

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.

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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

Aziz 1



Section 1. Identifying Inform	nation	
1. Given Name (First Name) Mariam	2. Surname (Last Name) Aziz	3. Date 26-August-2020
4. Are you the corresponding author?	☐ Yes ✓ No	Corresponding Author's Name Ivan Rosas
5. Manuscript Title Tocilizumab in Hospitalized Patients W	ith COVID-19 Pneumonia	
6. Manuscript Identifying Number (if you ki 20-28700	now it)	
		-
Section 2. The Work Under C	onsideration for Public	ation
	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. Relevant financial	activities outside the s	ubmitted 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 se present during the 36 months prior to publication.
Section 4. Intellectual Prope	rty Patents & Copyrig	yhts
Do you have any patents, whether plan	ned, pending or issued, br	oadly relevant to the work? ☐ Yes ✓ No

Aziz 2



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Based on the above disclosures, this form will automatically generate a disclosure statement, which will appear in the box below.
Dr. Aziz has nothing to disclose.

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

Bhagani 1



Section 1. Identifying Information	ation				
Given Name (First Name) Sanjay	2. Surname (Last Name) Bhagani		3. Date 19-August-2020		
4. Are you the corresponding author?	Yes ✓ No	Corresponding Author's Name Ivan Rosas			
5. Manuscript Title Tocilizumab in Hospitalized Patients Wit	h COVID-19 Pneumonia				
6. Manuscript Identifying Number (if you kno 20-28700	ow it)				
Section 2. The Work Under Co	nsideration for Publi	cation			
Did you or your institution at any time received any aspect of the submitted work (including less statistical analysis, etc.)? Are there any relevant conflicts of interest section 3.	but not limited to grants, d	ata monitoring board	d, study design, manuscript preparation,	.) for	
Relevant financial a	ctivities outside the	submitted work	ζ,		
Place a check in the appropriate boxes in of compensation) with entities as describ clicking the "Add +" box. You should report there any relevant conflicts of interest lf yes, please fill out the appropriate information.	oed in the instructions. U ort relationships that we st?	lse one line for eacl	h entity; add as many lines as you need		
Name of Entity	Grant? Personal No	on-Financial Othe	Comments		
Gilead Sciences			Advisory Boards and development of Education Programmes		
Roche			Advisory Board		
ViiV			Advisory Boards and development of		

Bhagani 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
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Dr. Bhagani reports personal fees from Gilead Sciences, personal fees from Roche, personal fees from ViiV, outside the submitted work; .

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

Bräu 1



Section 1. Identifying Inform	ation			
1. Given Name (First Name) Norbert	2. Surname (Last Name) Bräu		3. Date 24-August-2020	
4. Are you the corresponding author?	☐ Yes ✓ No	Corresponding Author's Name Ivan Rosas		
5. Manuscript Title Tocilizumab in Hospitalized Patients Wit	th COVID-19 Pneumonia			
6. Manuscript Identifying Number (if you kn 20-28700	ow it)			
		-		
Section 2. The Work Under Co	onsideration for Public	ation		
any aspect of the submitted work (including statistical analysis, etc.)? Are there any relevant conflicts of intere	but not limited to grants, da st? Yes No rmation below. If you hav	ta monitoring board, st	ent, commercial, private foundation, etc.) for tudy design, manuscript preparation, ity press the "ADD" button to add a row.	
Name of Institution/Company	Grant•	n-Financial Other?	Comments	
Roche / Genentech	✓		Research grant to institution to conduct Tocilizumab study.	
Section 3. Relevant financial a	activities outside the s	ubmitted work.		
Place a check in the appropriate boxes in of compensation) with entities as descril clicking the "Add +" box. You should repart there any relevant conflicts of interest.	bed in the instructions. Us ort relationships that wer st? Yes 🗸 No	e one line for each e e present during th	ntity; add as many lines as you need by	
Section 4. Intellectual Proper	ty Patents & Copyrig	hts		
Do you have any patents, whether planr	ned, pending or issued, br	oadly relevant to the	work? ☐ Yes ✓ No	

Bräu 2



Section 5. Relationships not sovered above
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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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Dr. Bräu reports grants from Roche / Genentech, during the conduct of the study; .

