

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

Ahmad 1



Section 1.	Identifying Inform	nation		
1. Given Name (Fi Faraz	rst Name)	2. Surname (Last Name) Ahmad	3. Date 07-April-2021	
4. Are you the corresponding author?		☐ Yes ✓ No	Corresponding Author's Name W. Schuyler Jones	
5. Manuscript Title Comparative Eff		osing in Cardiovascular Dis	sease	
6. Manuscript Idea	ntifying Number (if you kr	now it)		
Section 2.	The Work Under C	onsideration for Public	cation	
any aspect of the s statistical analysis,	ubmitted work (including	g but not limited to grants, da	a third party (government, commercial, private foundation, etc.) for at a monitoring board, study design, manuscript preparation,	
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Section 4.	Intellectual Prope	rty Patents & Copyrig	ghts	
Do you have any	patents, whether plan	ned, pending or issued, br	roadly relevant to the work? Yes V No	

Ahmad 2



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Section 6.	Disclosure Statement	
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Dr. Ahmad has n	othing to disclose.	

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Ahmad 3



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Alikhaani 1



Section 1. Identifying Inform	ation			
1. Given Name (First Name) Jacqueline	2. Surname (Last Name) Alikhaani		3. Date 08-April-2021	
4. Are you the corresponding author?	☐ Yes 🗸 No	Corresponding Auth W. Schuyler Jones	or's Name	
5. Manuscript Title Comparative Effectiveness of Aspirin Do	sing in Cardiovascular Dis	sease		
6. Manuscript Identifying Number (if you known 21-02137	ow it)			
		_		
Section 2. The Work Under Co	onsideration for Public	cation		
Did you or your institution at any time received any aspect of the submitted work (including statistical analysis, etc.)?			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		e more than one ent	ity press the "ADD" button to add a row.	
Name of Institution/Company	Grant	n-Financial other?	Comments	
Patient-Centered Outcomes Research Institute			Payment received from PCORI via Health eHeart for serving as a patient advisor	
Section 3. Polovant financial a				
Relevant financial a	activities outside the s	submitted work.		
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Do you have any patents, whether plann			work? ☐ Yes ✓ No	

Alikhaani 2



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Dr. Alikhaani rep	orts other from Patient-Centered Outcomes Research Institute during the conduct of the study.	

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Alikhaani 3



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Anderson 1



Section 1.	Identifying Inform	nation		
1. Given Name (Fi R. David	rst Name)	2. Surname (Last Name) Anderson	3. Date 07-April-2021	
4. Are you the corresponding author?		Yes ✓ No	Corresponding Author's Name W. Schuyler Jones	
5. Manuscript Title Comparative Effe		osing in Cardiovascular Di	sease	
6. Manuscript Ider 21-02137	ntifying Number (if you kr	now it)		
Section 2.	The Work Under Co	onsideration for Publi	cation	
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 ata monitoring board, study design, manuscript preparation,	
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Do you have any	patents, whether plan	ned, pending or issued, br	roadly relevant to the work? Yes V No	

Anderson 2



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patent

1 Antman



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4. Are you the corresponding author?		Yes ✓ No	Corresponding Author's Name W. Schuyler Jones	
5. Manuscript Title Comparative Effe		osing in Cardiovascular Di	sease	
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Antman 2



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Bell 1



Section 1.	Identifying Inform	nation		
1. Given Name (Fi Douglas	rst Name)	2. Surname (Last Name) Bell	3. Date 03-April-2021	
4. Are you the corresponding author?		Yes ✓ No	Corresponding Author's Name W. Schuyler Jones	
5. Manuscript Title Comparative Eff		osing in Cardiovascular Dis	sease	
6. Manuscript Idea	ntifying Number (if you kr	now it)		
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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

Benziger 1



Section 1.	Identifying Inform	ation		
1. Given Name (Fir Catherine	st Name)	2. Surname (Last Name) Benziger	3. Date 05-April-2021	
4. Are you the corr	esponding author?	Yes ✓ No	Corresponding Author's Name W. Schulyer Jones	
5. Manuscript Title Comparative Effe		osing in Cardiovascular Di	sease	
6. Manuscript Iden 21-02137	tifying Number (if you kr	now it)		
Section 2.	The Work Under Co	onsideration for Public	cation	
any aspect of the su statistical analysis, o	ubmitted work (including	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 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 present during the 36 months prior to publication . Are there any relevant conflicts of interest? Yes You				
Section 4.	Intellectual Proper	ty Patents & Copyri	ghts	
Do you have any			roadly relevant to the work? Yes V No	

Benziger 2



Section 5.		
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?	
Yes, the follow	wing relationships/conditions/circumstances are present (explain below):	
✓ No other relat	tionships/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 abo below.	ove disclosures, this form will automatically generate a disclosure statement, which will appear in the box	
Dr. Benziger has	nothing to disclose.	

Evaluation and Feedback

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Benziger 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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4. Intellectual Property.

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Berdan 1



Section 1.	Identifying Inform	nation	
1. Given Name (Fir Lisa	rst Name)	2. Surname (Last Name) Berdan	3. Date 03-April-2021
4. Are you the corr	responding author?	Yes 🗸 No	Corresponding Author's Name W. Schuyler Jones
5. Manuscript Title Comparative Effe		osing in Cardiovascular Di	sease
6. Manuscript Ider 21-02137	ntifying Number (if you kr	now it)	
Section 2.	The Work Under Co	onsideration for Publi	cation
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Section 3.	Relevant financial	activities outside the	submitted work.
of compensation clicking the "Add) with entities as descri	ibed in the instructions. Us port relationships that we	nether 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 .
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

Berdan 2



Section 5.	
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?
Yes, the follow	wing relationships/conditions/circumstances are present (explain below):
✓ No other rela	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. Berdan has n	othing to disclose.

Evaluation and Feedback

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Berdan 3



Instructions

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patent

Bradley 1



Section 1.	Identifying Inform	nation	
1. Given Name (Fi Steven	rst Name)	2. Surname (Last Name) Bradley	3. Date 04-April-2021
4. Are you the cor	responding author?	Yes ✓ No	Corresponding Author's Name W. Schuyler Jones
5. Manuscript Title Comparative Eff		osing in Cardiovascular Di	sease
6. Manuscript Idea	ntifying Number (if you kr	now it)	
Section 2.	The Work Under C	onsideration for Publi	cation
any aspect of the s statistical analysis,	ubmitted work (including	g but not limited to grants, da	a third party (government, commercial, private foundation, etc.) for ata monitoring board, study design, manuscript preparation,
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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

Bradley 2



Section 5.	
Section 5.	Relationships not covered above
	relationships or activities that readers could perceive to have influenced, or that give the appearance of encing, what you wrote in the submitted work?
Yes, the follo	wing relationships/conditions/circumstances are present (explain below):
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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. Bradley has r	nothing to disclose.

Evaluation and Feedback

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

Brown 1



Section 1. Identifying Inform	ation		
1. Given Name (First Name) Linda	2. Surname (Last Name) Brown		3. Date 07-April-2021
4. Are you the corresponding author?	Yes ✓ No	Corresponding Authors W. Schuyler Jones	or's Name
5. Manuscript Title Comparative Effectiveness of Aspirin Do	osing in Cardiovascular Dis	sease	
6. Manuscript Identifying Number (if you kn 21-02137	ow it)		
Section 2. 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.)?			ent, commercial, private foundation, etc.) for udy 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	•	e more than one ent	ity press the "ADD" button to add a row.
Name of Institution/Company	Grant	n-Financial other?	Comments
Patient-Centered Outcomes Research Institute			Payment received from PCORI via Health eHeart for serving as a patient advisor
Section 3. Polyvant financial			
Relevant financial	activities outside the s	ubmitted work.	
Place a check in the appropriate boxes in of compensation) with entities as descriclicking the "Add +" box. You should rep	bed in the instructions. Us	se one line for each e	ntity; add as many lines as you need by
Are there any relevant conflicts of intere	est? Yes 🗸 No		
Section 4. Intellectual Proper	ty Patents & Copyric	jhts	
Do you have any patents, whether plant			work? ☐ Yes ✓ No

Brown 2



Section 5.	
Section 5.	Relationships not covered above
	relationships or activities that readers could perceive to have influenced, or that give the appearance of encing, what you wrote in the submitted work?
Yes, the follo	wing relationships/conditions/circumstances are present (explain below):
✓ No other rela	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. Brown repor	ts other from Patient-Centered Outcomes Research Institute during the conduct of the study.

Evaluation and Feedback

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1

administrative support, etc.



Section 1.	Identifying Inform	nation	
1. Given Name (Firs	st Name)	2. Surname (Last Name) Campbell	3. Date 03-April-2021
4. Are you the corre	esponding author?	Yes ✓ No	Corresponding Author's Name W. Schuyler Jones
5. Manuscript Title Comparative Effe	ctiveness of Aspirin Do	osing in Cardiovascular D	isease
6. Manuscript Iden 21-02137	tifying Number (if you kn	now it)	
Section 2.	The Work Under Co	onsideration for Publi	cation
any aspect of the su statistical analysis, e	ıbmitted work (including	but not limited to grants, d	n a third party (government, commercial, private foundation, etc.) for ata monitoring board, study design, manuscript preparation,
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Do you have any	patents, whether plan	ned, pending or issued, b	roadly relevant to the work? Yes V No

Campbell 2



Section 5.	
Section 5.	Relationships not covered above
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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. Campbell has	s nothing to disclose.

Evaluation and Feedback

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Campbell 3



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1

administrative support, etc.



Section 1.	Identifying Inform	nation	
1. Given Name (Fi Thomas	rst Name)	2. Surname (Last Name) Carton	3. Date 05-April-2021
4. Are you the cor	responding author?	Yes ✓ No	Corresponding Author's Name W. Schuyler Jones
5. Manuscript Title Comparative Eff		osing in Cardiovascular Di	sease
6. Manuscript Ide	ntifying Number (if you kr	now it)	
Section 2.	The Work Under Co	onsideration for Public	cation
any aspect of the s statistical analysis,	ubmitted work (including	g but not limited to grants, da	a third party (government, commercial, private foundation, etc.) for ata monitoring board, study design, manuscript preparation,
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of compensation clicking the "Add	the appropriate boxes i n) with entities as descri	in the table to indicate wh ibed in the instructions. Us port relationships that wei	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.
Section 4.	Intellectual Prope	rty Patents & Copyric	ghts
Do you have any	patents, whether plan	ned, pending or issued, br	roadly relevant to the work? Yes V No

Carton 2



Section 5.	
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?
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Dr. Carton has no	othing to disclose.

