

Instructions

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

Crim 1



Section 1. Identifying Inform	mation				
Given Name (First Name)	2. Surname	e (Last Nam	e)		3. Date
Courtney	Crim				03-February-2020
4. Are you the corresponding author?	Yes	✓ No	Correspon Mark Dra	ding Autho	or's Name
5. Manuscript Title Risk of Exacerbation and Pneumonia w	vith Single Inl	naler Triple	e Versus Dual Th	nerapy in II	MPACT
6. Manuscript Identifying Number (if you k	now it)				
Section 2. The Work Under (Consideration	on for Pu	ıblication		
Did you or your institution at any time recany aspect of the submitted work (includin statistical analysis, etc.)?					ent, commercial, private foundation, etc.) foud design, manuscript preparation,
Are there any relevant conflicts of inte			lo		
If yes, please fill out the appropriate in Excess rows can be removed by pressi			have more tha	n one enti	ty press the "ADD" button to add a row
Name of Institution/Company			Non-Financial Support?	Other?	Comments
GlaxoSmithKline				✓	This study was funded by GSK
GlaxoSmithKline			✓		Editorial support by Chrystelle Rasamison of Fishawack Indicia Ltd, UK, was funded by GSK
Section 3. Relevant financia	l activities o	outside t	he submitted	work.	
Place a check in the appropriate boxes of compensation) with entities as desc clicking the "Add +" box. You should re	ribed in the ir	nstruction	s. Use one line f	or each en	itity; add as many lines as you need by
Are there any relevant conflicts of inter	·	·	lo	yc	. 22on and prior to publication.
If yes, please fill out the appropriate in					
Name of Entity	Grant? F	Personal	Non-Financial	Other?	Comments
		Fees?	Support?	Other	
GlaxoSmithKline				✓	Employee of GSK

Crim 2



Name of Entity	Grant? Personal Fees?	Non-Financial O	ther? Comments	
GlaxoSmithKline			✓ Shares/options held in GSK	
Continue A				
Section 4. Intellectual Propert	y Patents & Cop	yrights		
Do you have any patents, whether plann	ed, pending or issuec	l, broadly relevant	to the work? Yes V No)
Section 5. Relationships not c	overed above			
Are there other relationships or activities potentially influencing, what you wrote i			luenced, or that give the appear	rance of
Yes, the following relationships/cond	itions/circumstances	are present (expla	in below):	
No other relationships/conditions/cir	cumstances that pres	sent a potential co	nflict of interest	
At the time of manuscript acceptance, jo On occasion, journals may ask authors to				ure statements.
Section 6. Disclosure Stateme	nt			
Based on the above disclosures, this form below.		enerate a disclosur	e statement, which will appear	in the box
Dr. Crim reports other from GlaxoSmithk personal fees from GlaxoSmithKline, oth			_	of the study;

Evaluation and Feedback

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Crim 3



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patent

Jones 1



Section 1. Identifying Inform	nation				
identifying inform	ilation				
Given Name (First Name) Christine Elaine	2. Surnar Jones	ne (Last Nan	ne)		3. Date 03-February-2020
4. Are you the corresponding author?	Yes	✓ No	Correspon Mark Dra	ding Autho	or's Name
5. Manuscript Title Risk of Exacerbation and Pneumonia w	vith Single I	nhaler Tripl	e Versus Dual Th	nerapy in I	MPACT
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Did you or your institution at any time reco any aspect of the submitted work (includin statistical analysis, etc.)?					ent, commercial, private foundation, etc.) foudy design, manuscript preparation,
Are there any relevant conflicts of inter	est? 🗸 `	res 🔲 I	No		
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Excess rows can be removed by pressir	ng the "X" b				
Name of Institution/Company	Grant?	Personal Fees?	Non-Financial Support?	Other?	Comments
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clicking the "Add +" box. You should re Are there any relevant conflicts of inter	·	·	t were present (No	auring the	e 30 months prior to publication.
If yes, please fill out the appropriate inf			NU		
Name of Entity	Grant?	Personal	Non-Financial	Other?	Comments
		Fees?	Support?		
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Jones 2



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Intellectual Propert	y Patents & Co	pyrights			
Do you have any patents, whether plann	ed, pending or issu	ed, broadly releva	nt to the	work? Yes V	
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No other relationships/conditions/cir	cumstances that pr	esent a potential	conflict of	finterest	
At the time of manuscript acceptance, jo On occasion, journals may ask authors to					ments.
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Based on the above disclosures, this form below.		generate a disclos	sure state	ment, which will appear in the bo	х
Dr. Jones reports other from GlaxoSmith study; personal fees from GlaxoSmithKlii					

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4. Are you the corresponding author?	Yes	✓ No	Correspon Mark Drai	_	or's Name
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straZeneca		/			



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Boehringer Ingelheim		✓			
Chiesi					
GlaxoSmithKline					
Novartis		\checkmark			
Pfizer					
Sanofi					
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Based on the above disclosures, this form below.		generate a disclos	sure stater	ment, which will appear in the box	
Dr. Halpin reports other from GlaxoSmit study; personal fees from AstraZeneca, p from Chiesi, personal fees from GlaxoSm Pfizer, personal fees from Sanofi, outsid	personal fees and no nithKline, personal fe	on-financial suppo ees and non-finan	ort from Bo	oehringer Ingelheim, personal fees	



