

#### **Instructions**

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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

Badesch 1



Section 1.	Identifying Inform	nation			
1. Given Name (Fir David	rst Name)	2. Surname (Last Name) Badesch	3. Date 10-September-2020		
4. Are you the corr	e you the corresponding author?		Corresponding Author's Name Nadine Al-Naamani		
5. Manuscript Title Prediction of Hea Hypertension As	Pulmonary Arterial Hypertension: The Pulmonary				
	ntifying Number (if you kn				
Section 2.	The Work Under Co	onsideration for Public	ation		
any aspect of the s statistical analysis,	ubmitted 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	ubmitted work		
of compensation clicking the "Add	he appropriate boxes i ) with entities as descri	n the table to indicate who 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 e present during the 36 months prior to publication.		
Section 4.	Intellectual Proper	ty Patents & Copyri <u>c</u>	yhts		
Do you have any	patents, whether plan	ned, pending or issued, br	oadly relevant to the work? ☐ Yes ✓ No		

Badesch 2



Section 5. Relationships not covered above
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Dr. Badesch has nothing to disclose.

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Grinnan 1



Section 1. Identifying Inform	ation			
1. Given Name (First Name) Daniel	2. Surname (Last Name) Grinnan	3. Date 31-August-2020		
4. Are you the corresponding author?	Yes ✓ No	Corresponding Author's Name Nadine Al-Naamani		
<ul> <li>5. Manuscript Title</li> <li>Prediction of Health-Related Quality of I</li> <li>Hypertension Association Registry (PHA</li> <li>6. Manuscript Identifying Number (if you kn</li> </ul>	AR)	Pulmonary Arterial Hypertension: The Pulmonary		
Section 2. The Work Under Co	onsideration for Public	cation		
	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 descri	bed in the instructions. Use port relationships that werest?  Yes No primation below.	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 Noi	n-Financial other? Comments		
Jnited Therapeutics	✓			
Bayer Therapeutics	<b>✓</b>			
lohnson and Johnson				
Section 4. Intellectual Proper	ty Patents & Copyric	ghts		
Do you have any patents, whether plant	ned, pending or issued, br	oadly relevant to the work? Yes V No		

Grinnan 2



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Chakinala 1



Section 1. Identifying Inform	nation			
1. Given Name (First Name)	2. Surname (Last Name)		3. Date	
Murali	Chakinala		09-September-2020	
4. Are you the corresponding author?	☐ Yes ✓ No	Corresponding A		
<ul><li>5. Manuscript Title</li><li>Prediction of Health-Related Quality of Hypertension Association Registry (PH</li><li>6. Manuscript Identifying Number (if you k</li></ul>	AR)	n Pulmonary Arter	ial Hypertension: The Pulmonary	
Section 2. The Work Under C	Consideration for Publi	ication		
Did you or your institution <b>at any time</b> reco any aspect of the submitted work (includin statistical analysis, etc.)? Are there any relevant conflicts of inter	g but not limited to grants, d		rnment, commercial, private foundation, etc rd, study design, manuscript preparation,	:.) for
Section 3. Relevant financial	activities outside the	submitted wor	k	
Place a check in the appropriate boxes of compensation) with entities as desc	in the table to indicate when the instructions. Useport relationships that we rest?	nether you have fi Ise one line for eac	nancial relationships (regardless of amoun ch entity; add as many lines as you need g the 36 months prior to publication.	
Name of Entity	Grant? Personal No	on-Financial Support	er? Comments	
Actelion/Janssen	<b>✓</b>		Clinical research study. Ad board.	
Bayer			Clinical research study. Ad board. Speaker's Bureau.	
Reata	<b>✓</b>		Clinical research study.	
Liquidia	<b>✓</b>		Clinical research study.	
Medtronic	<b>✓</b>		Clinical research study.	
Acceleron	<b>✓</b>		Clinical research study. Ad Board.	
United Therapeutics	<b>✓</b>		Clinical research study. Ad Board.	