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Carton 3



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earning royalties or not **Royalties:** Funds are coming in to you or your institution due to your

patent

Crenshaw 1



Section 1.	Identifying Inform	ation	
1. Given Name (Fi David	rst Name)	2. Surname (Last Name) Crenshaw	3. Date 07-April-2021
4. Are you the cor	responding author?	☐ Yes ✓ No	Corresponding Author's Name W. Schuyler Jones
5. Manuscript Title Comparative Effe	e ectiveness of Aspirin Do	osing in Cardiovascular	Disease
6. Manuscript Ider 21-02137	ntifying Number (if you kn	ow it)	
	ı		
Section 2.	The Work Under Co	onsideration for Pub	lication
any aspect of the s statistical analysis, Are there any rel If yes, please fill o Excess rows can Name of Institut	ubmitted work (including etc.)? evant conflicts of intere out the appropriate info be removed by pressing	est? Yes No ormation below. If you he g the "X" button. Grant? Personal No	om a third party (government, commercial, private foundation, etc.) for data monitoring board, study design, manuscript preparation, nave more than one entity press the "ADD" button to add a row. Other
Section 3.	Relevant financial a	activities outside the	e submitted work.
of compensation clicking the "Add Are there any rel	the appropriate boxes in with entities as descri	n the table to indicate v bed in the instructions. port relationships that v	whether you have financial relationships (regardless of amount Use one line for each entity; add as many lines as you need by vere present during the 36 months prior to publication .
Section 4.	Intellectual Proper	ty Patents & Copy	rights
Do you have any	patents, whether planr	ned, pending or issued,	broadly relevant to the work? Yes Vo

Crenshaw 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):
✓ 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. Crenshaw reports grants from Patient-Centered Outcomes Research Institute during the conduct of the study.

Evaluation and Feedback

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

Crenshaw 3



Instructions

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Curtis 1



Section 1.	Identifying Inform	ation		
1. Given Name (Fi Lesley	rst Name)	2. Surname (Last Name) Curtis	3. D. 04- <i>A</i>	ate April-2021
4. Are you the cor	responding author?	Yes 🗸 No	Corresponding Author's Name W. Schuyler Jones	
5. Manuscript Title Comparative Effe		osing in Cardiovascular D	isease	
6. Manuscript Ider 21-02137	ntifying Number (if you kn	ow it)		
	ı			
Section 2.	The Work Under Co	onsideration for Publ	ication	
any aspect of the s statistical analysis, Are there any rel If yes, please fill o Excess rows can Name of Institut	ubmitted work (including etc.)? evant conflicts of intere out the appropriate info be removed by pressing	est? Yes No ormation below. If you ha g the "X" button. Grant? Personal Fees?	n a third party (government, commer lata monitoring board, study design, note that one entity press the confidence on Financial Support? Other: Commercial Commerci	manuscript preparation, e "ADD" button to add a row.
Section 3.	Relevant financial	activities outside the	submitted work.	
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Section 4.	Intellectual Proper	ty Patents & Copyr	ights	
Do you have any	patents, whether plant	ned, pending or issued, k	proadly relevant to the work?	Yes 🗸 No

Curtis 2



Section 5. Polationships not severed above			
Relationships not covered above			
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Dr. Curtis reports grants from Patient-Centered Outcomes Research Institute during the conduct of the study.			

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Curtis 3



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

Davidson 1



Section 1. Identifying Inform	ation		
1. Given Name (First Name) Desiree	2. Surname (Last Name) Davidson		3. Date 07-April-2021
4. Are you the corresponding author?	Yes ✓ No	Corresponding Authors W. Schuyler Jones	or's Name
5. Manuscript Title Comparative Effectiveness of Aspirin Do	osing in Cardiovascular Dis	sease	
6. Manuscript Identifying Number (if you kn 21-02137	ow it)		
		_	
Section 2. The Work Under Co	onsideration for Public	ation	
Did you or your institution at any time receirany aspect of the submitted work (including statistical analysis, etc.)?			ent, commercial, private foundation, etc.) for udy 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	•	e more than one ent	ity press the "ADD" button to add a row.
Name of Institution/Company	Grant	n-Financial other?	Comments
Patient-Centered Outcomes Research Institute			Payment received from PCORI via Health eHeart for serving as a patient advisor
Section 3. Polovant financial			
Relevant financial	activities outside the s	ubmitted work.	
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Are there any relevant conflicts of intere	st? Yes 🗸 No		
Section 4. Intellectual Proper	ty Patents & Copyric	jhts	
Do you have any patents, whether plann			work? ☐ Yes ✓ No

Davidson 2



Section 5.	
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?
Yes, the follo	wing relationships/conditions/circumstances are present (explain below):
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Sastion 6	
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. Davidson rep	ports other from Patient-Centered Outcomes Research Institute during the conduct of the study.

Evaluation and Feedback

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Davidson 3



Instructions

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DeWalt 1



Section 1.	Identifying Inform	ation		
1. Given Name (Fi Darren	rst Name)	2. Surname (Last Name) DeWalt		3. Date 05-April-2021
4. Are you the cor	responding author?	☐ Yes ✓ No	Corresponding Author W. Schuyler Jones	r's Name
5. Manuscript Title Comparative Effe		osing in Cardiovascular D	sease	
6. Manuscript Idei 21-02137	ntifying Number (if you kn	now it)	_	
	ı			
Section 2.	The Work Under Co	onsideration for Publi	cation	
any aspect of the s statistical analysis, Are there any rel If yes, please fill o Excess rows can	ubmitted work (including etc.)? evant conflicts of intere out the appropriate info be removed by pressing	est? Yes No ormation below. If you ha g the "X" button. Grant? Personal No Fees?	ata monitoring board, stu	nt, commercial, private foundation, etc.) for dy design, manuscript preparation, y press the "ADD" button to add a row. Comments
	I			
Section 3.	Relevant financial	activities outside the	submitted work.	
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Section 4.	Intellectual Proper	ty Patents & Copyri	ghts	
Do you have any	patents, whether plani	ned, pending or issued, b	roadly relevant to the v	vork? ☐ Yes ✓ No

DeWalt 2



Section 5.	
Section 5.	Relationships not covered above
	relationships or activities that readers could perceive to have influenced, or that give the appearance of encing, what you wrote in the submitted work?
Yes, the follo	wing relationships/conditions/circumstances are present (explain below):
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Sartion C	
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. DeWalt repo	rts grants from Patient-Centered Outcomes Research Institute during the conduct of the study.

Evaluation and Feedback

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DeWalt 3



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Edgley 1



Section 1. Identifying Inform	ation		
1. Given Name (First Name) Kevin	2. Surname (Last Name) Edgley		3. Date 07-April-2021
4. Are you the corresponding author?	☐ Yes ✓ No	Corresponding Authors W. Schuyler Jones	or's Name
5. Manuscript Title Comparative Effectiveness of Aspirin Do	osing in Cardiovascular Dis	sease	
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		_	
Section 2. The Work Under Co	onsideration for Public	ation	
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			
If yes, please fill out the appropriate info Excess rows can be removed by pressing		e more than one ent	ity press the "ADD" button to add a row.
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Section 4. Intellectual Proper	ty Patents & Copyrig	ıhts	
Do you have any patents, whether plann			work? ☐ Yes ✓ No

Edgley 2



Section 5.	
Section 5.	Relationships not covered above
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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

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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

Effron 1



Section 1. Identifying Info	ormation			
1. Given Name (First Name) Mark	2. Surname (Last Name) Effron	3. Date 05-April-2021		
4. Are you the corresponding author?	Yes Vo	Corresponding Author's Name W. Schuyler Jones		
5. Manuscript Title Comparative Effectiveness of Aspirir	n Dosing in Cardiovascular Di	sease		
6. Manuscript Identifying Number (if yo 21-02137	u know it)	_		
Section 2. The Work Unde	r Consideration for Public	cation		
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 No				
Section 3. Relevant finance	ial 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 present during the 36 months prior to publication . Are there any relevant conflicts of interest?				
Name of Entity	Grant? Personal Not	n-Financial other? Comments		
Eli Lilly and Company		Pension		
Section 4. Intellectual Pro	perty Patents & Copyri	ghts		
Do you have any patents, whether p	lanned, pending or issued, br	oadly relevant to the work? Yes V No		

Effron 2



Section 5.	
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?
Yes, the follow	wing relationships/conditions/circumstances are present (explain below):
✓ No other relat	tionships/conditions/circumstances that present a potential conflict of interest
	nuscript 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 below.	ove disclosures, this form will automatically generate a disclosure statement, which will appear in the box
Dr. Effron reports	s personal fees from Eli Lilly and Company outside the submitted work.

Evaluation and Feedback

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

Effron 3



Instructions

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

Farrehi 1



Section 1.	Identifying Inform	nation		
1. Given Name (Fir Peter	rst Name)	2. Surname (Last Name) Farrehi	3. Date 02-April-2021	
4. Are you the cor	responding author?	Yes 🗸 No	Corresponding Author's Name W. Schuyler Jones	
5. Manuscript Title Comparative Effe		osing in Cardiovascular Di	sease	
6. Manuscript Ider 21-02137	ntifying Number (if you kr	now it)		
Section 2.	The Work Under Co	onsideration for Publi	cation	
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 ata monitoring board, study design, manuscript preparation,	
Section 3.	Relevant financial	activities outside the	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 present during the 36 months prior to publication . Are there any relevant conflicts of interest? Yes Vo				
Section 4.	Intellectual Proper	rty Patents & Copyri	ghts	
Do you have any			roadly relevant to the work? Yes V No	

Farrehi 2



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?		
Yes, the follo	wing relationships/conditions/circumstances are present (explain below):		
✓ No other rela	tionships/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 abo	ove disclosures, this form will automatically generate a disclosure statement, which will appear in the box		
Dr. Farrehi has n	othing to disclose.		

Evaluation and Feedback

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Farrehi 3



Instructions

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Fintel 1



Section 1.	Identifying Inform	nation	
1. Given Name (Fir Dan	st Name)	2. Surname (Last Name) Fintel	3. Date 05-April-2021
4. Are you the corr	esponding author?	Yes 🗸 No	Corresponding Author's Name W. Schuyler Jones
5. Manuscript Title Comparative Effe		osing in Cardiovascular Di	sease
6. Manuscript Iden 21-02137	ntifying Number (if you kr	now it)	
Section 2.	The Work Under Co	onsideration for Publi	cation
any aspect of the su statistical analysis,	ubmitted work (including	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 clicking the "Add) with entities as descri	bed in the instructions. U port relationships that we	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 .
Section 4.	Intellectual Proper	ty Patents & Copyri	ghts
Do you have any	patents, whether plan	ned, pending or issued, b	roadly relevant to the work? Yes V No

Fintel 2



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?
Yes, the follo	wing relationships/conditions/circumstances are present (explain below):
✓ No other rela	tionships/conditions/circumstances that present a potential conflict of interest
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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. Fintel has no	thing to disclose.