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LaFon 1



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4. Are you the cor	responding author?	Yes	✓ No	-	Corresponding Author's Name Mark Dransfield				
5. Manuscript Title Risk of Exacerbat	e tion and Pneumonia wi	th Single I	nhaler Triple	e Versus Dual Th	nerapy in	IMPACT			
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Do you have any	patents, whether planr	ned, pendi	ng or issued	d, broadly releva	ant to the	work? Yes V No			

LaFon 2



Section 5. Relationships not sovered above
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Lipson 1



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GlaxoSmithKline			√	Shares/options held in GSK	
Section 4. Intellectual Bronout					
Intellectual Propert	y Patents & Cop	yrights			
Do you have any patents, whether plann	ed, pending or issue	d, broadly releva	nt to the v	work? Yes V No	
Section 5. Relationships not c	overed above				
Are there other relationships or activities potentially influencing, what you wrote i			nfluenced	d, or that give the appearance of	
Yes, the following relationships/cond	itions/circumstances	s are present (exp	olain belo	w):	
No other relationships/conditions/cir	cumstances that pre	esent a potential c	conflict of	interest	
At the time of manuscript acceptance, jo On occasion, journals may ask authors to					ents.
Section 6. Disclosure Stateme	nt				
Based on the above disclosures, this form below.		generate a disclos	ure state	ment, which will appear in the box	
Dr. Lipson reports other from GlaxoSmit study; other from GlaxoSmithKline, othe					

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Lipson 3



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4. Intellectual Property.

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Section 1. Identifying Infor	mation	
1. Given Name (First Name) David	2. Surname (Last N Lomas	Name) 3. Date 03-February-2020
4. Are you the corresponding author?	☐ Yes ✓ No	Corresponding Author's Name Mark Dransfield
5. Manuscript Title Risk of Exacerbation and Pneumonia	with Single Inhaler Tr	riple Versus Dual Therapy in IMPACT
6. Manuscript Identifying Number (if you	know it)	
Section 2. The Work Under	Consideration for	Publication
any aspect of the submitted work (includi statistical analysis, etc.)? Are there any relevant conflicts of inte If yes, please fill out the appropriate in	ng but not limited to grerest? Yes nformation below. If y	tes from a third party (government, commercial, private foundation, etc.) for ants, data monitoring board, study design, manuscript preparation, No You have more than one entity press the "ADD" button to add a row
Excess rows can be removed by press Name of Institution/Company	Grant? Persona	Other• Comments
ilaxoSmithKline		This study was funded by GSK
ilaxoSmithKline		Editorial support by Chrystelle Rasamison of Fishawack Indicia Ltd, UK, was funded by GSK
Section 3. Relevant financia	al activities outsid	e the submitted work.
of compensation) with entities as des	cribed in the instructi	cate whether you have financial relationships (regardless of amoun ions. Use one line for each entity; add as many lines as you need by hat were present during the 36 months prior to publication .
Are there any relevant conflicts of inte		No
If yes, please fill out the appropriate in	nformation below.	
Name of Entity	Grant? Persona	Other• Comments
GlaxoSmithKline		For work on antitrypsin deficiency



Name of Entity	Grant?	Personal Fees?	Non-Financial Support?	Other?	Comments	
Griffols		✓			Jury for eALTA award	
GlaxoSmithKline		✓			Honoraria and consultancy fees and chaired the GSK Respiratory Therapy Area Board 2012-2015	
Section 4. Intellectual Propert	y Pate	ents & Cop	pyrights			
Do you have any patents, whether planned, pending or issued, broadly relevant to the work? Yes No Section 5. Relationships not covered above						
Are there other relationships or activities	that read	ders could i	oerceive to have i	nfluence	d, or that give the appearance of	
potentially influencing, what you wrote i					,, , , , , , , , , , , , , , , , , , ,	
Yes, the following relationships/cond	litions/cir	cumstance	es are present (exp	olain belo	ow):	
No other relationships/conditions/cir	cumstan	ces that pre	esent a potential o	conflict o	finterest	
At the time of manuscript acceptance, jo On occasion, journals may ask authors to						nents.
Section 6. Disclosure Stateme	4					
Disclosure Statellie						
Based on the above disclosures, this forn below.	n will auto	omatically (generate a disclos	sure state	ment, which will appear in the box	
Dr. Lomas reports personal fees from Glathe study; grants from GlaxoSmithKline, submitted work; .						of



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Did you or your institution at any time recany aspect of the submitted work (includi statistical analysis, etc.)? Are there any relevant conflicts of intellifyes, please fill out the appropriate in Excess rows can be removed by press	ng but not limited to grainerest? Yes notes formation below. If yo	nts, data monitoring No	board, study design, manuscript prepara	tion,
Name of Institution/Company	Grant? Personal Fees?	Non-Financial Support?	Other? Comments	
GlaxoSmithKline			This study was funded by GSK	
GlaxoSmithKline		✓	Editorial support by Chrystelle Rasamison of Fishawack Indicia UK, was funded by GSK	Ltd,
Section 3. Relevant financia	al activities outside	the submitted v	vork.	
Place a check in the appropriate boxe of compensation) with entities as desclicking the "Add +" box. You should r Are there any relevant conflicts of intellif yes, please fill out the appropriate in	s in the table to indicate cribed in the instruction report relationships the crest?	e whether you hans. Use one line fo	ve financial relationships (regardless or r each entity; add as many lines as you	u need by
ii yes, picase iiii out the appropriate ii	normation below.			
Name of Entity	Grant? Personal Fees?	Non-Financial Support?	Other? Comments	
AstraZeneca				



