you need by se present during the 36 months prior to publication.				
Section 4. Intellectual Prope	rty Patents & Copyric	yhts				
Do you have any patents, whether plan	nned, pending or issued, br	oadly relevant to the work? Yes V No				

Jerjes-Sanchez 2



Section 5.					
Deculon 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	wing relationships/conditions/circumstances are present (explain below):				
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Continu					
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Dr. Jerjes-Sanch	ez has nothing to disclose.				

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Meyer 1



Section 1. Id	lentifying Informa	ation		
1. Given Name (First N Gisela	Given Name (First Name) Gisela			3. Date 11-November-2019
4. Are you the corresp	onding author?	Yes ✓ No	Corresponding Author's Na	me
5. Manuscript Title Combination Therap	by with Oral Treprost	inil for Pulmonary Arte	rial Hypertension	
6. Manuscript Identify Blue-201908-164000	ing Number (if you kno C	ow it)		
Section 2. Th	e Work Under Co	nsideration for Pub	lication	
	nitted work (including k)?	out not limited to grants,	m a third party (government, co data monitoring board, study de	ommercial, private foundation, etc.) for esign, manuscript preparation,
Section 3.	elevant financial a	ctivities outside the	submitted work	
Place a check in the a	appropriate boxes in ith entities as describ box. You should repo	the table to indicate we bed in the instructions. Ort relationships that w	hether you have financial re Use one line for each entity; a	lationships (regardless of amount add as many lines as you need by nonths prior to publication.
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Do you have any pat	ents, whether plann	ed, pending or issued,	broadly relevant to the work	? ☐ Yes 🗸 No

Meyer 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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5. Manuscript Title Combination Therapy with Oral Treprostinil for Pulmonary Arterial Hypertension						
6. Manuscript Identifying Number (if you kno Blue-201908-1640OC	ow it)					
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If yes, please fill out the appropriate info	rmation below.					
	2 Personal	Non-Financial	7			
Name of Entity	Grant? Personal Fees?	Support?	Other •	Comments		
Actelion	✓					
Bayer/MSD	✓					
GSK					1	
Bial						
OrPha Swiss GmbH						
United Therapeutics	✓					
Novartis	✓					
Medscape						



Name of Entity		Grant?	Personal Fees	Non-Financial Support?	Other?	Comments	
Bellerophon		✓					
ОМТ		✓					
Pfizer							
Reata							
Section 4.	Intellectual Propert	y Pate	ents & Cop	pyrights			
	patents, whether plann	ed, pend	ing or issue	ed, broadly releva	nt to the	work? ☐ Yes ✓ No	
Section 5.	Relationships not c	overed	above				
	elationships or activities ncing, what you wrote i				nfluenced	d, or that give the appearance of	
Yes, the follow	wing relationships/cond	itions/cir	cumstance	es are present (exp	olain belo	w):	
✓ No other relat	tionships/conditions/cir	cumstan	ces that pre	esent a potential o	conflict of	interest	
	inuscript acceptance, jo rnals may ask authors to					sary, update their disclosure state elationships.	ments.
Section 6.	Disclosure Stateme	nt					
Based on the abo			omatically (generate a disclos	sure state	ment, which will appear in the bo	x
personal fees fro	m Bial, personal fees fro m Medscape, grants fro	m OrPha	Swiss Gmb	oH, grants from U	nited The	m Bayer/MSD, grants from GSK, rapeutics, grants from Novartis, Pfizer, grants from Reata, outside	the



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4. Intellectual Property.

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

1

Yip



Section 1. Identifying Inform	nation						
1. Given Name (First Name) James	2. Surname (Last Name) Yip	3. Date 08-October-2019					
4. Are you the corresponding author?	e corresponding author? Yes Vo Corresponding Author's Name James White						
5. Manuscript Title Combination Therapy with Oral Trepostinel for Pulmonary Arterial Hypertension							
6. Manuscript Identifying Number (if you ki Blue-201908-1640OC	now it)						
Section 2. The Work Under C	onsideration for Public	cation					
	g but not limited to grants, da	a third party (government, commercial, private foundation, etc.) for ita monitoring board, study design, manuscript preparation,					
Section 3. Relevant financial	activities outside the s	submitted work.					
of compensation) with entities as descr	ibed in the instructions. Us port relationships that wer	ether you have financial relationships (regardless of amount se one line for each entity; add as many lines as you need by re present during the 36 months prior to publication.					
Section 4. Intellectual Prope	rty Patents & Copyric	ghts					
Do you have any patents, whether plan	ned, pending or issued, br	roadly relevant to the work? Yes V No					

Yip 2



Section 5.							
R	elationships not covered above						
	tionships or activities that readers could perceive to have influenced, or that give the appearance of ing, what you wrote in the submitted work?						
Yes, the following	Yes, the following relationships/conditions/circumstances are present (explain below):						
✓ No other relation	nships/conditions/circumstances that present a potential conflict of interest						
	iscript acceptance, journals will ask authors to confirm and, if necessary, update their disclosure statements Ils may ask authors to disclose further information about reported relationships.						
Section 6. D	isclosure Statement						
Based on the above below.	disclosures, this form will automatically generate a disclosure statement, which will appear in the box						
Dr. Yip has nothing	to disclose.						