Evaluation and Feedback

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Fintel 3



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Fonarow 1



Section 1. Identifying Inform	-4					
identifying informa		. <u> </u>				
1. Given Name (First Name) Gregg	Surname (Last Name) Fonarow	3. Date 05-April-2021				
4. Are you the corresponding author?	☐ Yes ✓ No	Corresponding Author's Name W. Schuyler Jones				
5. Manuscript Title Comparative Effectiveness of Aspirin Dosing in Cardiovascular Disease						
6. Manuscript Identifying Number (if you kno 21-02137	ow it)					
Section 2. The Work Under Co	nsideration for Public	cation				
	but not limited to grants, da	a third party (government, commercial, private foundation, etc.) fo ata monitoring board, study design, manuscript preparation,	r			
Section 3. Relevant financial a	ctivities outside the s	submitted work.				
of compensation) with entities as describ	oed in the instructions. Us ort relationships that wer st?	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 Fees? S	on-Financial Other? Comments				
Abbott		Consulting				
Amgen		Consulting				
AstraZeneca		Consulting				
Bayer		Consulting				
Cytokinetics		Consulting				
Janssen		Consulting				
Medtronic		Consulting				
Merck		Consulting				

Fonarow 2



Name of Entity	Grant? Personal Fees?	Non-Financial Support?	Other? Comments	
Novartis			Consulting	
Section 4. Intellectual Propert	ty Patents & Cop	yrights		
Do you have any patents, whether planr	ned, pending or issue	d, broadly releva	nt to the work?	√ No
Section 5. Relationships not o	covered above			
Are there other relationships or activities potentially influencing, what you wrote			nfluenced, or that give the a	ppearance of
Yes, the following relationships/cond	ditions/circumstances	s are present (exp	olain below):	
✓ No other relationships/conditions/ci	rcumstances that pre	sent a potential c	conflict of interest	
At the time of manuscript acceptance, jo On occasion, journals may ask authors to				isclosure statements.
Section 6. Disclosure Stateme	ent			
Based on the above disclosures, this forr below.	n will automatically g	generate a disclos	ure statement, which will ap	pear in the box
Dr. Fonarow reports personal fees from from Bayer, personal fees from Cytokine Merck, personal fees from Novartis, out	etics, personal fees fro	om Janssen, perso		-

Evaluation and Feedback

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Fonarow 3



Instructions

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Ford 1



Section 1.	Identifying Inform	nation	
1. Given Name (Fi Daniel	rst Name)	2. Surname (Last Name) Ford	3. Date 04-April-2021
4. Are you the cor	responding author?	Yes ✓ No	Corresponding Author's Name W. Schuyler Jones
5. Manuscript Title Comparative Eff		osing in Cardiovascular Di	sease
6. Manuscript Idea	ntifying Number (if you kr	now it)	
Section 2.	The Work Under C	onsideration for Publi	cation
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Section 4.	Intellectual Prope	rty Patents & Copyri	ghts
Do you have any	patents, whether plan	ned, pending or issued, br	roadly relevant to the work? Yes V No

Ford 2



Section 5.	
Section 5.	Relationships not covered above
	relationships or activities that readers could perceive to have influenced, or that give the appearance of encing, what you wrote in the submitted work?
Yes, the follo	wing relationships/conditions/circumstances are present (explain below):
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Ford 3



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

Girotra 1



Section 1.	Identifying Inform	nation	
1. Given Name (Fi Saket	rst Name)	2. Surname (Last Name) Girotra	3. Date 23-March-2021
4. Are you the cor	responding author?	Yes ✓ No	Corresponding Author's Name Schuyler Jones
5. Manuscript Title Comparative Eff		osing in Cardiovascular Dis	sease
6. Manuscript Idea	ntifying Number (if you kr	now it)	
Section 2.	The Work Under C	onsideration for Public	cation
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Section 3.	Relevant financial	activities outside the s	submitted work.
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Do you have any	patents, whether plan	ned, pending or issued, br	roadly relevant to the work? Yes V No

Girotra 2



Section 5.	
Section 5.	Relationships not covered above
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Yes, the follow	wing relationships/conditions/circumstances are present (explain below):
✓ No other rela	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. Girotra has n	othing to disclose.

Evaluation and Feedback

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Girotra 3



Instructions

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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

Goldberg 1



Section 1.	Identifying Inform	ation					
1. Given Name (Fii Ythan	rst Name)	2. Surnam Goldberg	e (Last Name)			3. Date 09-April-2	2021
4. Are you the cor	responding author?	Yes	✓ No	Correspond W. Schuyl	-	or's Name	
5. Manuscript Title Comparative Effectiveness of Aspirin Dosing in Cardiovascular Disease							
6. Manuscript Ider 21-02137	ntifying Number (if you kn	ow it)		_			
Section 2.	The Work Under Co	nsiderati	on for Publi	cation			
any aspect of the s statistical analysis, Are there any rele If yes, please fill o Excess rows can l	ubmitted work (including etc.)? evant conflicts of intere out the appropriate info oe removed by pressing	but not limits st? Ye rmation be g the "X" bu	es No low. If you have tton.	ita monitorino	g board, st	ity press the "ADI	rivate foundation, etc.) for script preparation, D" button to add a row.
Continu 2							
Section 3.	Relevant financial	activities	outside the	ubmitted	work.		
of compensation clicking the "Add Are there any rele	he appropriate boxes in a propriate boxes in the second in	oed in the i ort relatior	nstructions. Us nships that we	se one line fo	or each er	ntity; add as man	y lines as you need by
Section 4.	Intellectual Proper	ty Pater	nts & Copyri	ghts			
Do you have any	patents, whether plans	ned, pendir	ıg or issued, bı	oadly releva	ant to the	work? Yes	✓ No

Goldberg 2



Section 5.	
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?
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Based on the abo	ove disclosures, this form will automatically generate a disclosure statement, which will appear in the box
Dr. Goldberg rep	ports grants from Patient-Centered Outcomes Research Institute during the conduct of the study.

Evaluation and Feedback

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Goldberg 3



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Gregoire 1



Section 1. Identifying Inform	ation	
1. Given Name (First Name) Kenneth	2. Surname (Last Name) Gregoire	3. Date 07-April-2021
4. Are you the corresponding author?	Yes ✓ No	Corresponding Author's Name W. Schuyler Jones
5. Manuscript Title Comparative Effectiveness of Aspirin Do	osing in Cardiovascular Dis	sease
6. Manuscript Identifying Number (if you kn 21-02137	ow it)	
		_
Section 2. The Work Under Co	onsideration for Public	cation
• •		n a third party (government, commercial, private foundation, etc.) for ata monitoring board, study 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 entity press the "ADD" button to add a row.
Name of Institution/Company	Grant	n-Financial Other? Comments
Patient-Centered Outcomes Research Institute		Payment received from PCORI via Health eHeart for serving as a patient advisor
Section 3. Polovant financial		
Relevant financial	activities outside the s	submitted work.
of compensation) with entities as descri	bed in the instructions. Us	nether 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 .
Are there any relevant conflicts of intere	st? Yes 🗸 No	
Section 4. Intellectual Proper	ty Patents & Copyric	ghts
Do you have any patents, whether plann		

Gregoire 2



Section 5. Relationships 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. Gregoire reports other from Patient-Centered Outcomes Research Institute during the conduct of the study.

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Gregoire 3



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Gupta 1



Section 1.	Identifying Inform	ation	
1. Given Name (First Kamal	Name)	2. Surname (Last Name) Gupta	3. Date 05-April-2021
4. Are you the corresponding author?		Yes ✓ No	Corresponding Author's Name W. Schuyer Jones
5. Manuscript Title Comparative Effect	tiveness of Aspirin Do	osing in Cardiovascular Di	isease
6. Manuscript Identi 21-02137	fying Number (if you kn	ow it)	
Section 2.	The Work Under Co	onsideration for Publi	cation
any aspect of the sub statistical analysis, et	omitted work (including	but not limited to grants, d	n 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) v clicking the "Add +	with entities as descri	bed in the instructions. Uport relations hips that we	nether you have financial relationships (regardless of amount ise one line for each entity; add as many lines as you need by the present during the 36 months prior to publication.
Section 4.	ntellectual Proper	ty Patents & Copyri	ghts
Do you have any p	atents, whether plan	ned, pending or issued, b	roadly relevant to the work? Yes V No

Gupta 2



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?
Yes, the follo	wing relationships/conditions/circumstances are present (explain below):
✓ No other rela	tionships/conditions/circumstances that present a potential conflict of interest
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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. Gupta has no	othing to disclose.

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Gupta 3



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Hammill 1



Section 1.	Identifying Inform	ation			
1. Given Name (Fi Bradley	rst Name)	2. Surname (Last Name) Hammill		3. Date 05-April-2021	
4. Are you the corresponding author?		☐ Yes ✓ No	Corresponding Author' W. Schuyler Jones	's Name	
5. Manuscript Title Comparative Effectiveness of Aspirin Dosing in Cardiovascular Disease					
6. Manuscript Idei 21-02137	ntifying Number (if you kn	now it)	_		
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Section 2.	The Work Under Co	onsideration for Publi	cation		
any aspect of the s statistical analysis, Are there any rel If yes, please fill o Excess rows can	ubmitted work (including etc.)? evant conflicts of intere out the appropriate info be removed by pressing	est? Yes No ormation below. If you ha g the "X" button. Grant? Personal No Fees?	ve more than one entity	nt, commercial, private foundation, etc.) for dy design, manuscript preparation, y press the "ADD" button to add a row. Comments	
	ı				
Section 3.	Relevant financial	activities outside the	submitted work.		
of compensation clicking the "Adc Are there any rel) with entities as descri	bed in the instructions. Uport relationships that we	se one line for each ent	al relationships (regardless of amount ity; add as many lines as you need by 36 months prior to publication .	
Section 4.	Intellectual Proper	ty Patents & Copyri	ghts		
Do you have any	patents, whether plan	ned, pending or issued, b	roadly relevant to the w	vork?	

Hammill 2



Section 5. Polationships not severed above		
Relationships not covered above		
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Section 6. Disclosure Statement		
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Dr. Hammill reports grants from Patient-Centered Outcomes Research Institute during the conduct of the study.		

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Hammill 3



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Handberg 1



Section 1.	Identifying Inform	nation	
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4. Are you the cor	responding author?	Yes ✓ No	Corresponding Author's Name W. Schuyler Jones
5. Manuscript Title Comparative Effe		osing in Cardiovascular Di	sease
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Do you have any			roadly relevant to the work? Yes V No

Handberg 2



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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



Section 1.	Identifying Inform	ation				
1. Given Name (Firs Robert	st Name)	2. Surnan Harringt	ne (Last Name) on			3. Date 08-April-2021
4. Are you the corre	esponding author?	Yes	✓ No	Correspond W. Schuyl	_	or's Name
5. Manuscript Title Comparative Effe	ctiveness of Aspirin Do	osing in Ca	rdiovascular D	isease		
6. Manuscript Iden	tifying Number (if you kn	ow it)				
Section 2.	The Work Under Co	onsiderat	ion for Publ	ication		
any aspect of the su statistical analysis, e	bmitted work (including etc.)?	but not lim				ent, commercial, private foundation, etc.) for udy design, manuscript preparation,
•	vant conflicts of intere					
	ut the appropriate info e removed by pressing			ive more thar	n one enti	ity press the "ADD" button to add a row.
Name of Instituti	on/Company	Grant?	3	on-Financial Support	Other?	Comments
Patient-Centered Outo	comes Research Institute	✓				PCORI funding from Duke to Stanford for my professional effort.
Section 3.	Relevant financial a	activities	outside the	submitted	work	
Place a check in the of compensation) clicking the "Add Are there any rele	ne appropriate boxes in with entities as descri	n the table bed in the port relations:	to indicate whinstructions. Unships that we have	hether you ha	ave financ or each er	cial relationships (regardless of amount ntity; add as many lines as you need by e 36 months prior to publication.
Name of Entity		Grant?		on-Financial Support	Other?	Comments
SignalPath			✓			Consulting and advisory services
WedMD			✓			Consulting and advisory services
BridgeBio			✓			Consulting and advisory services