Name of Entity	Grant?	Personal Fees?	Non-Financial Support?	Other?	Comments	
Boehringer Ingelheim	√	✓				
Chiesi	✓	✓				
Cipla		✓				
Genentech		✓				
Glenmark	√	✓				
GlaxoSmithKline		✓				
Menarini	✓	✓				
Mundipharma	✓	\checkmark				
Novartis	✓	\checkmark				
Peptinnovate		\checkmark				
Pfizer	√	\checkmark				
Pulmatrix	✓	\checkmark				
Theravance	✓	✓				
Verona	√	\checkmark				
Section 4. Intellectual Propert Do you have any patents, whether plann Section 5. Relationships not of	ed, pend	ing or issue		nt to the v	work? ☐ Yes 🗸 No	
Are there other relationships or activities potentially influencing, what you wrote i				influenced	d, or that give the appearance of	
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Dr. Singh reports other from GlaxoSmithKline, non-financial support from GlaxoSmithKline, during the conduct of the study; grants and personal fees from AstraZeneca, grants and personal fees from Boehringer Ingelheim, grants and personal fees from Chiesi, personal fees from Cipla, personal fees from Genentech, grants and personal fees from GlaxoSmithKline, grants and personal fees from Menarini, grants and personal fees from Mundipharma, grants and personal fees from Novartis, personal fees from Peptinnovate, grants and personal fees from Pizer, grants and personal fees from Pulmatrix, grants and personal fees from Theravance, grants and personal fees from Verona, outside the submitted work;

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Section 1. Identifying Inform	nation		
Given Name (First Name) Fernando	2. Surname (Last Name) Martinez		3. Date 03-February-2020
4. Are you the corresponding author?	☐ Yes ✓ No	Corresponding Auth Mark Dransfield	or's Name
5. Manuscript Title Risk of Exacerbation and Pneumonia w	rith Single Inhaler Triple Ve	rsus Dual Therapy in	IMPACT
6. Manuscript Identifying Number (if you k	now it)		
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Section 2. The Work Under C	Consideration for Public	cation	
Did you or your institution at any time rece any aspect of the submitted work (includin statistical analysis, etc.)? Are there any relevant conflicts of inter	g but not limited to grants, da		ent, commercial, private foundation, etc.) for tudy design, manuscript preparation,
•	formation below. If you hav	e more than one ent	ity press the "ADD" button to add a row.
Name of Institution/Company	Grant? Personal No	n-Financial Support?	Comments
GlaxoSmithKline	✓		Sponsor of the study
GlaxoSmithKline		V	Editorial support by Chrystelle Rasamison of Fishawack Indicia Ltd, UK, was funded by GSK
Section 3. Relevant financial	activities outside the	submitted work.	
	ribed in the instructions. Us	se one line for each e	cial relationships (regardless of amount ntity; add as many lines as you need by e 36 months prior to publication.
Are there any relevant conflicts of inter If yes, please fill out the appropriate inf			



Name of Entity	Grant?	Personal Fees	Non-Financial Support?	Other?	Comments
AstraZeneca		√	/		COPD Advisory Boards (personal fees and non-personal travel support); Study Steering Committee (personal fees and non-personal travel support), ALAT presentation (personal fees and non-financial travel support)
Boehringer Ingelheim		✓	✓		COPD Advisory Board (personal fees and non-personal travel support); ATS presentation (personal fees); IPF disease state presentation at ALAT (personal fee and non-personal travel support); Progressive pulmonary fibrosis DSMB (no financial support but travel); ERS IPF study result presentation (personal fee and travel support)
ProterrixBio			✓		COPD Scientific Advisory Board (no direct financial compensation, support for NIH study)
Columbia University		✓			COPD CME program (personal fee honoraria)
Genentech		✓	V		COPD Advisory Board (personal fee and non-personal travel support) and asthma DSMB (no support); IPF Advisory Board (personal fees honorarium and non-personal travel support)
GlaxoSmithKline		✓	V		COPD Advisory Boards (personal fees honoaria and non-personal travel support), Study Steering Committee (non-personal travel support), DSMB (other - academic co-authorship), ERS presentation (non-personal travel support)
Inova Fairfax Health System		✓	✓		COPD CME presentation (personal support honoarium and non-personal travel support)
MD Magazine		✓			COPD CME program (personal fee honorarium and non-personal travel support)
Methodist Hospital Brooklyn		✓			IPF CME program (personal fee honoraria)
Miller Communicatinos		✓	✓		COPD and IPF CME programs (personal fees honoraria and non- personal travel support)