Evaluation and Feedback

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Bräu 3



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Cooper 1



Section 1. Identifying Inform	nation	
1. Given Name (First Name) Nichola	2. Surname (Last Name) Cooper	3. Date 26-August-2020
4. Are you the corresponding author?	☐ Yes ✓ No	Corresponding Author's Name Ivan Rosas
5. Manuscript Title Tocilizumab in Hospitalized Patients W	ith COVID-19 Pneumonia	
6. Manuscript Identifying Number (if you ki 20-28700	now it)	
Section 2. The Work Under C	onsideration for Public	cation
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Do you have any patents, whether plan	ned, pending or issued, br	oadly relevant to the work? Yes V No

Cooper 2



Section 5. Polationships not sovered above	
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Dr. Cooper has nothing to disclose.	

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Cooper 3



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Cubillo Gracian 1



Section 1.	dentifying Informa	ation		
1. Given Name (First Antonio	Name)	2. Surname (Last Name) Cubillo Gracian		3. Date 20-August-2020
4. Are you the corres	ponding author?	Yes ✓ No	Corresponding Author's Nan	ne
5. Manuscript Title Tocilizumab in Hos	pitalized Patients Wit	ch COVID-19 Pneumonia		
6. Manuscript Identif 20-28700	ying Number (if you kno	ow it)		
Section 2. T	he Work Under Co	onsideration for Publi	cation	
any aspect of the subs statistical analysis, etc	mitted work (including	but not limited to grants, d	a third party (government, cor ata monitoring board, study des	nmercial, private foundation, etc.) for sign, manuscript preparation,
Section 3. R	elevant financial a	activities outside the	submitted work.	
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Do you have any pa	atents, whether plann	ned, pending or issued, b	roadly relevant to the work?	☐ Yes 🗸 No

Cubillo Gracian 2



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De La Zerda 1



Section 1.	Identifying Inform	nation		
1. Given Name (Fir David	rst Name)	2. Surname (Last Name) De La Zerda		3. Date 18-August-2020
4. Are you the corr	responding author?	Yes 🗸 No	Corresponding Author's Nam	e
5. Manuscript Title Tocilizumab in H		ith COVID-19 Pneumonia		
6. Manuscript Ider 20-28700	ntifying Number (if you kr	now it)		
Section 2.	The Work Under Co	onsideration for Publi	cation	
any aspect of the si statistical analysis,	ubmitted work (including	g but not limited to grants, do	a third party (government, com Ita monitoring board, study desi	mercial, private foundation, etc.) for gn, manuscript preparation,
Section 3.	Relevant financial	activities outside the	submitted work.	
of compensation clicking the "Add) with entities as descri	ibed in the instructions. U port relationships that we		tionships (regardless of amount d as many lines as you need by onths prior to publication.
Section 4.	Intellectual Proper	rty Patents & Copyri	ghts	
Do you have any	patents, whether plan	ned, pending or issued, b	oadly relevant to the work?	Yes ✓ No

De La Zerda 2



Section 5. Polationships 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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Dr. De La Zerda has nothing to disclose.

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De La Zerda 3



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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

Dimonaco 1



Section 1. Identifying I	nformation				
Given Name (First Name) Sophie	2. Surname (Last Name) Dimonaco		3. Date 20-August-2020		
4. Are you the corresponding autho	r? Yes ✓ No	Corresponding Autho	or's Name		
5. Manuscript Title Tocilizumab in Hospitalized Patie	ents With COVID-19 Pneumonia				
6. Manuscript Identifying Number (i 20-28700	f you know it)	_			
Section 2. The World Lin					
The Work Un	der Consideration for Public	cation			
	ncluding but not limited to grants, da		ent, commercial, private foundation, etc.) for udy design, manuscript preparation,		
•	ate information below. If you hav	e more than one enti	ty press the "ADD" button to add a row.		
Name of Institution/Company	Grant	n-Financial other?	Comments		
Biomedical Advanced Research and Development Authority (BARDA)	V		BARDA co-funded the COVACTA study		
Section 3. Relevant fina	ancial activities outside the s	ubmitted work.			
of compensation) with entities as	s described in the instructions. Us	se one line for each er	cial relationships (regardless of amount ntity; add as many lines as you need by a 36 months prior to publication .		
Are there any relevant conflicts of	of interest? Yes No				
If yes, please fill out the appropriate information below.					
Name of Entity	Grant	n-Financial other?	Comments		
Roche Products Ltd			Employee and shareholder of Roche Products Limited		