Name of Entity	Grant?	Personal Fees	Non-Financial Support?	Other?	Comments	
Atropos		✓			Consulting and advisory services	
48 Inc.		\checkmark			Consulting and advisory services	
American Heart Association				✓	Officer (unpaid)	
Section 4. Intellectual Bronout						
Intellectual Propert	y Pate	ents & Cop	oyrights			
Do you have any patents, whether plann	ed, pend	ing or issue	ed, 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/cir	cumstance	s 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, 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.		omatically (generate a disclos	sure state	ment, which will appear in the box	
Dr. Harrington reports grants from Patier fees from SignalPath, personal fees from from 48 Inc., other from American Heart	WedMD	, personal f	ees from BridgeBi	io, persor	, ,	



Evaluation and Feedback

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

Harris 1



Section 1.	Identifying Inform	ation			
1. Given Name (Fi Debra	rst Name)	2. Surname (Last Name) Harris		3. Date 07-April-2021	
4. Are you the corresponding author?		Yes ✓ No	Corresponding Auth		
5. Manuscript Title Comparative Effectiveness of Aspirin Dosing in Cardiovascular Disease					
6. Manuscript Idei 21-02137	ntifying Number (if you kn	ow it)	_		
	ı				
Section 2.	The Work Under Co	onsideration for Publi	ication		
any aspect of the s statistical analysis, Are there any rel If yes, please fill o Excess rows can	ubmitted work (including etc.)? evant conflicts of intere out the appropriate info be removed by pressing	est? Yes No formation below. If you ha g the "X" button. Grant? Personal No	ata monitoring board, s	nent, commercial, private foundation, etc.) for study design, manuscript preparation, tity press the "ADD" button to add a row. Comments Grant paid to my institution	
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Section 4.	Intellectual Proper	ty Patents & Copyri	ghts		
Do you have any	patents, whether plant	ned, pending or issued, b	roadly relevant to the	e work? ☐ Yes 🗸 No	

Harris 2



Section 5.	
Section 5.	Relationships not covered above
	relationships or activities that readers could perceive to have influenced, or that give the appearance of encing, what you wrote in the submitted work?
Yes, the follo	wing relationships/conditions/circumstances are present (explain below):
✓ No other rela	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.	
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. Harris report	s grants from Patient-Centered Outcomes Research Institute during the conduct of the study.

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Harris 3



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Haynes 1



Section 1.	Identifying Inform	ation			
1. Given Name (Fi Kevin	rst Name)	2. Surname (Last Name) Haynes		3. Date 07-April-2021	
4. Are you the corresponding author?		Yes ✓ No	Corresponding Author	or's Name	
5. Manuscript Title Comparative Effectiveness of Aspirin Dosing in Cardiovascular Disease					
6. Manuscript Ider 21-02137	ntifying Number (if you kn	ow it)	_		
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Section 2.	The Work Under Co	onsideration for Publi	cation		
any aspect of the s statistical analysis, Are there any rel If yes, please fill o Excess rows can Name of Institut	ubmitted work (including etc.)? evant conflicts of intere out the appropriate info be removed by pressing	est? Yes No ormation below. If you have the "X" button. Grant? Personal No Fees?	ata monitoring board, st	rent, commercial, private foundation, etc.) for tudy design, manuscript preparation, rity press the "ADD" button to add a row. Comments HP-1510-32545.	
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Section 4.	Intellectual Proper	ty Patents & Copyri	ghts		
Do you have any	patents, whether plani	ned, pending or issued, b	roadly relevant to the	ework? ☐ Yes ✓ No	

Haynes 2



Section 5.	
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?
Yes, the follow	wing relationships/conditions/circumstances are present (explain below):
✓ No other rela	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
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Dr. Haynes repo	rts grants from Patient-Centered Outcomes Research Institute during the conduct of the study.

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Haynes 3



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patent

Hernandez 1



Section 1.							
Section 1.	Identifying Inform	nation					
1. Given Name (F Adrian	irst Name)	2. Surnar Hernanc	me (Last Name) dez			3. Date 03-April-2021	
4. Are you the co	rresponding author?	Yes	✓ No	Correspond W. Schuyl	ding Author's Na er Jones	ame	
5. Manuscript Titl Comparative Eff	e fectiveness of Aspirin Do	osing in Ca	ırdiovascular D	isease			
6. Manuscript Ide 21-02137	entifying Number (if you kr	now it)					
Section 2.	The Work Under C	onsidera	tion for Publ	ication			
	submitted work (including					ommercial, private foundati esign, manuscript preparat	
Are there any re	levant conflicts of intere	est? 🗸 `	Yes No				
	out the appropriate info be removed by pressin			ave more thar	one entity pre	ess the "ADD" button to	add a row.
Name of Institu	tion/Company	Grant?		on-Financial Support?	Other? Co	mments	
Patient-Centered Ou	itcomes Research Institute	· 🗸					
Section 3.	Relevant financial	activities	outside the	submitted	work.		
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Name of Entity		Grant?	_	on-Financial Support <mark>?</mark>	Other? Co	mments	
AstraZeneca		✓	✓		trial	grant; consulting	
Amgen			✓		consu	ulting	
Bayer			✓		consu	ulting	

Hernandez 2



Name of Entity	Grant?	Personal Fees?	Non-Financial Support?	Other?	Comments	
American Regent	✓				trial grant	
Bristol Myers Squibb					study grant	
Merck	✓	✓			trial grant; consulting	
Novartis	✓	✓			trial grant; consulting	
Pfizer	✓	✓			study grant; consulting	
Boehringer Ingelheim	✓	\checkmark			trial grant; consulting	
Verily	✓				study grant	
Cytokinetics		✓			consulting	
Myokardia		✓			consulting	
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						
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.						

Hernandez 3

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. Hernandez reports grants from Patient-Centered Outcomes Research Institute, during the conduct of the study; grants and personal fees from AstraZeneca, personal fees from Amgen, personal fees from Bayer, grants from American Regent, grants from BristolMyersSquibb, grants and personal fees from Merck, grants and personal fees from Novartis, grants and personal fees from Pfizer, grants and personal fees from Boehringer Ingelheim, grants from Verily, personal fees from Cytokinetics, personal fees from Myokardia, outside the submitted work;

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Hernandez 4



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Hess 1



Section 1. Identifying Inform	nation	
1. Given Name (First Name) Rachel	2. Surname (Last Name) Hess	3. Date 02-April-2011
4. Are you the corresponding author?	Yes 🗸 No	Corresponding Author's Name W. Schuyler Jones
5. Manuscript Title Comparative Effectiveness of Aspirin D	osing in Cardiovascular Di	sease
6. Manuscript Identifying Number (if you kr 21-02137	now it)	_
Section 2. The Work Under C	onsideration for Public	cation
any aspect of the submitted work (including statistical analysis, etc.)? Are there any relevant conflicts of intere	g but not limited to grants, datest? Yes Downward No	the a third party (government, commercial, private foundation, etc.) for at a monitoring board, study design, manuscript preparation, we more than one entity press the "ADD" button to add a row.
Name of Institution/Company	Grant? Personal No	n-Financial Other? Comments
Patient-Centered Outcomes Research Institute	•	For conduct of study
	_	
Section 3. Relevant financial	activities outside the	submitted work.
of compensation) with entities as descr clicking the "Add +" box. You should re Are there any relevant conflicts of inter	ibed in the instructions. Us port relationships that we	nether 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 .
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Do you have any patents, whether plan	ned, pending or issued, br	roadly relevant to the work? Yes V No

Hess 2



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

Jain 1



Section 1.	Identifying Inform	ation	
1. Given Name (Fii Sandeep	rst Name)	2. Surname (Last Name) Jain	3. Date 04-April-2021
4. Are you the cor	responding author?	Yes ✓ No	Corresponding Author's Name W. Schuyler Jones
5. Manuscript Title Comparative Effe		osing in Cardiovascular Di	sease
6. Manuscript Ider 21-02137	ntifying Number (if you kr	now it)	
Section 2.	The Work Under Co	onsideration for Publi	cation
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 at a 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. Use port relationships that we	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.
Section 4.	Intellectual Proper	ty Patents & Copyri	ghts
Do you have any	patents, whether plan	ned, pending or issued, bı	roadly relevant to the work? Yes V No

Jain 2



Section 5.	
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?
Yes, the follow	wing relationships/conditions/circumstances are present (explain below):
✓ No other relat	tionships/conditions/circumstances that present a potential conflict of interest
	nuscript 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
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Dr. Jain has noth	ing to disclose.

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Jain 3



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



Continue 1					
Section 1.	Identifying Inform	ation			
1. Given Name (First William	t Name)	2. Surname (Last N Jones	Name)		3. Date 02-April-2021
4. Are you the corre	sponding author?	✓ Yes No)		
5. Manuscript Title Comparative Effec	tiveness of Aspirin Do	sing in Cardiovaso	cular Disease		
6. Manuscript Identi 21-02137	ifying Number (if you kno	ow it)			
Section 2.	The Work Under Co	nsideration for	Publication		
any aspect of the sub statistical analysis, et Are there any relev If yes, please fill ou	omitted work (including tc.)? vant conflicts of intere	but not limited to g st? Yes rmation below. If	rants, data monitoring	g board, stu	ent, commercial, private foundation, etc.) for udy design, manuscript preparation, ty press the "ADD" button to add a row.
Name of Institution		Grant? Person		Other?	Comments
Patient-Centered Outco	omes Research Institute	✓			Research Grant to DCRI
Section 2					
Section 3.	Relevant financial a	ictivities outsid	e the submitted	work.	
of compensation) clicking the "Add -1 Are there any relev	with entities as descrik	oed in the instruct ort relationships t st?	ions. Use one line fo	or each en	ial relationships (regardless of amount atity; add as many lines as you need by a 36 months prior to publication.
Name of Entity		Grant? Person		Other?	Comments
Boehringer Ingelheim		✓			Research Grant
Bayer		✓			Consulting, Research Grant (CEC) - non-related
lanssen Pharmaceutica	als	✓			Consulting, Research Grant (CEC)



Name of Entity	Grant?	Personal Fees?	Non-Financial Support?	Other?	Comments	
Bristol-Myers Squibb		✓			Consulting	
Merck	✓				Research Grant (CEC)	
Medscape		\checkmark			Consulting	
Section 4.						
Intellectual Propert	ty Pate	ents & Co _l	oyrights			
Do you have any patents, whether plann	ed, pend	ing or issue	ed, 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/conc	litions/cir	cumstance	s are present (exp	olain belo	ow):	
No other relationships/conditions/cir						
At the time of manuscript acceptance, jo On occasion, journals may ask authors to					•	ents.
Section 6. Disclosure Statemen						
Disclosure Stateme						
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. Jones reports grants from Patient-Ce Boehringer Ingelheim, grants and perso personal fees from Bristol-Myers Squibb	nal fees fi	rom Bayer,	grants and perso	nal fees fi	rom Janssen Pharmaceuticals,	



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

Kaushal 1



Section 1.	Identifying Inform	nation	
1. Given Name (Fir Rainu	rst Name)	2. Surname (Last Name) Kaushal	3. Date 05-April-2021
4. Are you the cor	responding author?	Yes ✓ No	Corresponding Author's Name W. Schuyler Jones
5. Manuscript Title Comparative Effe		osing in Cardiovascular Di	sease
6. Manuscript Ider 21-02137	ntifying Number (if you kr	now it)	
Section 2.	The Work Under Co	onsideration for Publi	cation
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 ata monitoring board, study design, manuscript preparation,
Section 3.	Relevant financial	activities outside the	submitted work.
of compensation clicking the "Add) with entities as descri	bed in the instructions. U port relationships that we	nether 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 .
Section 4.	Intellectual Proper	ty Patents & Copyri	ghts
Do you have any	patents, whether plan	ned, pending or issued, b	roadly relevant to the work? Yes V No

Kaushal 2



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?
Yes, the follo	wing relationships/conditions/circumstances are present (explain below):
✓ No other rela	tionships/conditions/circumstances that present a potential conflict of interest
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Section 6.	Disclosure Statement
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Dr. Kaushal has ı	nothing to disclose.