Name of Entity	Grant?	Personal Fees?	Non-Financial Support?	Other?	Comments	
National Society for Continuing Education		✓	✓		COPD and IPF CME programs (perfonal fees honoraria and non- personal travel support)	
Novartis		✓	/		COPD Advisory Board and International meeting COPD disease presentations (personal fees honoraria and non personal travel support).	
New York University		✓			ILD CME program (personal fee honoraria)	
Pearl Pharmaceuticals		✓	/		COPD Advisory Boards (personal fee honoraria and non-personal travel support) AND COPD Steering Committee (academic productivity)	
PeerView Communications		\checkmark	✓		COPD and IPF CME programs (personal fees honoraria and non- personal travel support)	
Prime Communications		✓	✓		COPD CME programs (personal fees honoraria and non-personal travel support)	
Puerto Rican Respiratory Society		✓	✓		COPD and IPF CME program (personal fee honoraria and non- personal travel support)	
Chiesi		✓	/		COPD CME presentation (personal fees honoraria and non-personal travel support); Advisory Board (personal fees honoraria and travel support)	
Sunovion		✓	✓		COPD Advisory Boards (personal fee honoraria and non-personal travel support)	
Theravance		✓	✓		COPD Advisory Board (personal fee honoraria and non-personal travel support)	
UpToDate		\checkmark			COPD CME (personal fee honoraria)	
WebMD/MedScape		✓			COPD CME presentations (personal fee honoraria)	
Afferent/Merck				✓	IPF Study Steering Committee (other - co-authorship)	
Gilead			✓		IPF Study Steering Committee (other - co-authorship)	
Nitto			✓		IPF Study Teleconference and Steering Committee (non-personal travel support)	



Patara/Respivant		\checkmark			Venture capital expert advice for IPF Study (personal fees honoraria); IPF Steering Committee
Potomac		✓	✓		IPF CME presentations (personal fee honoraria and non-personal travel support)
Biogen				✓	IPF Study DSMB (no support) and IPF Study Steering Committee (academic productivity)
University of Alabama Birmingham		✓	✓		IPF CME presentation (personal fee honoraria and non-personal travel support)
Veracyte				✓	IPF Study Steering Committee (other co-authorship)
Zambon			✓		IPF Study Meeting (non-personal travel support) and Advisory Board (personal fees honorarium)
American Thoracic Society		\checkmark			AJRCCM DE (personal fee honoraria)
NIH	✓				IPF UO1, COPD UO1/RO1
Physicians Education Resource		✓	✓		COPD CME program (personal fee honorarium and travel support)
Rockpointe		\checkmark			COPD CME program (personal fee honorarium)
Prometic				✓	IPF Steering Committee (academic productivity)
Rare Disease Healthcare Communications	✓				IPF CME program (personal fee honorarium)
Bayer				✓	IPF Steering Committee (academic productivity)
Bridge Biotherapeutics				✓	IPF Advisor (academic productivity)
Canadian Respiratory Network		✓	✓		COPD CME presentation (honorarium and travel support)
ProMedior	✓				IPF Steering Committee (academic productivity)
Teva		\checkmark	✓		COPD Advisory Board (personal fee honorarium and travel support)
France Foundation		✓			IPF CME program
Physicians Education Resource		\checkmark	√		COPD CME
American College of Chest Physicians		✓	√		
Continuing Education		\checkmark	√		
ConCert		\checkmark	\checkmark		
Roche		✓	√		



Interwites					
Integritas		✓			
Unity		✓			
Western Connecticut Health Network		✓			
Academic CME		\checkmark			
PlatformIQ		\checkmark			
Biogen				√	Steering committee member
Do you have any patents, whether planne	•	-		ant to the	e work? Yes V No
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Relationships not co	overea a	above			
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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



Section 1. Identifying Inform	ation		
1. Given Name (First Name) Gerard	2. Surname (Last Name) Criner		3. Date 03-February-2020
4. Are you the corresponding author?	☐ Yes ✓ No	Corresponding Autho	or's Name
5. Manuscript Title Risk of Exacerbation and Pneumonia wit	ch Single Inhaler Triple Ve	rsus Dual Therapy in I	MPACT
6. Manuscript Identifying Number (if you know	ow it)		
		_	
Section 2. The Work Under Co			
The Work Under Co	nsideration for Public	cation	
Did you or your institution at any time received any aspect of the submitted work (including statistical analysis, etc.)? Are there any relevant conflicts of intereal lf yes, please fill out the appropriate inform Excess rows can be removed by pressing	but not limited to grants, da st? Yes No rmation below. If you hav	ta monitoring board, st	udy design, manuscript preparation,
Name of Institution/Company	Grant? Personal Nor	n-Financial other?	Comments
GlaxoSmithKline			This study was funded by GSK
GlaxoSmithKline		/	Editorial support by Chrystelle Rasamison of Fishawack Indicia Ltd, UK, was funded by GSK
Section 3. Polovant financial s		1 20 1 1	
Relevant financial a	activities outside the s	submitted work.	
Place a check in the appropriate boxes in of compensation) with entities as described clicking the "Add +" box. You should rep	bed in the instructions. Us	se one line for each er	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•	n-Financial other?	Comments
Almirall			



Name of Entity	Grant?	Personal Fees?	Non-Financial Support?	Other?	Comments
AstraZeneca		✓			
Boehringer Ingelheim		✓			
Chiesi		\checkmark			
CSA Medical		\checkmark			
Eolo		✓			
GlaxoSmithKline		✓			
HGE Technologies				✓	Ownership interest
Novartis		✓			
Nuvaira		\checkmark			
Olympus		\checkmark			
Pulmonx		\checkmark			
Verona		\checkmark			
Amgen		✓			
Broncus Medical		✓			
Gala Therapeutics		\checkmark			
Helios Medical		\checkmark			
Merck		✓			
Medtronic		✓			
Mereo BioPharma		✓			
NGM Biopharmaceuticals		✓			
Philips Respironics		✓			
Respivant Sciences		✓			
The Implementation Group		\checkmark			