Chakinala 2



Name of Entity	Grant?	Personal Fees?	Non-Financial Support?	Other?	Comments
Complexa	<b>✓</b>				Clinical research study.
Altavant	<b>✓</b>	$\checkmark$			Clinical research study. Consulting.
v-Wave		$\checkmark$			Advisory Board.
Express Scripts		$\checkmark$			Advisory Board.
Phase Bio	<b>✓</b>	<b>✓</b>			Clinical research study. Ad Board.
Trio Health Analytics	<b>✓</b>				Clinical research study.
Pulmonary Hypertension Association.				<b>✓</b>	CME content reviewer.
Are there other relationships or activities potentially influencing, what you wrote in Yes, the following relationships/conditions/cir.  At the time of manuscript acceptance, journals may ask authors to On occasion, journals may ask authors to Disclosure Statemer.	s that read in the sub ditions/cir rcumstan ournals wi disclose	ders could pomitted wo cumstance ces that pre	rk? es are present (expessent a potential of ers to confirm and	olain belc conflict o	ow): f interest sary, update their disclosure statements.
			11. 1		
Based on the above disclosures, this form below.	n will auto	omatically (	generate a disclos	sure state	ment, which will appear in the box
Dr. Chakinala reports grants and person Reata, grants from Liquidia, grants from United Therapeutics, grants from Comp	Medtron	ic, grants a	nd personal fees t	from Acc	eleron, grants and personal fees from

Chakinala 3

fees from Express Scripts, grants and personal fees from Phase Bio, grants from Trio Health Analytics, other from Pulmonary

Hypertension Association., outside the submitted work; .



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Chakinala 4



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Horn 1



Section 1.	Identifying Inform	nation		
1. Given Name (Fi Evelyn	rst Name)	2. Surname (Last Name) Horn	3. Date 08-September-2020	
4. Are you the cor	responding author?	Yes ✓ No	Corresponding Author's Name Nadine Al-Naamani	
5. Manuscript Title Prediction of Health-Related Quality of Life and Hospitalization in Pulmor Hypertension Association Registry (PHAR)			Pulmonary Arterial Hypertension: The Pulmonary	
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			-	
Section 2.	The Work Under Co	onsideration for Public	ation	
any aspect of the s statistical analysis,	stitution <b>at any time</b> recei ubmitted work (including	ive payment or services from but not limited to grants, da	a third party (government, commercial, private foundation, etc.) for ta monitoring board, study design, manuscript preparation,	
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Section 4.				
	Intellectual Proper	ty Patents & Copyric	ints	
Do you have any patents, whether planned, pending or issued, broadly relevant to the work? Yes Vo				

Horn 2



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Klinger 1



Section 1.	Identifying Inform	nation					
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4. Are you the cor	responding author?	Yes ✓ No	Corresponding Author's Name Nadine Al-Naamani				
		-	Pulmonary Arterial Hypertension: The Pulmonary				
	ntifying Number (if you kr						
			-				
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Do you have any		.,	oadly relevant to the work? ☐ Yes ✓ No				

Klinger 2



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

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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

Elwing 1



Section 1. Identifying Information	ation					
1. Given Name (First Name) Jean	2. Surname (Last Name Elwing	2)	3. Date 07-September-2020			
4. Are you the corresponding author?	Yes ✓ No	Corresponding Nadine Al-Naa				
5. Manuscript Title Prediction of Health-Related Quality of Life and Hospitalization in Pulmonary Arterial Hypertension: The Pulmonary Hypertension Association Registry (PHAR)						
6. Manuscript Identifying Number (if you kno	JVV 1()					
Section 2. The Work Under Co	nsideration for Pul	blication				
Did you or your institution <b>at any time</b> received any aspect of the submitted work (including statistical analysis, etc.)?  Are there any relevant conflicts of interests	but not limited to grants	, data monitoring boa		tc.) for		
Section 3. Relevant financial a	activities outside th	e submitted wo	r <b>k.</b>			
Place a check in the appropriate boxes ir of compensation) with entities as described clicking the "Add +" box. You should repart there any relevant conflicts of interest.	oed in the instructions ort relationships that v	. Use one line for ea were <b>present durir</b>	ach entity; add as many lines as you nee	ed by		
If yes, please fill out the appropriate info		o .				
Name of Entity	Grant? Personal Fees?	Non-Financial Support?	her? Comments			
United Therapeutics, Acceleron, Liquidia, Actelion, Bayer			Research Studies, Advising			
Altavant			Advising			
Reata, PhaseBio, Complexa, Gossamer Bio, Merck, Arena, Eiger, Akros, Bellerophon, Lung			Research Studies ✓			

Elwing 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):
✓ 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.
I am active in clinic research. Payment for all research activity is paid directly to University of Cincinnati. I do advised pharmaceutical companies. This does not influence my patient care or publications.