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

Kho 1



Section 1. Identifying Inform	ation		
1. Given Name (First Name) Abel	2. Surname (Last Name) Kho		3. Date 07-April-2021
4. Are you the corresponding author?	Yes ✓ No	Corresponding Autho	or's Name
5. Manuscript Title Comparative Effectiveness of Aspirin Do	osing in Cardiovascular Dis	sease	
6. Manuscript Identifying Number (if you kn 21-02137	ow it)	_	
Section 2. The Work Under Co	onsideration for Public	ation	
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 in of compensation) with entities as descriclicking the "Add +" box. You should repart there any relevant conflicts of interesting the second conflicts of the	bed in the instructions. Us port relationships that wer st?	e one line for each en	ntity; add as many lines as you need by
Name of Entity	Grant? Personal Nor	n-Financial other?	Comments
Datavant			Paid strategic adviser and equity holder
Section 4. Intellectual Proper	ty Patents & Copyri <u>c</u>	jhts	
Do you have any patents, whether plant	ned, pending or issued, br	oadly relevant to the	work? Yes No

Kho 2



Section 5.	
Section 5.	Relationships not covered above
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Yes, the follo	wing relationships/conditions/circumstances are present (explain below):
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Knowlton 1



Section 1. Identifying Inform	nation	
1. Given Name (First Name) Kirk	2. Surname (Last Name) Knowlton	3. Date 09-April-2021
4. Are you the corresponding author?	☐ Yes ✓ No	Corresponding Author's Name W. Schuyler Jones
5. Manuscript Title Comparative Effectiveness of Aspirin D	osing in Cardiovascular Dis	sease
6. Manuscript Identifying Number (if you k 21-02137	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,
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Section 4. Intellectual Prope	rty Patents & Copyrig	yhts
Do you have any patents, whether plan	nned, pending or issued, br	oadly relevant to the work? ☐ Yes ✓ No

Knowlton 2



Section 5.	
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Kraschnewski 1



Section 1. Identifying Inform	ation		
1. Given Name (First Name) Jennifer	2. Surname (Last Name) Kraschnewski		3. Date 03-April-2021
4. Are you the corresponding author?	Yes ✓ No	Corresponding Autho W. Schuyler Jones	r's Name
5. Manuscript Title Comparative Effectiveness of Aspirin Do	osing in Cardiovascular Dis	sease	
6. Manuscript Identifying Number (if you kn 21-02137	ow it)	_	
Section 2			
Section 2. The Work Under Co	onsideration for Public	cation	
Did you or your institution at any time receirany aspect of the submitted work (including statistical analysis, etc.)?	but not limited to grants, da		
Are there any relevant conflicts of intere		.1	
If yes, please fill out the appropriate info Excess rows can be removed by pressing	•	e more than one entit	ty press the "ADD" button to add a row.
Name of Institution/Company	Grant? Personal Nor	n-Financial Other?	Comments
Patient-Centered Outcomes Research Institute	✓		
Section 3. Relevant financial a	activities outside the s	submitted work.	
Place a check in the appropriate boxes in of compensation) with entities as describle clicking the "Add +" box. You should repart there any relevant conflicts of interesting please fill out the appropriate info	bed in the instructions. Us port relationships that wer st?	se one line for each en	tity; add as many lines as you need by
Name of Entity	Grant	n-Financial other?	Comments
Merck Foundation			Paid to Penn State University

Kraschnewski 2



Evaluation and Feedback

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

Kraschnewski 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.

Identifying information.

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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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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

Kripalani 1



Section 1.	Identifying Inform	nation	
1. Given Name (Fi Sunil	rst Name)	2. Surname (Last Name) Kripalani	3. Date 03-April-2021
4. Are you the cor	responding author?	Yes 🗸 No	Corresponding Author's Name W. Schuyler Jones
5. Manuscript Title Comparative Eff		osing in Cardiovascular Di	sease
6. Manuscript Idea	ntifying Number (if you kr	now it)	
Section 2.	The Work Under C	onsideration for Publi	cation
any aspect of the s statistical analysis,	ubmitted work (including	g 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 s	submitted work.
of compensation clicking the "Add	n) with entities as descri	ibed in the instructions. Us port relationships that we	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 .
Section 4.	Intellectual Prope	rty Patents & Copyri	ghts
Do you have any	patents, whether plan	ned, pending or issued, br	roadly relevant to the work? Yes V No

Kripalani 2



Section 5. Relationships 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):
✓ 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. Kripalani has nothing to disclose.

Evaluation and Feedback

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Kripalani 3



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

Marcus 1



Section 1.	Identifying Inform	nation	
1. Given Name (Fir Gregory	st Name)	2. Surname (Last Name) Marcus	3. Date 09-April-2021
4. Are you the corr	esponding author?	Yes ✓ No	Corresponding Author's Name W. Schuyler Jones
5. Manuscript Title Comparative Effe		osing in Cardiovascular Di	sease
6. Manuscript Iden 21-02137	tifying Number (if you kr	now it)	
Section 2.	The Work Under Co	onsideration for Publi	cation
any aspect of the su statistical analysis, e	ubmitted work (including	but not limited to grants, da	a third party (government, commercial, private foundation, etc.) for ata monitoring board, study design, manuscript preparation,
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Section 4.	Intellectual Proper	ty Patents & Copyri	ghts
Do you have any	patents, whether plan	ned, pending or issued, br	roadly relevant to the work? Yes V No

Marcus 2



Section 5.	
Section 5.	Relationships not covered above
	relationships or activities that readers could perceive to have influenced, or that give the appearance of encing, what you wrote in the submitted work?
Yes, the follo	wing relationships/conditions/circumstances are present (explain below):
✓ No other rela	ationships/conditions/circumstances that present a potential conflict of interest
	anuscript acceptance, journals will ask authors to confirm and, if necessary, update their disclosure statements Irnals may ask authors to disclose further information about reported relationships.
Section 6.	Disclosure Statement
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Dr. Marcus has r	nothing to disclose.

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

patent

Marquis-Gravel 1



Section 1. Identifying Inform				
Identifying Inform	ation			
1. Given Name (First Name) Guillaume	2. Surname (Last Name) Marquis-Gravel		3. Date 09-April-2021	
4. Are you the corresponding author?	Yes ✓ No	Corresponding Author's N W. Schuyler Jones	Name	
5. Manuscript Title Comparative Effectiveness of Aspirin Do	osing in Cardiovascular D	visease		
6. Manuscript Identifying Number (if you kn 21-02137	now it)			
Section 2. The Work Under Co	onsideration for Publ	ication		
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 No				
Section 3. Relevant financial activities outside the submitted work.				
Place a check in the appropriate boxes i of compensation) with entities as descri clicking the "Add +" box. You should rep Are there any relevant conflicts of interes	bed in the instructions. Uport relationships that we	Jse one line for each entity	y; add as many lines as you need l	
If yes, please fill out the appropriate info				
Name of Entity	Grant? Personal Fees?	on-Financial Support? Other?	omments	
Novartis		Adv	visory boards	
Bayer	V		S-Bayer Resident Vascular Award. eaking fees	
JAMP		Adv	visory board	
Canadian Institute of Health Research		Pos	st-doctoral fellowship grant	

Marquis-Gravel 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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Dr. Marquis-Gravel reports personal fees from Novartis, grants and personal fees from Bayer, personal fees from JAMP, grants from Canadian Institute of Health Research, outside the submitted work.

Evaluation and Feedback

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patent

Masoudi 1



Section 1.	Identifying Inform	nation	
1. Given Name (Fi Frederick	rst Name)	2. Surname (Last Name) Masoudi	3. Date 04-April-2021
4. Are you the corresponding author?		Yes 🗸 No	Corresponding Author's Name W. Schuyler Jones
5. Manuscript Title Comparative Effe		osing in Cardiovascular Di	sease
6. Manuscript Ider 21-02137	ntifying Number (if you kr	now it)	
Section 2.	The Work Under Co	onsideration for Publi	cation
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 ata monitoring board, study design, manuscript preparation,
Section 3.	Relevant financial	activities outside the	submitted work.
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Section 4.	Intellectual Proper	rty Patents & Copyri	ghts
Do you have any	patents, whether plan	ned, pending or issued, bı	roadly relevant to the work? Yes V No

Masoudi 2



Section 5.	
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?
Yes, the follow	wing relationships/conditions/circumstances are present (explain below):
✓ No other rela	tionships/conditions/circumstances that present a potential conflict of interest
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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. Masoudi has	nothing to disclose.

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Masoudi 3



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McClay

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1

administrative support, etc.



Section 1.	Identifying Inform	nation	
1. Given Name (Firs	st Name)	2. Surname (Last Name) McClay	3. Date 06-April-2021
4. Are you the corre	esponding author?	Yes ✓ No	Corresponding Author's Name W. Schuyler Jones
5. Manuscript Title Comparative Effe	ctiveness of Aspirin Do	osing in Cardiovascular Di	sease
6. Manuscript Ident 21-02137	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 ita monitoring board, study design, manuscript preparation,
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Section 4.	Intellectual Proper	ty Patents & Copyri	ghts
Do you have any p	patents, whether plan	ned, pending or issued, br	oadly relevant to the work? Yes V No

McClay 2



Section 5.	
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?
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Section 6.	Disclosure Statement
Based on the abo	ve disclosures, this form will automatically generate a disclosure statement, which will appear in the box
Dr. McClay has n	othing to disclose.

Evaluation and Feedback

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McClay 3



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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

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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

McCormick 1



Section 1.	Identifying Inform	ation	
1. Given Name (Fi	rst Name)	2. Surname (Last Name) McCormick	3. Date 07-April-2021
4. Are you the cor	responding author?	☐ Yes ✓ No	Corresponding Author's Name W. Schuyler Jones
5. Manuscript Title Comparative Effe		osing in Cardiovascular	Disease
6. Manuscript Ider 21-02137	ntifying Number (if you kn	now it)	
	l		
Section 2.	The Work Under Co	onsideration for Pub	olication
any aspect of the s statistical analysis,	ubmitted work (including	but not limited to grants,	om a third party (government, commercial, private foundation, etc.) for data monitoring board, study design, manuscript preparation,
	out the appropriate info		nave more than one entity press the "ADD" button to add a row.
Name of Institut	ion/Company	Grant? Personal Fees?	Support? Comments
Patient-Centered Out	comes Research Institute		Payment received from PCORI via Health eHeart for serving as a patient advisor
Section 3.	Relevant financial	activities outside th	e submitted work.
of compensation clicking the "Add) with entities as descri +" box. You should rep	bed in the instructions. port relationships that v	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 rel	evant conflicts of intere	est? Yes ✓ No	
	l		
Section 4.	Intellectual Proper	ty Patents & Copy	rights
Do you have any	patents, whether plan	ned, pending or issued,	broadly relevant to the work? Yes V No

McCormick 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):
✓ 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. McCormick reports other from Patient-Centered Outcomes Research Institute during the conduct of the study.

