

#### **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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migaud 1



| Section 1. Identifying Inform  |                                       |  |                        |             |  |
|--|---------------------------------------|--|------------------------|-------------|--|
| Identifying Inform   | lation                                |  |                        |             |  |
| Given Name (First Name)     marie  | 2. Surna<br>migaud                    | me (Last Nar   | me)                    |             | 3. Date<br>14-May-2020   |
| 4. Are you the corresponding author?   | Yes                                   | ✓ No   | Correspond<br>Raymond  | _           |  |
| 5. Manuscript Title<br>Antiviral Drug Efficacy and Clinical Outo   | omes in C                             | OVID-19  |                        |             |  |
| 6. Manuscript Identifying Number (if you kr  | now it)                               |  |                        |             |  |
|  |                                       |  |                        |             |  |
| Section 2. The Work Under Co   | onsidera                              | tion for P   | ublication             |             |  |
| any aspect of the submitted work (including<br>statistical analysis, etc.)?<br>Are there any relevant conflicts of intere  | but not linest?                       | nited to gran Yes pelow. If yo   | nts, data monitoring   | g board, st | ent, commercial, private foundation, etc.) for udy design, manuscript preparation, ty press the "ADD" button to add a row. |
| Name of Institution/Company  | Grant?                                | Personal Fees?   | Non-Financial Support? | Other?      | Comments   |
| elysium health   | <b>✓</b>                              |  |                        |             | nutraceutical company with an interest in developing products which boost metabolism and NAD production                    |
|  |                                       |  |                        |             |  |
| Section 3. Relevant financial  | activitie                             | s outside  | the submitted          | work.       |  |
| Place a check in the appropriate boxes in of compensation) with entities as described the "Add +" box. You should repare there any relevant conflicts of interesting the series of the s | bed in the<br>port relations:<br>est? | e instruction in inst | ns. Use one line fo    | or each er  | ntity; add as many lines as you need by  |
| ii yes, piease iiii out tile appropriate iiit  |                                       | JEIUW.   |                        |             |  |
| Name of Entity   | Grant?                                | Personal<br>Fees?  | Non-Financial Support? | Other?      | Comments   |
| elysium health   | <b>✓</b>                              |  |                        |             | support for Migaud's research to identify new markers of metabolic dysfunction through NAD deficiency                      |

migaud 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 statemen 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. reports grants from elysium health, during the conduct of the study; grants from elysium health, outside the submitted work; .   |  |  |  |  |

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Langley 1



| Section 1.   | Identifying Inform  | ation   |                         |                  |  |
|--|---|---|-------------------------|------------------|--|
| 1. Given Name (Fi<br>Raymond   | rst Name)   | 2. Surname (Last Name)<br>Langley                                 |                         |                  | 3. Date<br>14-May-2020   |
| 4. Are you the cor   | responding author?  | ✓ Yes No  |                         |                  |  |
| 5. Manuscript Title<br>Antiviral Drug Ef   | e<br>ficacy and Clinical Outc                                   | omes in COVID-19  |                         |                  |  |
| 6. Manuscript Ider   | ntifying Number (if you kn                                      | ow it)  |                         |                  |  |
|  |   |   | _                       |                  |  |
| Section 2.   | The Work Under Co   | onsideration for Publ   | ication                 |                  |  |
| any aspect of the s<br>statistical analysis,<br>Are there any rel<br>If yes, please fill o | ubmitted work (including<br>etc.)?<br>evant conflicts of intere | but not limited to grants, dest? Yes No ormation below. If you ha | lata monitoring         | g board, study o | commercial, private foundation, etc.) for design, manuscript preparation, ress the "ADD" button to add a row.    |
| Name of Institut   | ion/Company   | Grant   | on-Financial<br>Support | Other? Co        | omments  |
| NIH  |   | <b>✓</b>  |                         |                  |  |
|  |   |   |                         |                  |  |
| Section 3.   | Relevant financial  | activities outside the  | submitted               | work.            |  |
| of compensation<br>clicking the "Add<br>Are there any rel                                  | ı) with entities as descri                                      | bed in the instructions. Uport relationships that we              | Jse one line fo         | or each entity;  | elationships (regardless of amount<br>; add as many lines as you need by<br><b>months prior to publication</b> . |
| Section 4.   | Intellectual Proper   | ty Patents & Copyri   | ights                   |                  |  |
| Do you have any  | patents, whether plani  | ned, pending or issued, b   | roadly releva           | int to the worl  | k? Yes 🗸 No  |