Evaluation and Feedback

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Yip 3



Instructions

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Wang 1



Section 1. Identifying Inform	nation				
1. Given Name (First Name) Kuo-Yang	2. Surname (Last Name) Wang	3. Date 09-October-2019			
4. Are you the corresponding author?	☐ Yes ✓ No	Corresponding Author's Name R. James White			
5. Manuscript Title Combination Therapy with Oral Trepro	stinil for Pulmonary Arteria	al Hypertension			
6. Manuscript Identifying Number (if you kr Blue-201908-1640OC	now 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 Volume Yes					
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	rty Patents & Copyric	yhts			
Do you have any patents, whether plan					

Wang 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 ncing, what you wrote in the submitted work?
Yes, the follow	ving relationships/conditions/circumstances are present (explain below):
✓ No other relat	tionships/conditions/circumstances that present a potential conflict of interest
	nuscript acceptance, journals will ask authors to confirm and, if necessary, update their disclosure statements. Thals may ask authors to disclose further information about reported relationships.
Section 6.	Disclosure Statement
Based on the abo below.	ve disclosures, this form will automatically generate a disclosure statement, which will appear in the box

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Sepúlveda 1



Section 1. Identifying Inform	ation				
1. Given Name (First Name) Pablo	2. Surname (Last Name) Sepúlveda	3. Date 11-October-2019			
4. Are you the corresponding author?	Yes ✓ No	Corresponding Author's Name R. James White			
5. Manuscript Title Combination Therapy with Oral Treprostinil for Pulmonary Arterial Hypertension					
6. Manuscript Identifying Number (if you kn Blue-201908-1640OC	ow it)	_			
Section 2. The Work Under Co					
The Work Under Co	onsideration for Public	ation			
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	ubmitted work			
Place a check in the appropriate boxes i of compensation) with entities as descri	n the table to indicate who bed in the instructions. Us port relationships that wer st?	ether you have financial relationships (regardless of amount se one line for each entity; add as many lines as you need by se present during the 36 months prior to publication.			
Name of Entity	Grant? Personal Nor	n-Financial Other? Comments			
Actelion	✓				
Jnited Therapeutics	✓				
Bayer	✓				
Section 4. Intellectual Proper	ty Patents & Copyric	hts			
Do you have any patents, whether plant	ned, pending or issued, br	oadly relevant to the work? Yes 🗸 No			

Sepúlveda 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?
Yes, the following relationships/conditions/circumstances are present (explain below):
✓ No other relationships/conditions/circumstances that present a potential conflict of interest
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Dr. Sepúlveda reports grants from Actelion, grants from United Therapeutics, grants from Bayer, outside the submitted work; .

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Sepúlveda 3



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

White 1



Section 1. Identifying Information	ation			
1. Given Name (First Name) R James	2. Surname (Last Name) White		3. Date 07-October-2019	
4. Are you the corresponding author?	✓ Yes No			
5. Manuscript Title Combination Therapy with Oral Treprost	tinil for Pulmonary Arteria	al Hypertension		
6. Manuscript Identifying Number (if you kno Blue-201908-1640OC	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 interest of the submitted work in the statistical analysis, etc.)?	but not limited to grants, da st?	ta monitoring board, stu	udy design, manuscript preparation,	
Excess rows can be removed by pressing		n-Financial 7		
Name of Institution/Company	Grant'	upport?	Comments	
Jnited Therapeutics	V			
Section 3. Relevant financial a	activities outside the s	ubmitted work.		
Place a check in the appropriate boxes ir of compensation) with entities as descrik clicking the "Add +" box. You should rep Are there any relevant conflicts of interes If yes, please fill out the appropriate info	n the table to indicate who bed in the instructions. Us ort relationships that wer st?	ether you have financi se one line for each en	tity; add as many lines as you need b	
Name of Entity	Grant	n-Financial other?	Comments	
Merck				
Bayer	✓			

White 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):
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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. White reports grants from United Therapeutics, during the conduct of the study; personal fees from Merck, grants and personal fees from Bayer, outside the submitted work; .

