

CONFLICT OF INTEREST NOTIFICATION PAGE

The corresponding author should complete and sign this form. Each author must complete and sign his or her own Conflict of Interest Disclosure Statement.

1. Attestation of Investigator Independence/Accountability

Did the authors have full access to all study data, take full responsibility for the accuracy of the data analysis, and have authority over manuscript preparation and decisions to submit the manuscript for publication?

Yes

No, please describe below and provide additional detail in cover letter if necessary

2. Institutional Conflicts of Interest

Are you aware that any of the authors' academic institutions or employers has any financial interest in or a financial conflict with the subject matter or materials discussed in this manuscript?

No

Yes, please describe below and provide additional detail in cover letter if necessary

3. Authors' Financial Conflicts of Interest

Category of Potential Conflict	If an author has had any of the listed relationships with an entity that has a financial interest in the subject matter discussed in this manuscript, write the author's name in the appropriate "yes" box below. If none of the authors has a listed relationship, check the appropriate "no" box. Explain any listed relationships in the cover letter. Please consider the past 5 years through the present when answering this question.	
	No	Yes
Employment		
Consultancies		
Honoraria		
Stock ownership or options (other than mutual funds)		
Expert testimony		
Grants received		
Grants pending		
Patents received		
Patents pending		
Royalties		

As corresponding author, I attest that the information on this form is true:

Name (please type or print) _____

Signature _____ Date: _____