Langley 2



| Section 5. Relationships not covered 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  |  |  |  |
| Section 6. Disclosure Statement  |  |  |  |
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| Dr. Langley reports grants from NIH, during the conduct of the study; .  |  |  |  |

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Chand 1



| Section 1.  | dentifying Inform        | ation                           |  |  |
|---|--------------------------|---------------------------------|--|--|
| 1. Given Name (First<br>Hitendra  | Name)                    | 2. Surname (Last Name)<br>Chand | 3. Date<br>14-May-2020   |  |
| 4. Are you the corres   | sponding author?         | Yes ✓ No                        | Corresponding Author's Name Raymond J. Langley   |  |
| 5. Manuscript Title<br>Antiviral Drug Effic   | acy and Clinical Outco   | omes in COVID-19                |  |  |
| 6. Manuscript Identii   | fying Number (if you kno | ow it)                          |  |  |
|   |                          |                                 | _  |  |
| Section 2.  | he Work Under Co         | onsideration for Public         | cation   |  |
| any aspect of the sub<br>statistical analysis, et   | mitted 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 a     | 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 <b>present during the 36 months prior to publication</b> .  Are there any relevant conflicts of interest? Yes Vo |                          |                                 |  |  |
| Section 4.  | ntellectual Proper       | ty Patents & Copyric            | ghts   |  |
| Do you have any pa  | atents, whether planr    | ned, pending or issued, br      | roadly relevant to the work? Yes V No  |  |

Chand 2



| Section 5. Relationships not sovered above   |
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| Dr. Chand has nothing to disclose.   |

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Thannickal 1



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|--|-------------------------------|---|--|--|------------|---|-------|
| 1. Given Name (Fii<br>Victor                               | rst Name)                     | 2. Surnai<br>Thannic                      | ne (Last Name<br>kal                           | <u>e</u> )                                       |            | 3. Date<br>14-May-2020  |       |
| 4. Are you the cor   | responding author?            | Yes                                       | <b>√</b> No                                    | Correspond<br>Raymond                            | -          |   |       |
| 5. Manuscript Title<br>Antiviral Drug Ef                   | e<br>ficacy and Clinical Outc | omes in C                                 | OVID-19  |  |            |   |       |
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|  |                               |   |  |  |            |   |       |
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| any aspect of the s statistical analysis,                  | ubmitted work (including      | but not lin                               |  | s, data monitoring                               |            | ent, commercial, private foundation,<br>udy design, manuscript preparation  |       |
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| of compensation<br>clicking the "Add<br>Are there any rele | ) with entities as descri     | bed in the port relationst?   ormation be | instructions<br>onships that<br>Yes N<br>elow. | s. Use one line fo<br>were <b>present d</b><br>o | or each er | ial relationships (regardless of an<br>ntity; add as many lines as you ne<br>a <b>36 months prior to publicatio</b> | ed by |
| Name of Entity   |                               | Grant?                                    | Personal Fees?                                 | Non-Financial Support                            | Other?     | Comments  |       |
| Boehringer Ingelheim                                       | n Pharmaceuticals Inc         |   | <b>✓</b>                                       |  |            | Consulting  |       |
| Covance  |                               |   | <b>✓</b>                                       |  |            | Consulting  |       |
| Blade Therapeutics   |                               |   | <b>✓</b>                                       |  |            | Consulting  |       |
| Versant Venture  |                               |   | <b>✓</b>                                       |  |            | Consulting  |       |
| Mistral Therapeutics                                       |                               |   | ✓  |  |            | Consulting  |       |
| Translate Bio  |                               |   | ✓  |  |            | Consulting  |       |