Dimonaco 2



Soutien A
Section 4. Intellectual Property Patents & Copyrights
Do you have any patents, whether planned, pending or issued, broadly relevant to the work? Yes V
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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Go 1



Section 1. Identifying Inform	nation	
1. Given Name (First Name) Ronaldo	2. Surname (Last Name) Go	3. Date 19-August-2020
4. Are you the corresponding author?	☐ Yes ✓ No	Corresponding Author's Name Ivan Rosas
5. Manuscript Title Tocilizumab in Hospitalized Patients Wi	ith COVID-19 Pneumonia	
6. Manuscript Identifying Number (if you kr 20-28700	now it)	
Section 2. The Work Under Co	onsideration for Publi	cation
any aspect of the submitted work (including statistical analysis, etc.)? Are there any relevant conflicts of intere	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	submitted work.
of compensation) with entities as descr	ibed in the instructions. Use port relationships that we lest?	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 .
Name of Entity	Grant? Personal No	on-Financial Other? Comments
Hoffeman LaRoche		✓ Consulting fees for upcoming studies
Section 4. Intellectual Proper	rty Patents & Copyri	ghts
Do you have any patents, whether plan	ned, pending or issued, br	roadly relevant to the work? Yes V No

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Graham 1



Section 1. Identifying Infor	mation				
1. Given Name (First Name) Emily	2. Surname (Last Name) Graham	3. Date 18-February-2021			
4. Are you the corresponding author?	Yes ✓ No	Corresponding Author's Name Ivan Rosas			
5. Manuscript Title Tocilizumab in Hospitalized Patients V	Vith COVID-19 Pneumonia				
6. Manuscript Identifying Number (if you 20-28700	know it)				
Section 2. The Work Under	Consideration for Public	cation			
any aspect of the submitted work (including statistical analysis, etc.)? Are there any relevant conflicts of inte	ng but not limited to grants, da	a third party (government, commercial, private foundation, etc.) for ta monitoring board, study design, manuscript preparation,			
Section 3. Relevant financia	l activities outside the	submitted work.			
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Name of Entity	Grant? Personal No	n-Financial other? Comments			
Roche Products Ltd		Employee			
Section 4. Intellectual Prope	erty Patents & Copyri	yhts			
Do you have any patents, whether pla	nned, pending or issued, bi	oadly relevant to the work? Yes V No			

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Relationships not covered above
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Hunter 1



Section 1.	Identifying Inform	nation			
1. Given Name (Fi Bradley	rst Name)	2. Surname (Last Name) Hunter		3. Date 18-August-2020	
4. Are you the cor	responding author?	Yes Vo	Corresponding Author's	s Name	
5. Manuscript Title Tocilizumab in H		ith COVID-19 Pneumonia			
6. Manuscript Ider 20-28700	ntifying Number (if you kr	now it)			
	ı				
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any aspect of the s statistical analysis, Are there any rel	ubmitted work (including	g but not limited to grants, d		t, commercial, private foundation, etc.) for y design, manuscript preparation,	
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Name of Entity		Grant	on-Financial Other?	Comments	
Kite Pharmaceuticals			□ ✓ Sp	peaker Fees	
Section 4.	•	rty Patents & Copyri	•		
Do you have any	patents, whether plan	ned, pending or issued, b	proadly relevant to the wo	ork? ☐ Yes ✓ No	

Hunter 2



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Matharu 1



Section 1.	Identifying Inform	nation			
1. Given Name (Fi Balpreet	rst Name)	2. Surname (Last Name) Matharu		3. Date 19-August-2020	
4. Are you the cor	responding author?	Yes 🗸 No	Corresponding Author's Ivan Rosas	Name	
5. Manuscript Title Tocilizumab in H		ith COVID-19 Pneumonia			
6. Manuscript Ider 20-28700	ntifying Number (if you kr	now it)			
	ı				
Section 2.	The Work Under Co	onsideration for Publ	ication		
any aspect of the s statistical analysis, Are there any rel	ubmitted work (including	g but not limited to grants, d		, commercial, private foundation, etc.) for y design, manuscript preparation,	
Section 3.	Relevant financial	activities outside the	submitted work.		
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Name of Entity		Grant	on-Financial Other?	Comments	
Roche Products Ltd			Sa	laried Position, Employee	
Section 4.	Intellectual Proper	rty Patents & Copyri	ghts		
Do you have any	patents, whether plan	ned, pending or issued, b	roadly relevant to the wo	ork? ☐ Yes ✓ No	

Matharu 2



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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.