Evaluation and Feedback

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

White 3



Instructions

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Zhang 1



Section 1. Identifying Inform	nation			
1. Given Name (First Name) Shuyang	2. Surname (Last Name) Zhang	3. Date 09-October-2019		
4. Are you the corresponding author?	☐ Yes ✓ No	Corresponding Author's Name R. James White		
5. Manuscript Title Combination Therapy with Oral Trepro	stinil for Pulmonary Arteria	al Hypertension		
6. Manuscript Identifying Number (if you k	now it)			
		_		
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Are there any relevant conflicts of inter	est?			
Section 3. Polovant financial				
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Section 4				
Section 4. 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		

Zhang 2



Section 5. Role	
Rela	tionships not covered above
	iships or activities that readers could perceive to have influenced, or that give the appearance of what you wrote in the submitted work?
Yes, the following re	elationships/conditions/circumstances are present (explain below):
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Based on the above dis below.	closures, this form will automatically generate a disclosure statement, which will appear in the box
Dr. Zhang has nothing	to disclose.

Evaluation and Feedback

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Zhang 3



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Section 1. Identifying Inform	nation		
1. Given Name (First Name) Tomas	2. Surname (Last Name) Pulido		3. Date 07-October-2019
4. Are you the corresponding author?	☐ Yes ✓ No	Corresponding Auth	or's Name
5. Manuscript Title Combination Therapy with Oral Trepro	stinil for Pulmonary Arteria	al Hypertension	
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Did you or your institution at any time rece any aspect of the submitted work (including statistical analysis, etc.)?			ent, commercial, private foundation, etc.) for tudy design, manuscript preparation,
Are there any relevant conflicts of interest			
If yes, please fill out the appropriate info Excess rows can be removed by pressin	•	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
Jnited Therapeutics	✓		Research Grant
Section 3. Polovant financial			
Relevant financial	activities outside the s	submitted work.	
Place a check in the appropriate boxes of compensation) with entities as descr clicking the "Add +" box. You should read there any relevant conflicts of interesting the second conflicts of the secon	ibed in the instructions. Us port relationships that wer est?	se one line for each e	ntity; add as many lines as you need by
Name of Entity	Grant'	n-Financial other	Comments
Actelion /Janssen			Speaker
Actelion/Janssen	✓		Research Grants
Bayer	✓		Speaker



Name of Entity	Grant?	Personal Fees?	Non-Financial Support?	Other?	Comments	
Bayer	✓				Research Grants	
Lilly	✓				Research Grant	
REATA	✓				Research Grant	
Pfizer		✓			Speaker	
Section 4						
Section 4. Intellectual Prope	rty Pate	ents & Cop	pyrights			
Do you have any patents, whether plan	nned, pend	ing or issue	ed, broadly releva	int to the	work? Yes V No	
Section 5. Relationships not	covered	above				
Are there other relationships or activiti potentially influencing, what you wrote				influence	d, or that give the appearance of	
Yes, the following relationships/con	nditions/cir	cumstance	es are present (exp	plain belo	ow):	
✓ No other relationships/conditions/	circumstan	ces that pre	esent a potential	conflict o	finterest	
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 Statem	ent					
Based on the above disclosures, this fo below.		omatically (generate a disclo	sure state	ement, which will appear in the box	(
Dr. Pulido reports grants from United grants from Actelion/Janssen, persona fees from Pfizer, outside the submitte	l fees from					



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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

Zhang 1



Section 1.	Identifying Inform	nation		
1. Given Name (Fi Gangcheng	_ , , ,		3. Date 10-October-2019	
4. Are you the cor	responding author?	Yes ✓ No	Corresponding Author's Name James White	
5. Manuscript Title Combination Th		stinil for Pulmonary Arteria	al Hypertension	
6. Manuscript Ider Blue-201908-164	ntifying Number (if you kr 100C	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 V				
Section 3.	Relevant financial	activities outside the s	submitted work.	
of compensation clicking the "Add	n) with entities as descri	ibed in the instructions. Us port relationships that we	ether you have financial relationships (regardless of amount se one line for each entity; add as many lines as you need by re present during the 36 months prior to publication.	
Section 4.	Intellectual Proper	rty Patents & Copyri	ghts	
Do you have any	patents, whether plan	ned, pending or issued, br	oadly relevant to the work? Yes V No	

Zhang 2



Section 5. Role				
Rela	tionships not covered above			
	ships or activities that readers could perceive to have influenced, or that give the appearance of what you wrote in the submitted work?			
Yes, the following re	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. Discl	osure Statement			
Based on the above dis below.	closures, this form will automatically generate a disclosure statement, which will appear in the box			
Dr. Zhang has nothing	to disclose.			

