

Section 1. Identifying Infor	mation		
Given Name (First Name) Elaine	2. Surname (Last Name) Yu)	3. Date 20-January-2021
4. Are you the corresponding author?	√ Yes No		
5. Manuscript Title Zoledronic acid for prevention of bor	ne loss in patients receivin	g bariatric surgery	
6. Manuscript Identifying Number (if you	know it)		
		alanda protessioni	
Section 2. The Work Under	Consideration for Pub	olication	
any aspect of the submitted work (includ statistical analysis, etc.)?	ing but not limited to grants,	data monitoring board, stu	nt, commercial, private foundation, etc.) for idy design, manuscript preparation,
Are there any relevant conflicts of into If yes, please fill out the appropriate in Excess rows can be removed by press	nformation below. If you h		ry press the "ADD" button to add a row
Name of Institution/Company		Ion-Financial Other?	Comments
Н	✓		
oris Duke Charitable Fund	✓ □		
assachusetts General Hospital	V		
Section 3. Relevant financi	al activities outside th	e submitted work.	
Place a check in the appropriate boxe of compensation) with entities as desclicking the "Add +" box. You should	cribed in the instructions.	Use one line for each en	al relationships (regardless of amount tity; add as many lines as you need by 36 months prior to publication.
Are there any relevant conflicts of int			
If yes, please fill out the appropriate i	ntormation below.		
Name of Entity	Grant? Personal Fees?	Support? Other?	Comments
mgen, Inc	$\overline{\checkmark}$		Investigator-initiated research grant



Name of Entity	Grant? Personal Fees?	Non-Financial Other?	Comments
Seres Therapeutics	/	And the second s	vestigator-initiated research grant
Section 4. Intellectu	al Property Patents & Copy	rights	
Do you have any patents, who	ether planned, pending or issued,	, broadly relevant to the wo	rk? Yes 🗸 No
Section 5. Palations	hips not covered above		
Are there other relationships	or activities that readers could pe you wrote in the submitted work?	rceive to have influenced, o	or that give the appearance of
	ships/conditions/circumstances a		
No other relationships/co	nditions/circumstances that prese	ent a potential conflict of in	terest
At the time of manuscript acc On occasion, journals may as	eptance, journals will ask authors cauthors to disclose further inforr	to confirm and, if necessar mation about reported rela	y, update their disclosure statements. tionships.
Section 6. Disclosure	: Statement		
Based on the above disclosur below.	es, this form will automatically ge	enerate a disclosure stateme	ent, which will appear in the box
Dr. Yu reports grants from NI during the conduct of the stu	H, grants from Doris Duke Charita Idy; grants from Amgen, Inc, gran	able Fund, grants from Mass ats from Seres Therapeutics,	sachusetts General Hospital, outside the submitted work; .

Evaluation and Feedback



Section 1. Identifying Inform	nation	
Given Name (First Name) Matthew	2. Surname (Last Name) Hutter	3. Date 24-January-2021
4. Are you the corresponding author?	Yes 🗸 No	Corresponding Author's Name Elaine Yu
5. Manuscript Title Zoledronic acid for prevention of bone	e loss in patients receiving	g bariatric surgery
6. Manuscript Identifying Number (if you k	now it)	
Section 2. The Work Under C	Consideration for Pub	lication
Did you or your institution at any time recany aspect of the submitted work (includin statistical analysis, etc.)?	eive payment or services fro g but not limited to grants,	om a third party (government, commercial, private foundation, etc.) for data monitoring board, study design, manuscript preparation,
Are there any relevant conflicts of inte	rest?	
Section 3. Relevant financia	l activities outside the	e submitted work.
of compensation) with entities as desc	ribed in the instructions.	whether you have financial relationships (regardless of amount Use one line for each entity; add as many lines as you need by were present during the 36 months prior to publication .
Are there any relevant conflicts of inte	rest? ☐ Yes 🗸 No	,
Section 4. Intellectual Prope	erty – Patents & Copy	rights
Do you have any patents, whether plan	nned, pending or issued,	broadly relevant to the work? Yes Vo

Hutter 2



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

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Hutter 3



Section 1. Identifying Inform	ation		
Given Name (First Name) Claire	2. Surname (Last Name) Rushin	e e	3. Date 24-January-2021
4. Are you the corresponding author?	Yes 🗸 No	Corresponding Author's Na Elaine Yu	me
5. Manuscript Title Zoledronic acid for prevention of bone	loss in patients receiving	bariatric surgery	
6. Manuscript Identifying Number (if you kn	now it)		
Did you or your institution at any time rece any aspect of the submitted work (including statistical analysis, etc.)? Are there any relevant conflicts of interesting the submitted work in the submitted work (including statistical analysis, etc.)?	g but not limited to grants, d	n a third party (government, co	mmercial, private foundation, etc.) for esign, manuscript preparation,
Section 3. Relevant financial	activities outside the	submitted work.	
Place a check in the appropriate boxes of compensation) with entities as descr clicking the "Add +" box. You should repare there any relevant conflicts of interest.	ibed in the instructions. U port relationships that we	Ise one line for each entity; a	add as many lines as you need by
Section 4. Intellectual Proper	rty Patents & Copyri	ghts	
Do you have any patents, whether plan	ned, pending or issued, b	oroadly relevant to the work	? ☐ Yes ✓ No



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Ms. Rushin has nothing to disclose.