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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

Lisansed. The patent has been lisansed to an ent

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

Rosas 1



Section 1. Identifying Inform	ation			
1. Given Name (First Name) Ivan	2. Surname (Last Na Rosas	me)		3. Date 25-August-2020
4. Are you the corresponding author?	✓ Yes No			
5. Manuscript Title Tocilizumab in Hospitalized Patients Wit	h COVID-19 Pneum	onia		
6. Manuscript Identifying Number (if you kn 20-28700	ow it)			
Section 2. The Work Under Co	nsideration for I	Publication		
Did you or your institution at any time receirany aspect of the submitted work (including statistical analysis, etc.)?				
Are there any relevant conflicts of intere	st? ✓ Yes	No		
If yes, please fill out the appropriate info	•	ou have more thar	n one enti	ty press the "ADD" button to add a row.
Excess rows can be removed by pressing				
Name of Institution/Company	Grant? Persona Fees?	Non-Financial Support?	Other?	Comments
Roche/Genentech	✓			
Section 3. Relevant financial a	activities outside	the submitted	work.	
Place a check in the appropriate boxes in of compensation) with entities as describle clicking the "Add +" box. You should rep	bed in the instruction	ons. Use one line fo	or each en	ntity; add as many lines as you need by
Are there any relevant conflicts of intere	st? ✓ Yes	No		
If yes, please fill out the appropriate info	rmation below.			
Name of Entity	Grant? Persona Fees?	Non-Financial Support?	Other?	Comments
Genentech	✓			Principal Investigator of Investigator Initiated Study Funded by Genentech; Advisory Board
Boehringer				Advisory Board

Rosas 2



Name of Entity	Grant? Persona	Non-Financial	Other?	Comments	
Bristol Myers Squibb			A	dvisory Board	
Section 4. Intellectual Propert	y Patents & Co	opyrights			
Do you have any patents, whether plann	ed, pending or issu	ued, broadly releva	nt to the w	ork?	
Section 5. Relationships not c	overed above				
Are there other relationships or activities potentially influencing, what you wrote i			influenced,	or that give the appeara	nce of
Yes, the following relationships/cond	litions/circumstand	ces are present (exp	olain below	y):	
✓ No other relationships/conditions/cir	cumstances that p	resent a potential	conflict of i	nterest	
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 Stateme	nt				
Based on the above disclosures, this form below.	ા will automatically	generate a disclo	sure statem	nent, which will appear in	the box
Dr. Rosas reports grants from Roche/Ger Genentech, personal fees from Boehring	_			-	; .

Evaluation and Feedback

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

Rosas 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.

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

Savic 1



Section 1.	Identifying Inform	ation		
1. Given Name (Fire	st Name)	2. Surname (Last Name) Savic		3. Date 20-August-2020
4. Are you the corresponding author?		Yes ✓ No	Corresponding Author's Nar	me
5. Manuscript Title Tocilizumab in Ho	ospitalized Patients Wi	th COVID-19 Pneumonia.		
6. Manuscript Iden 20-28700	tifying Number (if you kn	ow it)		
			_	
Section 2.	The Work Under Co	onsideration for Public	cation	
any aspect of the su statistical analysis, e	ıbmitted work (including	but not limited to grants, da	a third party (government, cor Ita monitoring board, study de:	mmercial, private foundation, etc.) for sign, 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	se one line for each entity; a	ationships (regardless of amount dd as many lines as you need by conths prior to publication.
Section 4.	Intellectual Proper	ty Patents & Copyri	ghts	
Do you have any patents, whether planned, pending or issued, broadly relevant to the work? Yes Vo				

Savic 2



Section 5. Relationships not sovered above
Relationships not covered above
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Section 6. Disclosure Statement
Disclosure statement
Based on the above disclosures, this form will automatically generate a disclosure statement, which will appear in the box below.
Dr. Savic has nothing to disclose.