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Zhang 3



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

Grover 1



Section 1.	Identifying Information				
1. Given Name (First Name) Rob		2. Surname (Last Name) Grover		3. Date 07-October-2019	
4. Are you the corresponding author?		Yes	✓ No	Corresponding Author's Name	
5. Manuscript Title Combination The	erapy with Oral Trepros	tinil for Pulm	nonary Arterial	Hypertension	
6. Manuscript Iden	tifying Number (if you kn	ow it)			
Section 2.	The Work Under Co	nsideratio	on for Public	ation	
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 o	utside the s	ubmitted work.	
of compensation) clicking the "Add Are there any rele	with entities as descri	bed in the in port relations	structions. Use ships that were	ther you have financial relationships (regardless of amount e one line for each entity; add as many lines as you need by e present during the 36 months prior to publication .	
Section 4.	Intellectual Proper	ty Patent	ts & Copyrig	hts	
Do you have any patents, whether planned, pending or issued, broadly relevant to the work? Yes Vo					

Grover 2



Section 5.	
Re Re	lationships not covered above
	onships or activities that readers could perceive to have influenced, or that give the appearance of g, what you wrote in the submitted work?
✓ Yes, the following	relationships/conditions/circumstances are present (explain below):
No other relation	ships/conditions/circumstances that present a potential conflict of interest
I am an employee of	the Sponsor company (United Therapeutics Corporation)
	cript acceptance, journals will ask authors to confirm and, if necessary, update their disclosure statements may ask authors to disclose further information about reported relationships.
Section 6. Dis	closure Statement
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Dr. Grover reports a	nd I am an employee of the Sponsor company (United Therapeutics Corporation).

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



Section 1. Identifying Information
1. Given Name (First Name) 2. Surname (Last Name) 3. Date 11/11/2019
4. Are you the corresponding author? Yes No
5. Manuscript Title FREEDOM-EV
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
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 No
Section 4. Intellectual Property Patents & Convrights
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Do you have any patents, whether planned, pending or issued, broadly relevant to the work? Yes No



Section 5. Relationships not covered above
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Royalties: Funds are coming in to you or your institution due to your patent

Yu 1



Section 1. Identifying Inform	mation	
1. Given Name (First Name) Zaixin	2. Surname (Last Name) Yu	3. Date 12-October-2019
4. Are you the corresponding author?	Yes ✓ No	Corresponding Author's Name R. James White
5. Manuscript Title Combination Therapy with Oral Trepro	ostinil for Pulmonary Arteria	al Hypertension
6. Manuscript Identifying Number (if you l Blue-201908-1640OC	know it)	
Section 2. The Work Under 0	Consideration for Public	cation
	ng but not limited to grants, da	a third party (government, commercial, private foundation, etc.) for at a monitoring board, study design, manuscript preparation,
Section 3. Relevant financia	l activities outside the s	submitted work.
of compensation) with entities as desc	ribed in the instructions. Use eport relationships that wer	ether you have financial relationships (regardless of amount se one line for each entity; add as many lines as you need by re present during the 36 months prior to publication.
Section 4. Intellectual Prope	erty Patents & Copyrig	ghts
Do you have any patents, whether pla		

Yu 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 following relationships/conditions/circumstances are present (explain below):			
✓ No other relationships/conditions/circumstances that present a potential conflict of interest				
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Section 6.	Disclosure Statement			
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Dr. Yu has nothi	ng to disclose.			

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Tapson 1



Section 1. Identifying Information				
Given Name (First Name) Victor	2. Surname (Last Name) Tapson	Name) 3. Date 11-October-2019		
4. Are you the corresponding author?	☐ Yes ✓ No	Corresponding Author's Name R. James White, MD, PhD		
5. Manuscript Title Combination Therapy with Oral Trep	prostinil for Pulmonary Arteria	al Hypertension		
6. Manuscript Identifying Number (if yo BLUE-201908-1640OC	u know it)	_		
Section 2. The Work Unde	r Consideration for Public	cation		
Did you or your institution at any time r any aspect of the submitted work (includent statistical analysis, etc.)? Are there any relevant conflicts of in	eceive payment or services from ding but not limited to grants, daterest?	a third party (governme ita monitoring board, sti	ent, commercial, private foundation, etc.) for udy design, manuscript preparation, ty press the "ADD" button to add a row.	
Excess rows can be removed by pres	Grant? Personal No.	n-Financial upport?	Comments	
United Therapeutics	Fees 5			
Section 3. Relevant finance	ial activities outside the s	submitted work.		
	scribed in the instructions. Us	se one line for each er	cial relationships (regardless of amount atity; add as many lines as you need by a 36 months prior to publication .	
Are there any relevant conflicts of in				
If yes, please fill out the appropriate	intormation below.			
Name of Entity	Grant	n-Financial other?	Comments	
Jnited Therapeutics			Advisory board work with sponsoring	

Tapson 2



Section 4. Intellectual Property Patents & Copyrights			
Do you have any patents, whether planned, pending or issued, broadly relevant to the work? Yes Volume			
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):			
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Section 6. Disclosure Statement			
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Dr. Tapson reports grants from United Therapeutics, during the conduct of the study; other support from United Therapeutics based on meetings / projects outside of the scope of the submitted work.			

Evaluation and Feedback

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