Section 4.	Intellectual Property Patents & Copyrights	
Do you have a	ny patents, whether planned, pending or issued, broadly relevant to the work?	✓ No



Section 5.	Relationships not covered above
	elationships or activities that readers could perceive to have influenced, or that give the appearance of ncing, what you wrote in the submitted work?
	wing relationships/conditions/circumstances are present (explain below): tionships/conditions/circumstances that present a potential conflict of interest
	anuscript acceptance, journals will ask authors to confirm and, if necessary, update their disclosure statements. rnals may ask authors to disclose further information about reported relationships.
Section 6.	Disclosure Statement
Based on the abo	ove disclosures, this form will automatically generate a disclosure statement, which will appear in the box

Dr. Criner reports other from GlaxoSmithKline, non-financial support from GlaxoSmithKline, during the conduct of the study; personal fees from Almirall, personal fees from AstraZeneca, personal fees from Boehringer Ingelheim, personal fees from Chiesi, personal fees from CSA Medical, personal fees from Eolo, personal fees from GlaxoSmithKline, other from HGE Technologies, personal fees from Novartis, personal fees from Nuvaira, personal fees from Olympus, personal fees from Pulmonx, personal fees from Verona, personal fees from Amgen, personal fees from Broncus Medical, personal fees from Gala Therapeutics, personal fees from Helios Medical, personal fees from Merck, personal fees from Medtronic, personal fees from Mereo BioPharma, personal fees from NGM Biopharmaceuticals, personal fees from Philips Respironics, personal fees

from Respivant Sciences, personal fees from The Implementation Group, outside the submitted work; .

Evaluation and Feedback

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Dransfield 1



	I					
Section 1.	Identifying Inform	ation				
1. Given Name (Fi Mark	rst Name)	2. Surname (Last Na Dransfield	me)		3. Date 03-February-2020	
4. Are you the cor	responding author?	✓ Yes No				
5. Manuscript Title Risk of Exacerba	e tion and Pneumonia wi	th Single Inhaler Tri _l	ole Versus Dual Th	nerapy in II	MPACT	
6. Manuscript Idei	ntifying Number (if you kn	ow it)				
	I					
Section 2.	The Work Under Co	onsideration for F	ublication			
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Name of Institut		Grant? Persona Fees?	Non-Financial Support?	Other?	Comments	
GlaxoSmithKline				✓	This study was funded by GSK	
GlaxoSmithKline			✓		Medical writing support by Philip Chapman of Fishawack Indicia Ltd, UK, was funded by GSK	
Section 3.	Relevant financial	activities outside	the submitted	work.		
of compensation clicking the "Ado Are there any rel	the appropriate boxes in with entities as descri	n the table to indica bed in the instruction fort relationships th st?	te whether you ha	ave financ or each en	ial relationships (regardless of amo ntity; add as many lines as you need a 36 months prior to publication.	d by
Name of Entity		Grant? Persona Fees?	Non-Financial Support?	Other?	Comments	
Department of Defer	ise					

Dransfield 2



Name of Entity	Grant?	Personal Fees	Non-Financial Support?	Other?	Comments
Boehringer Ingelheim		✓		✓	Consulting and contracted clinical trials
GlaxoSmithKline		✓		✓	Consulting and contracted clinical trials
Novartis				✓	Contracted clinical trials
AstraZeneca		✓		✓	Consulting and contracted clinical trials
Yungjin				✓	Contracted clinical trials
PneumRx/BTG		✓		✓	Consulting and contracted clinical trials
Pulmonx				✓	Contracted clinical trials
Quark Pharmaceuticals		✓			Consulting
NIH	✓				
American Lung Association	✓				
Department of Veterans Affairs	✓				
Gala				✓	Contracted clinical trial support
Nuvaira				✓	Contracted clinical trial support
Section 4. Intellectual Propert Do you have any patents, whether plant Section 5. Relationships not of	ied, pendi	ing or issue		nt to the	work? ☐ Yes 🕡 No
Are there other relationships or activities potentially influencing, what you wrote				nfluence	d, or that give the appearance of
Yes, the following relationships/conditions/cir					
At the time of manuscript acceptance, jo On occasion, journals may ask authors to					sary, update their disclosure statements. elationships.

Dransfield 3



Section 6.

Disclosure Statement

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Dr. Dransfield reports other from GlaxoSmithKline, non-financial support from GlaxoSmithKline, during the conduct of the study; grants from Department of Defense, personal fees and other from Boehringer Ingelheim, personal fees and other from GlaxoSmithKline, other from Novartis, personal fees and other from AstraZeneca, other from Yungjin, personal fees and other from PneumRx/BTG, other from Pulmonx, personal fees from Quark Pharmaceuticals, grants from NIH, grants from American Lung Association, grants from Department of Veterans Affairs, other from Gala, other from Nuvaira, outside the submitted work;