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Rushin 3



Section 1. Identifying Inform	nation			
Given Name (First Name) Katherine	2. Surnan Lindema	ne (Last Name) n		3. Date 24-January-2021
4. Are you the corresponding author?	Yes	√ No	Corresponding Author's Na Elaine Yu	nme
5. Manuscript Title Zoledronic acid for prevention of bone	loss in pati	ents receiving b	pariatric surgery	
6. Manuscript Identifying Number (if you k	now it)			
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Section 4. Intellectual Prope	rty Pate	nts & Copyrig	ghts	
Do you have any patents, whether plan	nned, pendi	ng or issued, br	oadly relevant to the work	? ☐ Yes ✓ No



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Lindeman 3



Section 1. Identifying Inform	nation	
1. Given Name (First Name) Yi	2. Surname (Last Nam Liu	3. Date 25-January-2021
4. Are you the corresponding author?	☐ Yes ✓ No	Corresponding Author's Name Elaine Yu
5. Manuscript Title Zoledronic acid for prevention of bone	e loss in patients receivi	ing bariatric surgery
6. Manuscript Identifying Number (if you k	know it)	
Section 2. The Work Under C	Consideration for Pu	ublication
		from a third party (government, commercial, private foundation, etc.) for ts, data monitoring board, study design, manuscript preparation,
Are there any relevant conflicts of inte	rest? ☐ Yes 🕡 N	No
Section 3. Relevant financia	l activities outside t	the submitted work.
of compensation) with entities as desc	ribed in the instruction eport relationships that	e whether you have financial relationships (regardless of amount ns. Use one line for each entity; add as many lines as you need by t were present during the 36 months prior to publication. No
Section 4. Intellectual Prope	erty Patents & Cop	ovrights
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Do you have any patents, whether pla	nned, pending or issue	ed, broadly relevant to the work? Yes V No

Liu 2



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Dr. Liu has nothing to disclose.

Evaluation and Feedback



Given Name (First Name) Michael	2. Surname (Last Name) Cheney		3. Date 25-January-2021
4. Are you the corresponding author?	☐ Yes ✓ No	Corresponding Author's N Elaine Yu	Name
5. Manuscript Title Zoledronic acid for prevention of bor	ne loss in patients receiving l	bariatric surgery	
6. Manuscript Identifying Number (if you	know it)		
Section 2. The Week Hader			
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Did you or your institution at any time reany aspect of the submitted work (includ statistical analysis, etc.)? Are there any relevant conflicts of int Section 3. Relevant financi Place a check in the appropriate boxe of compensation) with entities as declicking the "Add +" box. You should	erest? Yes No al activities outside the es in the table to indicate where the composition of the compositio	submitted work. nether you have financial rise one line for each entity	design, manuscript preparation, relationships (regardless of amoun r; add as many lines as you need b
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Mr. Cheney has nothing to disclose.

Evaluation and Feedback



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Given Name (First Name) Maya	2. Surname (Last Name) Cote		3. Date 25-January-2021
4. Are you the corresponding author?	☐ Yes ✓ No	Corresponding Author's Nam Elaine Yu	e
5. Manuscript Title Zoledronic acid for prevention of bone	loss in patients receiving	bariatric surgery	
6. Manuscript Identifying Number (if you ki	now it)		
Section 2. The Work Under C	onsideration for Publi	to the state of th	mercial, private foundation, etc.) for
any aspect of the submitted work (including statistical analysis, etc.)?	g but not limited to grants, d	ata monitoring board, study desi	ign, manuscript preparation,
Are there any relevant conflicts of inter	est?		
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Place a check in the appropriate boxes of compensation) with entities as describing the "Add +" box. You should re Are there any relevant conflicts of inter-	ribed in the instructions. Useport relations hips that we	lse one line for each entity; ad	ld as many lines as you need by
Section 4. Intellectual Prope	rty Patents & Copyri	ghts	
Do you have any patents, whether plan	nned, pending or issued, b	roadly relevant to the work?	☐ Yes ✓ No

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