### **Evaluation and Feedback**

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

Elwing 3



#### **Instructions**

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1

Min



Section 1.	Identifying Inform	nation			
Given Name (First Name)  Jeff		2. Surname (Last Name) Min	3. Date 10-September-2020		
4. Are you the corresponding author?		Yes ✓ No	Corresponding Author's Name  Nadine Al-Naamani		
		-	Pulmonary Arterial Hypertension: The Pulmonary		
	ntifying Number (if you kn				
			_		
Section 2.	The Work Under Co	onsideration for Public	cation		
Did you or your institution <b>at any time</b> 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 s	submitted work.		
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Section 4.	Intellectual Proper	ty Patents & Copyric	ahts		
Do you have any patents, whether planned, pending or issued, broadly relevant to the work? Yes Vo					

Min 2



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

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Mazimba 1



Section 1.	Identifying Inform	nation			
1. Given Name (First Name) Sula		2. Surname (Last Name) Mazimba	3. Date 31-August-2020		
4. Are you the corresponding author?		Yes ✓ No	Corresponding Author's Name Nadine Al-Naamani		
		-	Pulmonary Arterial Hypertension: The Pulmonary		
	ntifying Number (if you kr				
			-		
Section 2.	The Work Under Co	onsideration for Public	ration		
Did you or your institution <b>at any time</b> 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 s	ubmitted work.		
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Section 4.	Intellectual Proper	rty Patents & Copyrig	phts		
Do you have any patents, whether planned, pending or issued, broadly relevant to the work? ☐ Yes ✓ No					

Mazimba 2



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Relationships not covered above
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Section 6. Disclosure Statement
Disclosure Statement
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Dr. Mazimba has nothing to disclose.

## **Evaluation and Feedback**

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Al-Naamani 1



Section 1. Identifying Informa					
Identifying Informa	ation				
Given Name (First Name)     Nadine	2. Surname (Last Na Al-Naamani	nme)		3. Date 10-September-2020	
4. Are you the corresponding author?   ✓ Yes   No					
5. Manuscript Title Prediction of Health-Related Quality of L Hypertension Association Registry (PHAF	•	tion in Pulmonary	Arterial Hy	ypertension: The Pulmonary	
6. Manuscript Identifying Number (if you kno	ow it)				
Section 2. The Work Under Co	nsideration for I	Publication			
Did you or your institution <b>at any time</b> received any aspect of the submitted work (including lastatistical analysis, etc.)?					tc.) for
Are there any relevant conflicts of interes		] No			
If yes, please fill out the appropriate infor Excess rows can be removed by pressing	•	ou have more thai	n one entit	ty press the "ADD" button to add a	row.
Name of Institution/Company	Grant? Persona	Non-Financial	Other?	Comments	
National Institutes of Health	<b>✓</b>				
American Thoracic Society	<b>✓</b>				
Kynett–FOCUS Junior Faculty Investigator Award for Research in Women's Cardiovascular Health	<b>✓</b>				
Entelligence Young Investigator Award	<b>✓</b>				
Section 3. Relevant financial a	ctivities outside	the submitted	work.		
Place a check in the appropriate boxes in of compensation) with entities as describ clicking the "Add +" box. You should repo Are there any relevant conflicts of interes	ed in the instruction ort relationships th	ons. Use one line f	or each en	tity; add as many lines as you nee	d by

Al-Naamani 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
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Dr. Al-Naamani reports grants from National Institutes of Health, grants from American Thoracic Society, grants from Kynett –FOCUS Junior Faculty Investigator Award for Research in Women's Cardiovascular Health, grants from Entelligence Young Investigator Award, during the conduct of the study.

### **Evaluation and Feedback**

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Al-Naamani 3



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Shlobin 1



Section 1. Identifying Inform	ation					
1. Given Name (First Name) Oksana	2. Surname (Last Name) Shlobin		3. Date 31-August-2020			
4. Are you the corresponding author?	Yes ✓ No	Corresponding Autho				
<ul><li>5. Manuscript Title</li><li>Prediction of Health-Related Quality of</li><li>Hypertension Association Registry (PHA</li><li>6. Manuscript Identifying Number (if you kn</li></ul>	AR)	Pulmonary Arterial H	lypertension: The Pulmonary			
Section 2. The Work Under Co	ancidoration for Dubli	ration				
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	submitted work.				
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Name of Entity	Grant? Personal Nor	n-Financial other?	Comments			
Jnited Therapeutics			Advisor, Speaker Bureau			
Bayer			Advisor, Speaker Bureau			
	rty Patents & Copyrig		Advisor, Speaker Bureau			
Do you have any patents, whether planned, pending or issued, broadly relevant to the work? Yes Vo						

Shlobin 2



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Dr. Oksana A Shlobin reports personal fees from United Therapeutics, personal fees from Bayer, personal fees from Johnson and Johnson, outside the submitted work.

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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.