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Dransfield 4



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Section 1. Identifying Inform	mation				
1. Given Name (First Name) MeiLan	2. Surnar Han	ne (Last Nan	ne)		3. Date 03-February-2020
4. Are you the corresponding author?	Yes	✓ No	Correspon Mark Dra	ding Autho	or's Name
5. Manuscript Title Risk of Exacerbation and Pneumonia w	vith Single I	nhaler Tripl	e Versus Dual Th	nerapy in I	MPACT
6. Manuscript Identifying Number (if you k	now it)				
Section 2. The Work Under C	Considerat	tion for P	ublication		
Did you or your institution at any time recany aspect of the submitted work (includin statistical analysis, etc.)?	g but not lim	ited to gran	ts, data monitorin		
Are there any relevant conflicts of inter- If yes, please fill out the appropriate in			No u have more tha	n one enti	ty press the "ADD" button to add a row
Excess rows can be removed by pressi					71
Name of Institution/Company	Grant?	Personal Fees?	Non-Financial Support?	Other?	Comments
ilaxoSmithKline				✓	This study was funded by GSK
ilaxoSmithKline			\checkmark		Editorial support by Chrystelle Rasamison of Fishawack Indicia Ltd, UK, was funded by GSK
Section 3. Relevant financia	activities	outside t	:he submitted	work.	
Place a check in the appropriate boxes of compensation) with entities as desc clicking the "Add +" box. You should re	ribed in the	instruction	ns. Use one line f	or each er	ntity; add as many lines as you need by
Are there any relevant conflicts of inte		·	No		•
If yes, please fill out the appropriate in		elow.			
Name of Entity	Grant?	Personal Fees?	Non-Financial Support?	Other?	Comments
sstraZeneca					



Name of Entity	Grant?	Personal		Other?	Comments
Boehringer Ingelheim		Fees •	Support?		
GlaxoSmithKline		▼			
Novartis					Research support
Sunovion				▼	Research support
Mylan		✓			
Section 4. Intellectual Propert Do you have any patents, whether plans				nt to the	work?
Section 5. Relationships not o	covered	ahovo			
Are there other relationships or activities potentially influencing, what you wrote a yes, the following relationships/conditions/cir. At the time of manuscript acceptance, journals may ask authors to the section 6.	in the sub ditions/cir rcumstan ournals wi o disclose	omitted wo cumstance ces that pro	rk? es are present (expessent a potential of ers to confirm and	olain belo conflict o	w): f interest sary, update their disclosure statements
Based on the above disclosures, this form below.		omatically (generate a disclos	sure state	ment, which will appear in the box
Dr. Han reports other from GlaxoSmithK personal fees from AstraZeneca, person Novartis, other from Sunovion, personal	al fees fro	m Boehrin	ger Ingelheim, pe	rsonal fe	es from GlaxoSmithKline, other from



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Day 1



Section 1. Identifying Info	rmation			
1. Given Name (First Name) Nicola	2. Surname (Last Nam Day	e)		3. Date 03-February-2020
4. Are you the corresponding author?	Yes V No	Correspor Mark Dra	ding Author' nsfield	's Name
5. Manuscript Title Risk of Exacerbation and Pneumonia	with Single Inhaler Triple	e Versus Dual Tl	nerapy in IM	IPACT
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any aspect of the submitted work (includ statistical analysis, etc.)? Are there any relevant conflicts of int If yes, please fill out the appropriate i	ing but not limited to grant erest? Yes N nformation below. If you	s, data monitorin	g board, stuc	nt, commercial, private foundation, etc.) fo dy design, manuscript preparation, or press the "ADD" button to add a row
Excess rows can be removed by press				
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Section 3. Relevant financi	al activities outside t	he submitted	work	
	es in the table to indicate scribed in the instruction report relationships that erest?	whether you h s. Use one line f	ave financia or each enti	
, .,				
Name of Entity	Grant? Personal Fees?	Non-Financial Support?	Other?	Comments
GlaxoSmithKline			✓ E	mployee of GSK

Day 2



Name of Entity	Grant? Personal Fees?	Non-Financial Support?	Other? Co	omments	
GlaxoSmithKline			√ Sha	ares/options held in GSK	
Section 4. Intellectual Propert	y Patents & Cop	yrights			
Do you have any patents, whether plann	ed, pending or issued	d, broadly relevan	nt to the wor	rk?	
Section 5. Relationships not c	overed above				
Are there other relationships or activities potentially influencing, what you wrote i			nfluenced, or	r that give the appearance of	:
Yes, the following relationships/cond	litions/circumstances	are present (exp	lain below):		
✓ No other relationships/conditions/cir	cumstances that pres	sent a potential c	onflict of into	rerest	
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Dr. Day reports other from GlaxoSmithKl personal fees from GlaxoSmithKline, oth	-	•		•	udy;

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Martin 1



Section 1. Identifying Infor	mation			
1. Given Name (First Name) Neil	2. Surname (Last N	lame)	3. Date 03-February-2020	
4. Are you the corresponding author?	Yes 🗸 No	Correspond Mark Drans	ing Author's Name sfield	
5. Manuscript Title Risk of Exacerbation and Pneumonia	with Single Inhaler T	riple Versus Dual The	erapy in IMPACT	
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any aspect of the submitted work (including statistical analysis, etc.)? Are there any relevant conflicts of interesting the statistical analysis and the submitted work (including statistical analysis).	ng but not limited to gerest?	rants, data monitoring	government, commercial, private foundati board, study design, manuscript preparati	on,
If yes, please fill out the appropriate in Excess rows can be removed by press		you have more than	one entity press the "ADD" button to a	ıdd a rov
Name of Institution/Company	Grant? Person	_	Other? Comments	
laxoSmithKline			This study was funded by GSK	
laxoSmithKline		✓	Editorial support by Chrystelle Rasamison of Fishawack Indicia L UK, was funded by GSK	₋td,
Section 3. Relevant financia	al activities outsid	e the submitted v	work.	
of compensation) with entities as desc	cribed in the instruct	ions. Use one line fo	ve financial relationships (regardless of r each entity; add as many lines as you uring the 36 months prior to publica	need by
Are there any relevant conflicts of inte		No		
If yes, please fill out the appropriate ir	formation below.			
Name of Entity	Grant? Person		Other? Comments	
ilaxoSmithKline			✓ Employee of GSK	

