

Instructions

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Section 1. Identif	ying Information			
1. Given Name (First Name) Gregory	2. Su Barto	irname (Last Name) on		3. Date 11-June-2020
4. Are you the corresponding	g author?	es 🖌 No	Corresponding Author's Nai Sean Fain	me
5. Manuscript Title Pulmonary microvascular	changes in adult sur	rvivors of prematu	rity: Utility of DCE MRI	
6. Manuscript Identifying Nu Blue-202002-0344LE.R1	mber (if you know it)			
Section 2. The Wo	rk Under Conside	eration for Pub	ication	
Did you or your institution at	any time receive pay	mont or sorvicos fro	mathird party (government co	mmercial private foundation etc.) for

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

Are there any relevant conflicts of interest?		Yes
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Section 3. Relevant financial activities outside the submitted work.

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Are there any relevant conflicts of interest? \Box Yes \checkmark No

Do you have any patents, whether planned, penuing of issued, broadly relevant to the work? res \mathbf{v} no	e any patents, whether planned, pending or issued, broadly relevant to	the work?	Yes	🖌 No
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Dr. Barton has nothing to disclose.

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Section 1. Identifying Information 1. Given Name (First Name) 2. Surname (Last Name) 3. Date Marlowe Eldridge 11-June-2020
Marlowe Eldridge 11-June-2020
4. Are you the corresponding author? Yes ✓ No Corresponding Author's Name Sean Fain
5. Manuscript Title Pulmonary microvascular changes in adult survivors of prematurity: Utility of DCE MRI
6. Manuscript Identifying Number (if you know it) Blue-202002-0344LE.R1
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Are there any relevant conflicts of interest?		Yes	\checkmark	No
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Do you have any patents, whether planned, penuing of issued, broadly relevant to the work? res \mathbf{v} no	e any patents, whether planned, pending or issued, broadly relevant to	the work?	Yes	🖌 No
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Dr. Eldridge has nothing to disclose.

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1. Given Name (Fi Kara	rst Name)	2. Surname Goss	e (Last Name)		3. Date 11-June-2020
4. Are you the cor	responding author?	Yes	✓ No	Corresponding Author's Na Sean Fain	ame
5. Manuscript Title Pulmonary micro		adult survivor:	s of prematu	rity: Utility of DCE MRI	
6. Manuscript Ider Blue-202002-034	ntifying Number (if you 14LE.R1	know it)			
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No

Are there any relevant conflicts of interest?		Yes	\checkmark	1
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Do you have any patents, whether planned, pending or issued, broadly relevant to the work? $\; [$	Yes	🖌 No	
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Section 1.	Identifying Infor	mation		
1. Given Name (Fi Luis	rst Name)	2. Surnam Torres	e (Last Name)	3. Date 11-June-2020
4. Are you the cor	responding author?	Yes	✓ No	Corresponding Author's Name Sean Fain
5. Manuscript Titl Pulmonary micr		adult survivo	rs of prematu	urity: Utility of DCE MRI
6. Manuscript Ide Blue-202002-034	ntifying Number (if you 44LE.R1	know it)		
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1. Given Name (First Name) Sean	2. Surname (Last Name) Fain	3. Date 12-June-2020
4. Are you the corresponding author?	✓ Yes No	
5. Manuscript Title Pulmonary microvascular changes ir	adult survivors of prematurity: Utility of DCE MRI	

6. Manuscript Identifying Number (if you know it)

Blue-202002-0344LE.R1

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Are there any relevant conflicts of interest? Yes No

If yes, please fill out the appropriate information below. If you have more than one entity press the "ADD" button to add a row. Excess rows can be removed by pressing the "X" button.

Name of Institution/Company	Grant?	Personal Fees	Non-Financial Support <mark>?</mark>	Other?	Comments	
NIH/NHLBI	\checkmark				R01 HL126771	

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Are there any relevant conflicts of interest? \checkmark Yes

If yes, please fill out the appropriate information below.

Name of Entity	Grant?	Personal Fees ?	Non-Financial Support?	Other?	Comments	
GE Healthcare	\checkmark				Development of pulmonary MRI techniques	
Sanofi/Regeneron		\checkmark			Honorarium	
Polarean		\checkmark			Honorarium	



Name of Entity	Grant?	Personal Fees?	Non-Financial Support <mark>?</mark>	Other?	Comments	
Xemed LLC		\checkmark			Honorarium	

Section 4. Intellectual Property -- Patents & Copyrights

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Disclosure Statement

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Dr. Fain reports grants from NIH/NHLBI, during the conduct of the study; grants from GE Healthcare, personal fees from Sanofi/Regeneron, personal fees from Polarean, personal fees from Xemed LLC, outside the submitted work; .

Evaluation and Feedback

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

No