Thannickal 2



| Soutien A   |  |  |  |  |
|---|--|--|--|--|
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| Dr. Thannickal reports research funding from National Institutes of Health (NIH), Department of Veteran's Affairs, and Genkyotex. He also reports consulting fees from Boehringer Ingelheim Pharmaceuticals Inc, Covance, Blade Therapeutics, Versant Venture, Mistral Therapeutics, and Translate Bio. |  |  |  |  |

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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.

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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

Gandotra 1



| Section 1. Identifying Inform   | nation                             |  |  |  |
|---|------------------------------------|--|--|--|
| Given Name (First Name)  Sheetal  | 2. Surname (Last Name)<br>Gandotra | 3. Date<br>15-May-2020   |  |  |
| 4. Are you the corresponding author?  | ☐ Yes ✓ No                         | Corresponding Author's Name<br>Raymond Langley   |  |  |
| 5. Manuscript Title<br>Antiviral Drug Efficacy and Clinical Out   | comes in COVID-19                  |  |  |  |
| 6. Manuscript Identifying Number (if you k  | now it)                            |  |  |  |
|   |                                    |  |  |  |
| Section 2. The Work Under C   | onsideration for Publi             | cation   |  |  |
| any aspect of the submitted work (including statistical analysis, etc.)?  | g but not limited to grants, da    | a third party (government, commercial, private foundation, etc.) for ata monitoring board, study design, manuscript preparation, |  |  |
| Are there any relevant conflicts of interest?    Yes ✓ No   |                                    |  |  |  |
| Continue  |                                    |  |  |  |
| 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 <b>present during the 36 months prior to publication</b> . |                                    |  |  |  |
| Are there any relevant conflicts of inter   | est? Yes ✓ No                      |  |  |  |
| Coation 4   |                                    |  |  |  |
| Section 4. Intellectual Prope   | rty Patents & Copyri               | ghts   |  |  |
| Do you have any patents, whether plan   | ned, pending or issued, br         | roadly relevant to the work? Yes V No  |  |  |

Gandotra 2



| Section 5. Relationships not solvered 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. Gandotra has nothing 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.

Gandotra 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".

#### 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 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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| Section 1. Identifying Inform                                   | nation   |  |
|---|--|--|
| 1. Given Name (First Name)                                      | 2. Surname (Last Name)                                     | 3. Date  |
| 4. Are you the corresponding author?                            | ☐ Yes ✓ No   | Corresponding Author's Name<br>Raymond J. Langley  |
| 5. Manuscript Title<br>Antiviral Drug Efficacy and Clinical Out | comes in COVID-19  |  |
| 6. Manuscript Identifying Number (if you kr                     | 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<br>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 & Copyric                                      | white  |
| Intellectual Proper   |  |  |
| Do you have any patents, whether plan                           | ned, pending or issued, br                                 | oadly relevant to the work? Yes ✓ No   |



| Section 5. Bolotionships   | mak assumed alcassa  |  |  |  |  |
|--|--|--|--|--|--|
| Relationships  | not covered above  |  |  |  |  |
| Are there other relationships or ac potentially influencing, what you                  | tivities that readers could perceive to have influenced, or that give the appearance of wrote in the submitted work?   |  |  |  |  |
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| ✓ No other relationships/condition   | ons/circumstances that present a potential conflict of interest  |  |  |  |  |
|  | nce, journals will ask authors to confirm and, if necessary, update their disclosure statements hors to disclose further information about reported relationships. |  |  |  |  |
| Section 6. Disclosure Sta  | tement   |  |  |  |  |
| Based on the above disclosures, the below.   | is form will automatically generate a disclosure statement, which will appear in the box   |  |  |  |  |
| Dr. Gillespie has nothing to disclo  | ose.   |  |  |  |  |

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