Evaluation and Feedback

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Savic 3



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

Skiest 1



Section 1. Identifying Information	ation		
1. Given Name (First Name) Daniel	2. Surname (Last Name) Skiest		3. Date 18-August-2020
4. Are you the corresponding author?	Yes ✓ No	Corresponding Author's Name Ivan Rosas	
5. Manuscript Title Tocilizumab in Hospitalized Patients Wit	h COVID-19 Pneumonia		
6. Manuscript Identifying Number (if you knows 20-28700	ow it)		
		_	
Section 2. The Work Under Co	onsideration 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 interesting the state of the submitted work (including statistical analysis, etc.)? Are there any relevant conflicts of interesting the state of the submitted work.	but not limited to grants, da st?	ta monitoring board, st	udy design, manuscript preparation,
Name of Institution/Company	Grant•	n-Financial Other?	Comments
Roche	✓		we were a study site. no salary support was received
Section 3. Relevant financial a	activities outside the s	ubmitted work.	
Place a check in the appropriate boxes ir of compensation) with entities as describ clicking the "Add +" box. You should rep Are there any relevant conflicts of interes	n the table to indicate who bed in the instructions. Us ort relationships that wer st? Yes V No	ether you have finance e one line for each en e present during th e	ntity; add as many lines as you need by
Section 4. Intellectual Propert	ty Patents & Copyric	jhts .	
Do you have any patents, whether plann	ned, pending or issued, br	oadly relevant to the	work? ☐ Yes ✓ No

Skiest 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?
Yes, the following relationships/conditions/circumstances are present (explain below):
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Disclosure Statement
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Dr. Skiest reports grants from Roche, during the conduct of the study; .

Evaluation and Feedback

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Skiest 3



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

Spotswood 1



Section 1. Identifying Inform	ation		
1. Given Name (First Name) Helen	2. Surname (Last Name) Spotswood		3. Date 19-August-2020
4. Are you the corresponding author?	Yes ✓ No	Corresponding Author	r's Name
5. Manuscript Title Tocilizumab in Hospitalized Patients Wi	th COVID-19 Pneumonia		
6. Manuscript Identifying Number (if you kn 20-28700	ow it)	_	
Section 2. The Work Under Co			
The Work Under Co	onsideration for Public	cation	
Did you or your institution at any time recei any aspect of the submitted work (including statistical analysis, etc.)? Are there any relevant conflicts of intere	but not limited to grants, da		
Section 3. Relevant financial	activities outside the s	ubmitted work.	
Place a check in the appropriate boxes i of compensation) with entities as descriclicking the "Add +" box. You should repart there any relevant conflicts of interesting the second conflicts of the s	bed in the instructions. Use port relationships that werest? Yes No Primation below.	e one line for each ent e present during the	tity; add as many lines as you need by
Name of Entity	Grant? Personal Nor	n-Financial other?	Comments
Roche Products Ltd.			Employee of Roche Products Ltd and share holder of Roche (SWX:ROG)
Section 4. Intellectual Property Patents & Copyrights			
Do you have any patents, whether plant	ned, pending or issued, br	oadly relevant to the v	vork? Yes Vo

Spotswood 2



Section 5. Polationships 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):
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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. Spotswood reports personal fees and other from Roche Products Ltd., outside the submitted work; .