Martin 2



Name of Entity	Grant? Persona	Non-Financial Support?	Other?	Comments	
GlaxoSmithKline			√	Shares/options held in GSK	
Section 4. Intellectual Diagram					_
Intellectual Propert	y Patents & Co	pyrights			
Do you have any patents, whether plann	ed, pending or issu	ied, broadly releva	nt to the	work? ☐ Yes ✓ No	
Section 5. Relationships not c	overed above				
Are there other relationships or activities potentially influencing, what you wrote i		•	nfluence	d, or that give the appearance of	
Yes, the following relationships/cond	itions/circumstanc	es are present (exp	olain belo	w):	
✓ No other relationships/conditions/cir	cumstances that p	resent a potential	conflict o	finterest	
At the time of manuscript acceptance, jo On occasion, journals may ask authors to					ments.
Section 6. Disclosure Stateme	nt				
Based on the above disclosures, this form below.		generate a disclo	sure state	ment, which will appear in the bo	x
Dr. Martin reports other from GlaxoSmitl study; personal fees from GlaxoSmithKlin					

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Martin 3



Instructions

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Other: Anything not covered under the previous three boxes

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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

expert testimony, employment, or other affiliations patent

Non-Financial Support: Examples include drugs/equipment



Section 1. Identifying Inform	nation				
1. Given Name (First Name) Peter	2. Surnai Lange	me (Last Nar	ne)		3. Date 03-February-2020
4. Are you the corresponding author?	Yes	✓ No	Correspon Mark Dra	ding Autho	or's Name
5. Manuscript Title Risk of Exacerbation and Pneumonia w	vith Single I	nhaler Trip	le Versus Dual Th	nerapy in I	MPACT
6. Manuscript Identifying Number (if you k	now it)				
Section 2. The Work Under C	: :onsidera	tion for P	ublication		
any aspect of the submitted work (includin statistical analysis, etc.)? Are there any relevant conflicts of inter	g but not lin	nited to gran	its, data monitorin	g board, sti	
If yes, please fill out the appropriate in Excess rows can be removed by pressin			u have more tha	n one enti	ty press the "ADD" button to add a row
Name of Institution/Company	Grant?	Personal Fees?	Non-Financial Support?	Other?	Comments
GlaxoSmithKline				✓	This study was funded by GSK
SlaxoSmithKline			✓		Editorial support by Chrystelle Rasamison of Fishawack Indicia Ltd, UK, was funded by GSK
Section 3. Relevant financia	activities	outside 1	the submitted	work.	
Place a check in the appropriate boxes of compensation) with entities as desc clicking the "Add +" box. You should re	ribed in the	instruction	ns. Use one line f	or each er	
Are there any relevant conflicts of inter			No		
If yes, please fill out the appropriate in	ormation b	elow.			
Name of Entity	Grant?	Personal Fees	Non-Financial	Other?	Comments
AstraZeneca		✓			



Name of Entity	Grant?	Personal Fees?	Non-Financial Support?	Other?	Comments	
Boehringer Ingelheim	✓	✓				
GlaxoSmithKline	√	\checkmark				
Section 4. Intellectual Propert	ty Pate	ents & Co	pyrights			
Do you have any patents, whether plann	ed, pend	ing or issue	ed, broadly releva	int to the v	work? ☐ Yes 🗸 No	
Section 5. Relationships not o	overed	above				
Are there other relationships or activities potentially influencing, what you wrote i				influenced	d, or that give the appearance of	
Yes, the following relationships/cond						
✓ No other relationships/conditions/cir	rcumstan	ces that pre	esent a potential	conflict of	interest	
At the time of manuscript acceptance, jo On occasion, journals may ask authors to						ments.
Section 6. Disclosure Stateme	nt					
Based on the above disclosures, this forn below.	n will auto	omatically	generate a disclo	sure state	ment, which will appear in the bo	×
Dr. Lange reports other from GlaxoSmith study; personal fees from AstraZeneca, gGlaxoSmithKline, outside the submitted	grants and					om