Evaluation and Feedback

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

McCormick 3



Instructions

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McTigue 1



Section 1.	Identifying Inform	ation	
1. Given Name (Firs Kathleen	t Name)	2. Surname (Last Name) McTigue	3. Date 06-April-2021
4. Are you the corresponding author?		Yes ✓ No	Corresponding Author's Name W. Schuyler Jones
5. Manuscript Title Comparative Effec	ctiveness of Aspirin Do	osing in Cardiovascular Di	isease
6. Manuscript Ident 21-02137	ifying Number (if you kn	ow it)	
Section 2.	The Work Under Co	onsideration for Publi	cation
any aspect of the su statistical analysis, e	bmitted work (including	but not limited to grants, d	n 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) clicking the "Add -	with entities as descri	bed in the instructions. Uport relationships that we	nether you have financial relationships (regardless of amount lse one line for each entity; add as many lines as you need by ere present during the 36 months prior to publication .
Section 4.	Intellectual Proper	ty Patents & Copyri	ghts
Do you have any p	patents, whether plani	ned, pending or issued, b	roadly relevant to the work? Yes V No

McTigue 2



Section 5.	
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?
Yes, the follow	wing relationships/conditions/circumstances are present (explain below):
✓ No other rela	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. McTigue 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.

McTigue 3



Instructions

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Definitions.

Merritt

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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

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

1

administrative support, etc.



Section 1. Identifying Inform	ation		
Given Name (First Name) James Gregory	2. Surname (Last Name) Merritt		3. Date 07-April-2021
4. Are you the corresponding author?	☐ Yes 🗸 No	Corresponding Author's Name W. Schuyler Jones	
5. Manuscript Title Comparative Effectiveness of Aspirin Do	osing in Cardiovascular Dis	sease	
6. Manuscript Identifying Number (if you kn 21-02137	ow it)		
		_	
Section 2. The Work Under Co	onsideration for Public	ation	
Did you or your institution at any time receirany aspect of the submitted work (including statistical analysis, etc.)?		. , .	ent, commercial, private foundation, etc.) for audy 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	•	e more than one ent	ity press the "ADD" button to add a row.
Name of Institution/Company	Grant	n-Financial other?	Comments
Patient-Centered Outcomes Research Institute			Payment received from PCORI via Health eHeart for serving as a patient advisor
Continu 2			
Section 3. Relevant financial a	activities outside the s	ubmitted 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 instructions. Us	e one line for each e	ntity; add as many lines as you need by
Are there any relevant conflicts of intere	st? Yes 🗸 No		
Section 4. Intellectual Proper	ty Patents & Copyrig	ıhts	
Do you have any patents, whether plans			work? ☐ Yes ✓ No

Merritt 2



Section 5.	
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?
Yes, the follo	wing relationships/conditions/circumstances are present (explain below):
✓ No other rela	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.
	1
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. Merritt repor	ts other from Patient-Centered Outcomes Research Institute during the conduct of the study.

Evaluation and Feedback

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Merritt 3



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Modrow 1



Section 1.	Identifying Inform	ation		
1. Given Name (Fi Madelaine	rst Name)	2. Surname (Last Name) Modrow		3. Date 06-April-2021
4. Are you the cor	responding author?	Yes No	Corresponding Author's N	Name
5. Manuscript Title Comparative Effe		osing in Cardiovascular D	isease	
6. Manuscript Ider 21-02137	ntifying Number (if you kn	ow it)		
	l			
Section 2.	The Work Under Co	onsideration for Publ	ication	
any aspect of the s statistical analysis, Are there any rel If yes, please fill o Excess rows can Name of Institut	ubmitted work (including etc.)? evant conflicts of intere out the appropriate info be removed by pressing	est? Yes No formation below. If you ha g the "X" button. Grant? Personal Fees?	on-Financial Support?	commercial, private foundation, etc.) for design, manuscript preparation, press the "ADD" button to add a row. Comments ant paid to my institution
Costion 2				
Section 3.	Relevant financial	activities outside the	submitted work.	
of compensation clicking the "Add Are there any rel) with entities as descril +" box. You should rep evant conflicts of intere	bed in the instructions. It port relations has well as the west? Yes V No	Jse one line for each entity ere present during the 36	relationships (regardless of amount y; add as many lines as you need by 5 months prior to publication.
Section 4.	Intellectual Proper	ty Patents & Copyr	ights	
Do you have any	patents, whether planr	ned, pending or issued, l	proadly relevant to the wo	rk? Yes V No

Modrow 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):
✓ 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. Modrow reports grants from Patient-Centered Outcomes Research Institute during the conduct of the study.

Evaluation and Feedback

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Modrow 3



Instructions

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Mulder 1



Section 1.	Identifying Inform	nation	
1. Given Name (Fii Hillary	rst Name)	2. Surname (Last Name) Mulder	3. Date 07-April-2021
4. Are you the corresponding author?		Yes 🗸 No	Corresponding Author's Name W. Schuyler Jones
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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 ata monitoring board, study design, manuscript preparation,
Section 3.	Relevant financial	activities outside the	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 present during the 36 months prior to publication . Are there any relevant conflicts of interest? Yes Vo			
Section 4.	Intellectual Proper	rty Patents & Copyri	ghts
Do you have any			roadly relevant to the work? Yes V No

Mulder 2



Section 5.		
Section 5.	Relationships not covered above	
	relationships or activities that readers could perceive to have influenced, or that give the appearance of encing, what you wrote in the submitted work?	
Yes, the follo	wing relationships/conditions/circumstances are present (explain below):	
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Based on the abo	ove disclosures, this form will automatically generate a disclosure statement, which will appear in the box	
Ms Mulder has	nothing to disclose.	

Evaluation and Feedback

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Mulder 3



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Munoz 1



Section 1.	Identifying Inform	nation	
1. Given Name (Fi Daniel	rst Name)	2. Surname (Last Name) Munoz	3. Date 07-April-2021
4. Are you the corresponding author?		☐ Yes 🗸 No	Corresponding Author's Name W. Schuyler Jones
5. Manuscript Title Comparative Eff		osing in Cardiovascular Dis	sease
6. Manuscript Idea	ntifying Number (if you kr	now it)	
			_
Section 2.	The Work Under C	onsideration for Public	cation
any aspect of the s statistical analysis,	ubmitted work (including	g 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.
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Section 4.	Intellectual Proper	rty Patents & Copyric	yhts
Do you have any	patents, whether plan	ned, pending or issued, br	oadly relevant to the work? Yes V No

Munoz 2



Section 5.	
Deculon 5.	Relationships not covered above
	relationships or activities that readers could perceive to have influenced, or that give the appearance of encing, what you wrote in the submitted work?
Yes, the follo	wing relationships/conditions/circumstances are present (explain below):
✓ No other rela	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. Munoz has n	othing to disclose.

Evaluation and Feedback

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Munoz 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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patent

Nauman 1



Section 1.	Identifying Inform	ation		
1. Given Name (Fi Elizabeth	rst Name)	2. Surname (Last Name) Nauman		3. Date 09-April-2021
4. Are you the corresponding author?		☐ Yes ✓ No	Corresponding Auth W. Schuyler Jones	or's Name
5. Manuscript Title Comparative Effe		osing in Cardiovascular D	isease	
6. Manuscript Idei 21-02137	ntifying Number (if you kn	ow it)		
Section 2.	The Work Under Co	onsideration for Publi	ication	
any aspect of the s statistical analysis, Are there any rel	ubmitted work (including etc.)? evant conflicts of intere	but not limited to grants, d	ata monitoring board, s	ent, commercial, private foundation, etc.) for tudy design, manuscript preparation,
	be removed by pressing		ve more than one ent	ity press the "ADD" button to add a row.
Name of Institut	ion/Company	Grant? Personal No	on-Financial Support?	Comments
Patient Centered Out PCORI)	comes Research Institute	V		
Section 3.	Relevant financial	activities outside the	submitted work.	
of compensation clicking the "Adc Are there any rel) with entities as descri	bed in the instructions. Uport relations hips that we	lse 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 .
Section 4.	Intellectual Proper	ty Patents & Copyri	ghts	
Do you have any	patents, whether plani	ned, pending or issued, b	roadly relevant to the	work? Yes Vo

Nauman 2



Section 5. Polationships not severed above
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Yes, the following relationships/conditions/circumstances are present (explain below):
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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
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Dr. Nauman reports grants from Patient Centered Outcomes Research Institute (PCORI) during the conduct of the study.

Evaluation and Feedback

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Nauman 3



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patent

Paranjape 1



Section 1.	Identifying Inform	nation	
1. Given Name (Fire	st Name)	2. Surname (Last Name) Paranjape	3. Date 07-April-2021
4. Are you the corresponding author?		Yes ✓ No	Corresponding Author's Name W. Schuyler Jones
5. Manuscript Title Comparative Effe		osing in Cardiovascular Di	sease
6. Manuscript Iden 21-02137	itifying Number (if you kn	now it)	
Section 2.	The Work Under Co	onsideration for Publi	cation
any aspect of the su statistical analysis, e	ubmitted work (including	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 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 present during the 36 months prior to publication . Are there any relevant conflicts of interest? Yes Vo			
Section 4.	Intellectual Proper	ty Patents & Copyri	ghts
Do you have any	patents, whether plan	ned, pending or issued, br	roadly relevant to the work? Yes V No

Paranjape 2



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Section 6. Disclosure Statement
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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. Paranjape has nothing to disclose.

Evaluation and Feedback

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Paranjape 3



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Definitions.

Pencina

Entity: government agency, foundation, commercial sponsor, academic institution, etc.

Grant: A grant from an entity, generally [but not always] paid to your organization

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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 patent

1

administrative support, etc.



Section 1. Identifying Inform	aation		
identifying illioiti	iation —		
Given Name (First Name) Michael	2. Surname (Last Name) Pencina		3. Date 09-April-2021
4. Are you the corresponding author?	☐ Yes ✓ No	Corresponding Authors W. Schuyler Jones	or's Name
5. Manuscript Title Comparative Effectiveness of Aspirin Do	osing in Cardiovascular Di	sease	
6. Manuscript Identifying Number (if you kr 21-02137	now it)		
		_	
Section 2. The Work Under Co	onsideration for Publi	cation	
Did you or your institution at any time rece any aspect of the submitted work (including statistical analysis, etc.)?			ent, commercial, private foundation, etc.) for udy design, manuscript preparation,
Are there any relevant conflicts of interes	est? 🗸 Yes 🗌 No		
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
Patient-Centered Outcomes Research Institute			Grant to Duke
Section 3. Relevant financial	activities outside the	submitted work.	
Place a check in the appropriate boxes i of compensation) with entities as descri clicking the "Add +" box. You should rep Are there any relevant conflicts of intered If yes, please fill out the appropriate info	ibed in the instructions. Upport relationships that we lest? Yes No	se one line for each e	ntity; add as many lines as you need by
Name of Entity	Grant	n-Financial Other?	Comments
Sanofi/Regeneron	✓		Grants to Duke
Amgen	V		Grant to Duke
Boehringer Ingelheim			Past advisory board

Pencina 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
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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Dr. Pencina reports grants from Patient-Centered Outcomes Research Institute during the conduct of the study; grants from Sanofi/Regeneron, grants from Amgen, personal fees from Boehringer Ingelheim, outside the submitted work.