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**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

Simon 1



Section 1. Identifying Infor	mation					
1. Given Name (First Name) Marc	2. Surname (Last Name Simon	e)		3. Date 01-September-2020	)	
4. Are you the corresponding author?	☐ Yes 🗸 No	Correspond Nadine Al-	ling Author's N Naamani	Name		
5. Manuscript Title Prediction of Health-Related Quality of Hypertension Association Registry (Pl	-	n in Pulmonary <i>I</i>	Arterial Hype	rtension: The Pulmona	ry	
6. Manuscript Identifying Number (if you	know it)					
Section 2. The Work Under	Consideration for Pu	blication				
Did you or your institution <b>at any time</b> re			government,	commercial, private founc	dation, etc.) fo	r
any aspect of the submitted work (includi statistical analysis, etc.)?	ng but not limited to grants	s, data monitoring	board, study	design, manuscript prepa	ration,	
Are there any relevant conflicts of inte	erest? Yes V	0				
Section 3. Relevant financia	al activities outside th	ne submitted v	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 inte	· — · —	-	9	,		
If yes, please fill out the appropriate ir	nformation below.					
Name of Entity	Grant? Personal Fees?	Non-Financial Support <sup>?</sup>	Other? C	omments		
Aadi	<b>✓</b>					
Novartis	<b>✓</b>					
Actelion						
Acceleron						
Complexa						
United Therapeutics						
Altavant Sciences						

Simon 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 Volume
Section 5. Relationships not covered above
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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. Simon reports grants from Aadi, grants from Novartis, personal fees from Actelion, personal fees from Acceleron, personal fees from Complexa, personal fees from United Therapeutics, personal fees from Altavant Sciences, outside the submitted work; .

### **Evaluation and Feedback**

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

Simon 3



#### **Instructions**

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patent

Lammi 1



Section 1.	Identifying Inform	ation			
Given Name (First Name)  Matthew		2. Surname (Last Name) Lammi	3. Date 01-September-2020		
4. Are you the corresponding author?		Yes ✓ No	Corresponding Author's Name Nadine Al-Naamani		
	th-Related Quality of L ociation Registry (PHA	-	Pulmonary Arterial Hypertension: The Pulmonary		
6. Manuscript Identi	fying Number (if you kno	ow it)			
Section 2.	The Work Under Co	onsideration for Public	cation		
Did you or your institution <b>at any time</b> 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.	Rolevant financial :	activities outside the s	ubmitted work		
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Section 4.	ntellectual Proper	ty Patents & Copyrig	yhts		
Do you have any patents, whether planned, pending or issued, broadly relevant to the work? Yes Vo					

Lammi 2



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Relationships not covered above
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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. Lammi has nothing to disclose.

### **Evaluation and Feedback**

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Lammi 3



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patent

Sager 1



Section 1.	Identifying Inforn	mation			
1. Given Name (Firs Jeffrey	t Name)	2. Surname (Last Name) Sager		3. Date 31-August-2020	
4. Are you the corre	esponding author?	ling author?			
	lth-Related Quality of ociation Registry (PH	•	n Pulmonary Arterial H	lypertension: The Pulmonary	
	tifying Number (if you k				
Section 2.	The Work Under C	Consideration for Publi	cation		
any aspect of the su statistical analysis, e	bmitted work (including etc.)?	g but not limited to grants, d		ent, commercial, private foundation und ticulor design, manuscript preparation	
Are there any rele	vant conflicts of inter	rest? Yes ✓ No			
Section 3.	Polovant financial	activities outside the	submitted work		
of compensation)	with entities as descr	ribed in the instructions. U	se one line for each e	cial relationships (regardless of ntity; add as many lines as you	need by
•	+ box. You should revant conflicts of inter	· ·	re <b>present auring tn</b>	e 36 months prior to publicat	lion.
•	ut the appropriate inf				
Name of Entity		Grant? Personal No	n-Financial Other?	Comments	
Johnson and Johnson		✓ ✓	Ларроп		
United therapeutics					
Reata		<b>✓</b>			
PhaseBio					

Sager 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?
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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. Sager reports grants and personal fees from Johnson and Johnson, grants and personal fees from United therapeutics, grants from Reata, grants from PhaseBio, outside the submitted work;.

