

## **ICMJE Form for Disclosure of Potential Conflicts of Interest**

The Work Under Considera	tion for Pub	lication					
Туре	No	Money Paid to You	Money to Your Institution*	Name of Entity	Comments**		
						ADD	
7. Other	X					×	
						ADD	

## 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 submission.

Complete each row by checking "No" or providing the requested information. If you have more than one relationship click the "Add" button to add a row. Excess rows can be removed by clicking the "X" button.

Type of Relationship (in alphabetical order)	No	Money Paid to You	Money to Your Institution*	Entity	Comments	
1. Board membership	X					
2. Consultancy						j.
3. Employment	X					,
4. Expert testimony	X					ļ
5. Grants/grants pending	X					,
6. Payment for lectures including service on speakers bureaus	X					ب
7. Payment for manuscript preparation	X					*

<sup>\*</sup> This means money that your institution received for your efforts on this study.

<sup>\*\*</sup> Use this section to provide any needed explanation.