Evaluation and Feedback

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

Pencina 3



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1

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Section 1.	Identifying Inform	ation	
1. Given Name (Firs	st Name)	2. Surname (Last Name) Pepine	3. Date 05-April-2021
4. Are you the corresponding author?		Yes ✓ No	Corresponding Author's Name W. Schuyler Jones
5. Manuscript Title Comparative Effe	ctiveness of Aspirin Do	osing in Cardiovascular Di	isease
6. Manuscript Ident 21-02137	tifying Number (if you kn	ow it)	
Section 2.	The Work Under Co	onsideration for Publi	cation
any aspect of the su statistical analysis, e	ıbmitted work (including	but not limited to grants, d	n 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.
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Do you have any p	patents, whether plani	ned, pending or issued, b	roadly relevant to the work? Yes V No

Pepine 2



Section 5.	
Section 5.	Relationships not covered above
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Based on the abo below.	ove disclosures, this form will automatically generate a disclosure statement, which will appear in the box
Dr. Pepine has no	othing to disclose.

Evaluation and Feedback

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Pepine 3



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Polonsky 1



Section 1.	Identifying Inform	nation	
1. Given Name (Fi Tamar	rst Name)	2. Surname (Last Name) Polonsky	3. Date 07-April-2021
4. Are you the cor	responding author?	Yes ✓ No	Corresponding Author's Name W. Schuyler Jones
5. Manuscript Title Comparative Eff		osing in Cardiovascular Di	sease
6. Manuscript Ide 21-02137	ntifying Number (if you kr	now it)	
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Section 3.	Relevant financial	activities outside the s	submitted work.
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Do you have any	patents, whether plan	ned, pending or issued, br	roadly relevant to the work? Yes V No

Polonsky 2



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Dr. Polonsky has nothing to disclose.

Evaluation and Feedback

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Polonsky 3



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

Qualls 1



Section 1.	Identifying Inform	nation	
1. Given Name (Fii Laura	rst Name)	2. Surname (Last Name) Qualls	3. Date 05-April-2021
4. Are you the cor	responding author?	Yes 🗸 No	Corresponding Author's Name W. Schuyler Jones
5. Manuscript Title Comparative Effe		osing in Cardiovascular Di	sease
6. Manuscript Ider 21-02137	ntifying Number (if you kr	now it)	
Section 2.	The Work Under Co	onsideration for Publi	cation
any aspect of the s statistical analysis,	ubmitted work (including	but not limited to grants, do	n 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 clicking the "Add) with entities as descri	bed in the instructions. Uport relations hips that we	nether 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 .
Section 4.	Intellectual Proper	rty Patents & Copyri	ghts
Do you have any	patents, whether plan	ned, pending or issued, b	roadly relevant to the work? Yes V No

Qualls 2



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?
Yes, the follo	wing relationships/conditions/circumstances are present (explain below):
✓ No other rela	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
Ms. Qualls has n	othing to disclose.

Evaluation and Feedback

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

Qualls 3



Instructions

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Re 1



Section 1.	Identifying Inform	nation	
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6. Manuscript Ider 21-02137	ntifying Number (if you kr	now it)	
Section 2.	The Work Under Co	onsideration for Publi	cation
any aspect of the s statistical analysis,	ubmitted work (including	but not limited to grants, do	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 clicking the "Add) with entities as descri	bed in the instructions. Uport relations hips that we	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 .
Section 4.	Intellectual Proper	rty Patents & Copyri	ghts
Do you have any	patents, whether plan	ned, pending or issued, b	roadly relevant to the work? Yes V No

Re 2



Section 5.	
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?
Yes, the follo	wing relationships/conditions/circumstances are present (explain below):
✓ No other rela	tionships/conditions/circumstances that present a potential conflict of interest
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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. Re has nothi	ng to disclose.

Evaluation and Feedback

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Re 3



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Riley 1



Section 1.	Identifying Inform	nation	
1. Given Name (Fi Danielle	rst Name)	2. Surname (Last Name) Riley	3. Date 07-April-2021
4. Are you the cor	responding author?	Yes ✓ No	Corresponding Author's Name W. Schuyler Jones
5. Manuscript Title Comparative Eff		osing in Cardiovascular Di	sease
6. Manuscript Idea	ntifying Number (if you kr	now it)	
Section 2.	The Work Under C	onsideration for Public	cation
any aspect of the s statistical analysis,	ubmitted work (including	g 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 s	submitted work.
of compensation clicking the "Add	n) with entities as descri	ibed in the instructions. Us port relationships that we	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 .
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

Riley 2



Section 5.	
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?
Yes, the follow	wing relationships/conditions/circumstances are present (explain below):
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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. Riley has noth	hing to disclose.

Evaluation and Feedback

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Riley 3



Instructions

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Robertson 1



Section 1.	Identifying Inform	nation			
1. Given Name (Fi		2. Surname (Last Name) Robertson		3. Date 07-April-20)21
4. Are you the cor	responding author?	Yes ✓ No	Corresponding A W. Schuyler Jor		
5. Manuscript Title Comparative Effe		osing in Cardiovascular [Disease		
6. Manuscript Ider 21-02137	ntifying Number (if you kn	now it)			
Section 2.	The Work Under Co	onsideration for Pub	lication		
any aspect of the s statistical analysis, Are there any rel If yes, please fill o	ubmitted work (including etc.)? evant conflicts of intere	ormation below. If you h	data monitoring boar	d, study design, manusc	ript preparation,
Name of Institut			on-Financial Othe	Comments	
Patient Centered Out PCORI)	comes Research Institute	✓			
Section 3.	Relevant financial	activities outside the	submitted work		
of compensation clicking the "Add) with entities as descri	n the table to indicate with the instructions. port relationships that west?	Use one line for eac	h entity; add as many	lines as you need by
Section 4.	Intellectual Proper	rty Patents & Copyi	ights		
Do you have any	patents, whether plani	ned, pending or issued,	broadly relevant to	the work? Yes	✓ No

Robertson 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. Robertson reports grants from Patient Centered Outcomes Research Institute (PCORI) during the conduct of the study.

Evaluation and Feedback

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Robertson 3



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Roe 1



	I					
Section 1.	Identifying Inform	ation				
1. Given Name (Fi Matthew	rst Name)	2. Surnar Roe	me (Last Nar	me)		3. Date 09-April-2021
4. Are you the cor	responding author?	Yes	✓ No	Correspond W. Schuyld	_	or's Name
5. Manuscript Title Comparative Eff	e ectiveness of Aspirin Do	osing in Ca	ordiovas cul	ar Disease		
6. Manuscript Ide	ntifying Number (if you kn	ow it)				
	l					
Section 2.	The Work Under Co	onsidera	tion for P	ublication		
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of compensation clicking the "Add Are there any rel) with entities as descri	bed in the port relations: est?	e instruction onships that Yes	ns. Use one line fo	or each er	cial relationships (regardless of amount ntity; add as many lines as you need by a 36 months prior to publication .
Name of Entity		Grant?	Personal Fees?	Non-Financial Support?	Other?	Comments
Sanofi Aventis		✓	✓			Research grant to my institution that supports a portion of my salary, honororaria for clinical endpoint adjudication activities
lanssen Pharmaceuti	cals		✓			Honoraria for consulting activities
Ferring Pharmaceution	cals	✓				Research grant to my institution that supports a portion of my salary
Myokardia		✓				Research grant to my institution that supports a portion of my salary

Roe 2



Name of Entity	Grant?	Personal Fees	Non-Financial Support?	Other?	Comments
Astra Zeneca	√	✓			Research grant to my institution that supports a portion of my salary, honoraria for consulting activities
American College of Cardiology	✓				Research grant to my institution that supports a portion of my salary
American Heart Association	✓				Research grant to my institution that supports a portion of my salary
Familial Hypercholesterolemia Foundation	✓				Research grant to my institution that supports a portion of my salary
Amgen	✓	✓			Research grant to my institution that supports a portion of my salary, honoraria for consulting activities
Elsevier Publishers		✓			Honoraria for serving as an Associate Editor for the American Heart Journal
Regeneron		✓			Honoraria for consulting activities and for service on a Data Safety Monitoring Board
Roche-Genetech		/			Honoraria for service on a Data Safety Monitoring Board
Eli Lilly		✓			Honoraria for clinical endpoint adjudication activities
Novo Nordisk		/			Honoraria for clinical endpoint adjudication activities
Patient Centered Outcomes Research Institute	✓				Research grant to my institution that supports a portion of my salary
Bayer Pharmaceuticals	✓				Research grant to my institution that supports a portion of my salary
Pfizer		✓			Honoraria for consulting activities
iignal Path		\checkmark			Honoraria for consulting activities
/erana Health		✓		✓	Employed by this for-profit company and have stock options
Section 4. Intellectual Propert Do you have any patents, whether plans	•	-			work? Yes 🗸 No

Roe 3



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
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Section 6.	Disclosure Statement
Rased on the abo	ove disclosures this form will automatically generate a disclosure statement, which will appear in the box

Dr. Roe reports grants and personal fees from Sanofi Aventis, personal fees from Janssen Pharmaceuticals, grants from Ferring Pharmaceuticals, grants from Myokardia, grants and personal fees from AstraZeneca, grants from American College of Cardiology, grants from American Heart Association, grants from Familial Hypercholesterolemia Foundation, grants and personal fees from Amgen, personal fees from Elsevier Publishers, personal fees from Regeneron, personal fees from Roche-Genetech, personal fees from Eli Lilly, personal fees from Novo Nordisk, grants from Patient Centered Outcomes Research

Institute, grants from Bayer Pharmaceuticals, personal fees from Pfizer, personal fees from Signal Path, personal fees and

Evaluation and Feedback

other from Verana Health, outside the submitted work.

below.

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Roe 4



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

Roger 1



Section 1.	Identifying Inform	nation		
1. Given Name (Fi Veronique	rst Name)	2. Surname (Last Name) Roger	3. Date 07-April-2021	
4. Are you the cor	responding author?	Yes ✓ No	Corresponding Author's Name W. Schuyler Jones	
5. Manuscript Title Comparative Eff		osing in Cardiovascular Di	sease	
6. Manuscript Idea	ntifying Number (if you kr	now it)		
Section 2.	The Work Under C	onsideration for Public	cation	
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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Section 4.	Intellectual Prope	rty Patents & Copyri	ghts	
Do you have any patents, whether planned, pending or issued, broadly relevant to the work? Yes Vo				

Roger 2



Section 5.	
	Relationships not covered above
	relationships or activities that readers could perceive to have influenced, or that give the appearance of encing, what you wrote in the submitted work?
Yes, the follo	wing relationships/conditions/circumstances are present (explain below):
✓ No other rela	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. Roger has no	othing to disclose.