Evaluation and Feedback

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Spotswood 3



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Ustianowski 1



Section 1. Identifying Inform	ation		
1. Given Name (First Name) Andrew	2. Surname (Last Name) Ustianowski		3. Date 20-August-2020
4. Are you the corresponding author?	Yes ✓ No	Corresponding Author	r's Name
5. Manuscript Title Tocilizumab in Hospitalized Patients Wit	th COVID-19 Pneumonia		
6. Manuscript Identifying Number (if you known 20-28700	ow it)	_	
Continue			
Section 2. The Work Under Co	onsideration for Public	cation	
Did you or your institution at any time receivany aspect of the submitted work (including statistical analysis, etc.)?		. , .	•
Are there any relevant conflicts of intere			
If yes, please fill out the appropriate info Excess rows can be removed by pressing	•	e more than one entit	y press the "ADD" button to add a row.
Name of Institution/Company	Grant	n-Financial other?	Comments
Roche			Our site took part in this research protocol. No other conflict of interest.
Section 3. Relevant financial a	activities outside the s	submitted work.	
Place a check in the appropriate boxes in of compensation) with entities as descril clicking the "Add +" box. You should rep Are there any relevant conflicts of intere	bed in the instructions. Us ort relationships that wer	se one line for each en	tity; add as many lines as you need by
If yes, please fill out the appropriate info			
Name of Entity	Grant	n-Financial Other?	Comments
Gilead Sciences	Fees S	upport?	In HIV but not COVID-19
	V		Sacriot Covid 19

Ustianowski 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
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Dr. Ustianowski reports other from Roche, during the conduct of the study; grants and personal fees from Gilead Sciences, outside the submitted work; .

Evaluation and Feedback

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

Ustianowski 3



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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 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

Waters 1



Section 1.	Identifying Inform	nation		
1. Given Name (Fire Michael	st Name)	2. Surname (Last Name) Waters	3. Date 18-August-2020	
4. Are you the corre	4. Are you the corresponding author? Yes Volume No		Corresponding Author's Name Ivan Rosas	
5. Manuscript Title Tocilizumab in Ho	ospitalized Patients Wi	th COVID-19 Pneumonia		
6. Manuscript Iden 20-28700	tifying Number (if you kn	now it)		
Section 2.	The Work Under Co	onsideration for Public	cation	
any aspect of the su statistical analysis, e	ıbmitted work (including	but not limited to grants, da	a third party (government, commercial, private foundation, etc.) for ta 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. 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 Proper	ty Patents & Copyric	yhts	
Do you have any patents, whether planned, pending or issued, broadly relevant to the work? Yes Vo				

Waters 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?
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
Disclosure Statement
Based on the above disclosures, this form will automatically generate a disclosure statement, which will appear in the box below.
Dr. Waters has nothing to disclose.

Evaluation and Feedback

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

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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.

Report all sources of revenue paid (or promised to be paid) directly to you or your institution on your behalf over the 36 months prior to submission of the work. This should include all monies from sources with relevance to the submitted work, not just monies from the entity that sponsored the research. Please note that your interactions with the work's sponsor that are outside the submitted work should also be listed here. If there is any question, it is usually better to disclose a relationship than not to do so.

For grants you have received for work outside the submitted work, you should disclose support ONLY from entities that could be perceived to be affected financially by the published work, such as drug companies, or foundations supported by entities that could be perceived to have a financial stake in the outcome. Public funding sources, such as government agencies, charitable foundations or academic institutions, need not be disclosed. For example, if a government agency sponsored a study in which you have been involved and drugs were provided by a pharmaceutical company, you need only list the pharmaceutical company.

4. Intellectual Property.

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

Relationships not covered above.

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Pending: The patent has been filed but not issued **Issued:** The patent has been issued by the agency

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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

Youngstein 1



Section 1. Identif	ying Information			
Given Name (First Name) Taryn	2. Surname (La Youngstein	ast Name) 3. Date 21-August-2020		
4. Are you the corresponding	g author? Yes	No Corresponding Author's Name Ivan Rosas		
5. Manuscript Title Tocilizumab in Hospitalize	ed Patients With COVID-19 Pr	neumonia		
6. Manuscript Identifying Nu 20-28700	ımber (if you know it)			
Section 2. The Wo	ork Under Consideration	for Publication		
	work (including but not limited t	ervices from a third party (government, commercial, private foundation, etc.) for to grants, data monitoring board, study design, manuscript preparation,		
Section 3. Relevan	nt financial activities out	side the submitted work.		
of compensation) with ent	tities as described in the instr ou should report relationshi	ndicate whether you have financial relationships (regardless of amount ructions. Use one line for each entity; add as many lines as you need by ps that were present during the 36 months prior to publication . No		
Section 4. Intelled	ctual Property Patents	& Copyrights		
Do you have any patents, whether planned, pending or issued, broadly relevant to the work? Yes Vo				

Youngstein 2



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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.
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Evaluation and Feedback

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