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Section 1. Identifying Information	ation				
1. Given Name (First Name) Robert	2. Surna Wise	me (Last Nar	ne)		3. Date 03-February-2020
4. Are you the corresponding author?	Yes	✓ No	Correspond Mark Drar	•	or's Name
5. Manuscript Title Risk of Exacerbation and Pneumonia wit	h Single	Inhaler Trip	le Versus Dual Th	erapy in I	MPACT
6. Manuscript Identifying Number (if you kno	ow it)				
Section 2. The Work Under Co	nsidera	tion for P	ublication		
Did you or your institution at any time received any aspect of the submitted work (including statistical analysis, etc.)?					
Are there any relevant conflicts of interes	st? ✓	Yes	No		
If yes, please fill out the appropriate infore Excess rows can be removed by pressing			u have more thar	one enti	ty press the "ADD" button to add a row.
	_	Personal	Non-Financial	7	
Name of Institution/Company	Grant?	Fees?	Support?	Other?	Comments
GlaxoSmithKline				√	This study was funded by GSK
GlaxoSmithKline			✓		Editorial support by Chrystelle Rasamison of Fishawack Indicia Ltd, UK, was funded by GSK
Section 3. Relevant financial a	ctivitie	s outside t	the submitted	work.	
Place a check in the appropriate boxes in of compensation) with entities as described clicking the "Add +" box. You should report to the second secon	ed in the	e instruction	ns. Use one line fo	or each er	ntity; add as many lines as you need by
Are there any relevant conflicts of interes	st? ✓	Yes	No		
If yes, please fill out the appropriate info	rmation b	oelow.			
Name of Entity	Grant?	Personal Fees?	Non-Financial Support?	Other?	Comments
AstraZeneca / Medimmune	7	7	- Support		data monitoring committee, grants,



Name of Entity	Grant?	Personal Fees?	Non-Financial Support?	Other?	Comments
Boehringer Ingelheim	✓	✓			steering committee, data monitoring committee, grants
Contrafect		\checkmark			clinical endpoint committee
Pulmonx		\checkmark			data safety monitoring committee
Roche		\checkmark			Data monitoring committee
Spiration		\checkmark			Steering committee
Sunovion		\checkmark			Workshop, consulting
Pearl Therapeutics	✓				Research grant
Merck		\checkmark			Data monitoring committee
Circassia		✓			Consultant
Pneuma		✓			Consultant
Verona		✓			Consultant
Mylan/Theravance		\checkmark			Consultant
Propeller Health		✓			Consultant
Sanofi-Aventis	✓				Research Grant
AbbVie		✓			Data Monitoring Committee
GSK	V	✓			Scientific advisory board, Clinical Endpoint committee, Data Monitoring Committee, research grant support.
Bonti		✓			
Denali		✓			
Aradigm		✓			

Section 4.	Intellectual Property Patents & Copyrights						
Do you have any patents, whether planned, pending or issued, broadly relevant to the work?		✓ No					

Section 5.	Relationships not covered above
	elationships or activities that readers could perceive to have influenced, or that give the appearance of encing, what you wrote in the submitted work?
	wing relationships/conditions/circumstances are present (explain below): tionships/conditions/circumstances that present a potential conflict of interest
	anuscript acceptance, journals will ask authors to confirm and, if necessary, update their disclosure statements. rnals may ask authors to disclose further information about reported relationships.
Section 6.	Disclosure Statement
Based on the abo	ove disclosures, this form will automatically generate a disclosure statement, which will appear in the box

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Dr. Wise reports other from GlaxoSmithKline, non-financial support from GlaxoSmithKline, during the conduct of the study; grants and personal fees from AstraZeneca / Medimmune, grants and personal fees from Boehringer Ingelheim, personal fees from Contrafect, personal fees from Pulmonx, personal fees from Roche, personal fees from Spiration, personal fees from Sunovion, grants from Pearl Therapeutics, personal fees from Merck, personal fees from Circassia, personal fees from Pneuma, personal fees from Verona, personal fees from Mylan/Theravance, personal fees from Propeller Health, grants from Sanofi-Aventis, personal fees from AbbVie, grants and personal fees from GSK, personal fees from Bonti, personal fees from Denali, personal fees from Aradigm, outside the submitted work;

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Kilbride 1



Section 1. Identifying Infor	mation				
1. Given Name (First Name) Sally	2. Surname Kilbride	(Last Name)			3. Date 03-February-2020
4. Are you the corresponding author?	Yes	-	Corresponding Author's Name Mark Dransfield		
5. Manuscript Title Risk of Exacerbation and Pneumonia	with Single Inh	aler Triple \	Versus Dual Th	nerapy in l	MPACT
6. Manuscript Identifying Number (if you	know it)				
Section 2. The Work Under	Consideratio	n for Pub	lication		
Did you or your institution at any time recany aspect of the submitted work (including statistical analysis, etc.)? Are there any relevant conflicts of interesting the state of the submitted work.	ng but not limite	d to grants,	data monitorin		ent, commercial, private foundation, etc.) foudy design, manuscript preparation,
If yes, please fill out the appropriate in Excess rows can be removed by pressi			ave more thar	n one enti	ty press the "ADD" button to add a row
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Section 3. Relevant financia	l activities o	utside the	e submitted	work.	
	ribed in the in	structions.	Use one line fo	or each en	cial relationships (regardless of amount ntity; add as many lines as you need by a 36 months prior to publication.
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If yes, please fill out the appropriate ir	tormation belo	OW.			
Name of Entity	Grant	ersonal N Fees	on-Financial Support	Other?	Comments
ilaxoSmithKline				1	Employee of GSK

Kilbride 2



Name of Entity	Grant? Personal Fees?	Non-Financial Support?	Other? Comments					
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Do you have any patents, whether planned, pending or issued, broadly relevant to the work? Yes Vo								
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Dr. Kilbride reports other from GlaxoSmi study; personal fees from GlaxoSmithKli				ne conduct of the				

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Kilbride 3