Evaluation and Feedback

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

Roger 3



Instructions

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

Roth Manning 1



Section 1.	Identifying Inform	nation		
1. Given Name (Fi Brittney	rst Name)	2. Surname (Last Name) Roth Manning	3. Date 05-April-2021	
4. Are you the cor	responding author?	Yes ✓ No	Corresponding Author's Name W. Schuyler Jones	
5. Manuscript Title Comparative Eff		osing in Cardiovascular Dis	sease	
6. Manuscript Idea	ntifying Number (if you kr	now it)		
Section 2.	The Work Under C	onsideration for Public	cation	
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Section 3.	Relevant financial	activities outside the s	submitted work.	
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Section 4.	Intellectual Prope	rty Patents & Copyric	ghts	
Do you have any patents, whether planned, pending or issued, broadly relevant to the work? Yes Vo				

Roth Manning 2



Section 5.	
Section 5.	Relationships not covered above
	elationships or activities that readers could perceive to have influenced, or that give the appearance of named in the submitted work?
Yes, the follow	ving relationships/conditions/circumstances are present (explain below):
✓ No other relat	ionships/conditions/circumstances that present a potential conflict of interest
	nuscript acceptance, journals will ask authors to confirm and, if necessary, update their disclosure statements nals may ask authors to disclose further information about reported relationships.
Section 6.	Disclosure Statement
Based on the aborbelow.	ve disclosures, this form will automatically generate a disclosure statement, which will appear in the box
Mrs. Roth Mannir	ng has nothing to disclose.

Evaluation and Feedback

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Roth Manning 3



Instructions

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

Rothman 1



_				
Section 1. Identifying Information				
1. Given Name (First Name) Russell	2. Surname (Last Name) Rothman		3. Date 04-April-2021	
4. Are you the corresponding author?	☐ Yes ✓ No	Corresponding Auth W. Schuyler Jones	or's Name	
5. Manuscript Title Comparative Effectiveness of Aspirin D	osing in Cardiovascular Di	sease		
6. Manuscript Identifying Number (if you ki 21-02137	now it)	_		
Section 2. The Work Under C	onsideration for Publi	cation		
any aspect of the submitted work (including statistical analysis, etc.)?	g but not limited to grants, da		ent, commercial, private foundation, etc.) for cudy design, manuscript preparation,	
Are there any relevant conflicts of inter-			:	
Excess rows can be removed by pressing		e more than one ent	ity press the "ADD" button to add a row.	
Name of Institution/Company	Grant	n-Financial Other	Comments	
Patient-Centered Outcomes Research Institute	· 🗸			
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 re	ibed in the instructions. U	se one line for each e		
Are there any relevant conflicts of inter-				
If yes, please fill out the appropriate info	ormation below.			
Name of Entity	Grant? Personal No	n-Financial Other?	Comments	
Abbott			Consulting, not related to current project	
edlogics			Consulting, not related to current project	

Rothman 2



Section 4. Intellectual Property Patents & Copyrights
Do you have any patents, whether planned, pending or issued, broadly relevant to the work? Yes V No
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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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. Rothman reports grants from Patient-Centered Outcomes Research Institute during the conduct of the study; personal fees from Abbott, personal fees from edlogics, outside the submitted work.

Evaluation and Feedback

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

Rothman 3



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patent

Sharlow 1



Section 1. Identifying Inform	ation			
Given Name (First Name) Amber	2. Surname (Last Name) Sharlow	3. Date 07-April-2021		
4. Are you the corresponding author?	☐ Yes ✓ No	Corresponding Author's Name W. Schuyler Jones		
5. Manuscript Title Comparative Effectiveness of Aspirin Do	sing in Cardiovascular Dis	sease		
6. Manuscript Identifying Number (if you kn 21-02137	ow it)			
Section 2. The Work Under Co	onsideration for Public	cation		
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 No If yes, please fill out the appropriate information below. If you have more than one entity press the "ADD" button to add a row. Excess rows can be removed by pressing the "X" button.				
Name of Institution/Company Grant Personal Non-Financial Support Other Comments				
Patient-Centered Outcomes Research Institute		Grant paid to my institution		
Section 3. Relevant financial a	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 present during the 36 months prior to publication . Are there any relevant conflicts of interest? Yes Vo				
Section 4. Intellectual Proper	ty Patents & Copyri <u>c</u>	ghts		
Do you have any patents, whether plann	ned, pending or issued, br	roadly relevant to the work? Yes V No		

Sharlow 2



Section 5.	
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?
Yes, the follow	wing relationships/conditions/circumstances are present (explain below):
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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. Sharlow repo	orts grants from Patient-Centered Outcomes Research Institute during the conduct of the study.

Evaluation and Feedback

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Sharlow 3



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patent

Shenkman 1



Section 1.	Identifying Inform	nation		
1. Given Name (Fii Elizabeth	rst Name)	2. Surname (Last Name) Shenkman	3. Date 07-April-2021	
4. Are you the cor	responding author?	Yes ✓ No	Corresponding Author's Name W. Schuyler Jones	
5. Manuscript Title Comparative Effe		osing in Cardiovascular Di	sease	
6. Manuscript Ider 21-02137	ntifying Number (if you kr	now it)		
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Section 3.	Relevant financial	activities outside the	submitted work.	
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Shenkman 2



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

Evaluation and Feedback

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Shenkman 3



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VanWormer 1



Section 1.	Identifying Inform	nation		
1. Given Name (Fi Jeffrey	rst Name)	2. Surname (Last Name) VanWormer	3. Date 06-April-2021	
4. Are you the cor	responding author?	Yes ✓ No	Corresponding Author's Name W. Schuyler Jones	
5. Manuscript Title Comparative Eff		osing in Cardiovascular Di	sease	
6. Manuscript Idea	ntifying Number (if you kr	now it)		
Section 2.	The Work Under Co	onsideration for Publi	cation	
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Section 4.	Intellectual Prope	rty Patents & Copyri	ghts	
Do you have any patents, whether planned, pending or issued, broadly relevant to the work? Yes Vo				

VanWormer 2



Section 5. Polationships not sovered above
Relationships not covered above
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Yes, the following relationships/conditions/circumstances are present (explain below):
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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
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Dr. VanWormer has nothing to disclose.

Evaluation and Feedback

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VanWormer 3



Instructions

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

Waitman 1



Section 1.	Identifying Inform	nation	
1. Given Name (Fi Lemuel	rst Name)	2. Surname (Last Name) Waitman	3. Date 02-April-2021
4. Are you the corresponding author?		Yes ✓ No	Corresponding Author's Name W. Schuyler Jones
5. Manuscript Title Comparative Eff		osing in Cardiovascular Dis	sease
6. Manuscript Idea	ntifying Number (if you kr	now it)	
			_
Section 2.	The Work Under Co	onsideration for Public	cation
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	upmitted work
of compensation clicking the "Add	the appropriate boxes i n) with entities as descri	n the table to indicate whole bed in the instructions. Use 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	rty Patents & Copyric	ghts
Do you have any			oadly relevant to the work? Yes V No

Waitman 2



Section 5.					
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?				
Yes, the follow	Yes, the following relationships/conditions/circumstances are present (explain below):				
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Royalties: Funds are coming in to you or your institution due to your patent

Whittle 1



Section 1. Identifying Inform	antion	
identifying inform	nation	
1. Given Name (First Name) Jeff	2. Surname (Last Name) Whittle	3. Date 03-April-2021
4. Are you the corresponding author?	☐ Yes ✓ No	Corresponding Author's Name W. Schuyler Jones
5. Manuscript Title Comparative Effectiveness of Aspirin D	osing in Cardiovascular Dis	sease
6. Manuscript Identifying Number (if you ki 21-02137	now it)	
Section 2. The Work Under C	onsideration for Public	cation
	g 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 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 re present during the 36 months prior to publication.
Section 4. Intellectual Prope	rty Patents & Copyric	ghts
Do you have any patents, whether plan	ned, pending or issued, br	oadly relevant to the work? Yes V No

Whittle 2



Section 5.	
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?
Yes, the follow	wing relationships/conditions/circumstances are present (explain below):
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Royalties: Funds are coming in to you or your institution due to your patent

Wruck 1



Section 1.	Identifying Inform	ation		
1. Given Name (Fi Lisa	rst Name)	2. Surname (Last Name) Wruck		3. Date 05-April-2021
4. Are you the corresponding author?		Yes ✓ No	Corresponding Author's N. W. Schuyler Jones	ame
5. Manuscript Title Comparative Effe		osing in Cardiovascular Di	sease	
6. Manuscript Idei 21-02137	ntifying Number (if you kn	ow it)		
	ı			
Section 2.	The Work Under Co	onsideration for Publi	cation	
any aspect of the s statistical analysis, Are there any rel If yes, please fill o Excess rows can	ubmitted work (including etc.)? evant conflicts of intere out the appropriate info be removed by pressing	est? Yes No formation below. If you have the "X" button. Grant? Personal No	re more than one entity pr	ommercial, private foundation, etc.) for design, manuscript preparation, ress the "ADD" button to add a row.
Section 3.	Delevent finencial	مطه ماد نعف معاند نعم	b	
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Section 4.	Intellectual Proper	ty Patents & Copyri	ghts	
Do you have any	patents, whether plani	ned, pending or issued, b	roadly relevant to the work	</th

Wruck 2



Section 5.	
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?
Yes, the follo	wing relationships/conditions/circumstances are present (explain below):
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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. Wruck report	ts grants from Patient-Centered Outcomes Research Institute during the conduct of the study.

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Zemon 1



Section 1. Identifying Inform	ation		
1. Given Name (First Name) Doris N.	2. Surname (Last Name) Zemon		3. Date 07-April-2021
4. Are you the corresponding author?	Yes ✓ No	Corresponding Author's Name W. Schuyler Jones	
5. Manuscript Title Comparative Effectiveness of Aspirin Do	osing in Cardiovascular Dis	sease	
6. Manuscript Identifying Number (if you kn 21-02137	ow it)		
Section 2. 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.)?			ent, commercial, private foundation, etc.) for udy 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	•	e more than one enti	ity press the "ADD" button to add a row.
Name of Institution/Company	Grant	n-Financial other?	Comments
Patient-Centered Outcomes Research Institute			Payment received from PCORI via Health eHeart for serving as a patient advisor
Section 3. Polyvant financial			
Relevant financial	activities outside the s	ubmitted work.	
Place a check in the appropriate boxes in of compensation) with entities as descriclicking the "Add +" box. You should rep	bed in the instructions. Us	se one line for each e	ntity; add as many lines as you need by
Are there any relevant conflicts of intere	est? Yes 🗸 No		
Section 4. Intellectual Proper	ty Patents & Copyric	jhts	
Do you have any patents, whether plant			work? ☐ Yes ✓ No

Zemon 2



Section 5.	
Section 5.	Relationships not covered above
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Dr. Zemon repo	rts other from Patient-Centered Outcomes Research Institute during the conduct of the study.

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Zhou 1



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4. Are you the corresponding author?		Yes ✓ No	Corresponding Author's Name W. Schuyler Jones
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Zhou 2



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