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Sager 3



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

Thenappan 1



Section 1. Identifying Inform	ation			
1. Given Name (First Name) Thenappan	2. Surname (Last Name) Thenappan	3. Date 01-September-2020		
4. Are you the corresponding author?	Yes ✓ No	Corresponding Author's Name Nadine Al-Naamani		
<ul> <li>5. Manuscript Title</li> <li>Prediction of Health-Related Quality of Life and Hospitalization in Pulmonary Arterial Hypertension: The Pulmonary Hypertension Association Registry (PHAR)</li> <li>6. Manuscript Identifying Number (if you know it)</li> </ul>				
Section 2. The Work Under Co	onsideration for Public	cation		
Did you or your institution <b>at any time</b> 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	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  No  If yes, please fill out the appropriate information below.				
Name of Entity	Grant? Personal Nor	n-Financial other? Comments		
Jnited Therapeutics	<b>✓</b>	Research grant		
Altavant		Advisory Board		
Tenax Therapeutics		Research Grant		
Section 4. Intellectual Proper	ty Patents & Copyric	ghts		
Do you have any patents, whether plann				

Thenappan 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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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. Thenappan reports grants from United Therapeutics, personal fees from Altavant, grants from Tenax Therapeutics, outside the submitted work; .

### **Evaluation and Feedback**

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Thenappan 3



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Frantz 1



Section 1. Identifying Inform	nation			
1. Given Name (First Name) Robert	2. Surname (Last Name) Frantz	3. Date 01-September-2020		
4. Are you the corresponding author?	☐ Yes 🗸 No	Corresponding Author's Name Nadine Al-Naamani		
5. Manuscript Title Prediction of Health-Related Quality of Life and Hospitalization in Pulmonary Arterial Hypertension: The Pulmonary Hypertension Association Registry (PHAR)				
6. Manuscript Identifying Number (if you k	now it)	_		
Section 2. The Work Under C	onsideration for Public	cation		
Did you or your institution <b>at any time</b> 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 s	submitted work.		
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Name of Entity	Grant? Personal Nor	on-Financial Other? Comments		
Actelion		Consulting, Advisory Board, Steering Committee		
Section 4. Intellectual Prope	rty Patents & Copyric	ghts		
Do you have any patents, whether plan	nned, pending or issued, br	roadly relevant to the work? Yes V No		

Frantz 2



Section 5. Relationships not covered above
Relationships not covered above
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Dr. Frantz reports personal fees and other from Actelion, outside the submitted work; .

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#### 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

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Section 1. Identifying Inform	ation			
Given Name (First Name)  Corey	2. Surname (Last Name) Ventetuolo		3. Date	
4. Are you the corresponding author?	Yes ✓ No	Corresponding Author's Name Nadine Al-Naamani		
5. Manuscript Title Prediction of Health-Related Quality of L Hypertension Association Registry (PHA	•	n Pulmonary Arterial H	Hypertension: The Pulmonary	
6. Manuscript Identifying Number (if you know	ow it)			
Section 2. The Work Under Co	onsideration for Publi	cation		
	ve payment or services fron	n a third party (governm	ent, commercial, private foundation, etc.) for tudy design, manuscript preparation,	
Are there any relevant conflicts of intere				
If yes, please fill out the appropriate info Excess rows can be removed by pressing		ve more than one ent	ity press the "ADD" button to add a row.	
Name of Institution/Company	Grant•	n-Financial Other	Comments	
NIH	<b>✓</b>			
American Heart Association				
Section 3. Relevant financial a	activities outside the	submitted work.		
Place a check in the appropriate boxes ir of compensation) with entities as described clicking the "Add +" box. You should rep	bed in the instructions. U	se one line for each e	ntity; add as many lines as you need by	
Are there any relevant conflicts of intere				
If yes, please fill out the appropriate info	rmation below.			
Name of Entity	Grant	n-Financial Other?	Comments	
Acceleron Pharma			Consultant	
Jnited Therapeutics	<b>✓</b>		To institution	

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	Grant? Personal Fees?	Non-Financial Support?	Other •	Comments
Eiger			<b>✓</b>	Research funds to my institution.
Section 4. Intellectual Property				
Intellectual Property	/ Patents & Co	pyrights		
Do you have any patents, whether planne	ed, pending or issue	ed, broadly releva	nt to the	work? Yes V No
Section 5. Relationships not co	overed above			
Are there other relationships or activities to potentially influencing, what you wrote in			nfluence	d, or that give the appearance of
Yes, the following relationships/condi	tions/circumstance	es are present (exp	olain belo	w):
✓ No other relationships/conditions/circ	cumstances that pre	esent a potential o	conflict of	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 Statemen	nt			
Based on the above disclosures, this form below.		generate a disclos	sure state	ment, which will appear in the box
Dr. Ventetuolo reports grants from NIH, c fees from Acceleron Pharma, grants from	•			, ,

### **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.

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