

#### **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.

## 1. Identifying information.

### 2. The work under consideration for publication.

This section asks for information about the work that you have submitted for publication. The time frame for this reporting is that of the work itself, from the initial conception and planning to the present. The requested information is about resources that you received, either directly or indirectly (via your institution), to enable you to complete the work. Checking "No" means that you did the work without receiving any financial support from any third party — that is, the work was supported by funds from the same institution that pays your salary and that institution did not receive third-party funds with which to pay you. If you or your institution received funds from a third party to support the work, such as a government granting agency, charitable foundation or commercial sponsor, check "Yes".

## Relevant financial activities outside the submitted work.

This section asks about your financial relationships with entities in the bio-medical arena that could be perceived to influence, or that give the appearance of potentially influencing, what you wrote in the submitted work. You should disclose interactions with ANY entity that could be considered broadly relevant to the work. For example, if your article is about testing an epidermal growth factor receptor (EGFR) antagonist in lung cancer, you should report all associations with entities pursuing diagnostic or therapeutic strategies in cancer in general, not just in the area of EGFR or lung cancer.

Report all sources of revenue paid (or promised to be paid) directly to you or your institution on your behalf over the 36 months prior to submission of the work. This should include all monies from sources with relevance to the submitted work, not just monies from the entity that sponsored the research. Please note that your interactions with the work's sponsor that are outside the submitted work should also be listed here. If there is any question, it is usually better to disclose a relationship than not to do so.

For grants you have received for work outside the submitted work, you should disclose support ONLY from entities that could be perceived to be affected financially by the published work, such as drug companies, or foundations supported by entities that could be perceived to have a financial stake in the outcome. Public funding sources, such as government agencies, charitable foundations or academic institutions, need not be disclosed. For example, if a government agency sponsored a study in which you have been involved and drugs were provided by a pharmaceutical company, you need only list the pharmaceutical company.

## 4. Intellectual Property.

This section asks about patents and copyrights, whether pending, issued, licensed and/or receiving royalties.

## Relationships not covered above.

Use this section to report 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.

#### Definitions.

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

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

**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

**Non-Financial Support:** Examples include drugs/equipment supplied by the entity, travel paid by the entity, writing assistance, administrative support, etc.

Other: Anything not covered under the previous three boxes

**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



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Section 1. Identifying Information										
1. Given Name (First Name) KAREN	2. Surname KEMP	(Last Nar	me)		3. Date 21-September-2016					
4. Are you the corresponding author?	thor? Yes No									
5. Manuscript Title 2016-2017 ECCO Annual Disclosure of P	otential Cor	nflicts of	Interest							
6. Manuscript Identifying Number (if you know	ow it)									
Section 2. The Work Under Co	nsideratio	n for P	ublication							
Did you or your institution <b>at any time</b> receivany aspect of the submitted work (including statistical analysis, etc.)?  Are there any relevant conflicts of intere	but not limite	ed to gran	nts, data monitoring							
Section 3. Polovent financial c										
Relevant financial a	activities o	utside	the submitted	work.						
Place a check in the appropriate boxes ir of compensation) with entities as descril clicking the "Add +" box. You should rep Are there any relevant conflicts of intere	oed in the in ort relations	struction hips tha	ns. Use one line fo	or each er	ntity; add as many lines as you need by					
If yes, please fill out the appropriate info		ш	140							
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ABBVIE					CONSULTANCY, PAYMENT FOR LECTURES					
MSD				<b>✓</b>	CONSULTANCY					
TAKEDA				<b>✓</b>	CONSULTANCY, PAYMENT FOR LECTURES					
NAPP				J	CONSULTANCY, PAYMENT FOR LECTURES					
ALLERGAN				<b>✓</b>	PAYMENT FOR LECTURES					
DR FALK				<b>✓</b>	CONSULTANCY					



Name of Entity	Grant? Personal Fees?	Non-Financial Support?	Other?	Comments	
FERRING			<b>√</b>	PAYMENT FOR LECTURES	
JANSSEN			<b>✓</b>	CONSULTANCY	
Section 4. Intellectual Propert	v Patents & Cor	ovrights			
Do you have any patents, whether plann	ed, pending or issue		nt to the	work? ☐ Yes <b>✓</b> No	
Relationships not c	overed above				
Are there other relationships or activities potentially influencing, what you wrote in Yes, the following relationships/cond ✓ No other relationships/conditions/cir.  At the time of manuscript acceptance, journals may ask authors to	n the submitted wor litions/circumstance cumstances that pre urnals will ask autho	rk? s are present (expesent a potential of the potential	olain belo conflict o	ow): f interest sary, update their disclosure statement	ts.
Section 6. Disclosure Statemen	nt				
Based on the above disclosures, this form below.	າ will automatically <u>c</u>	generate a disclos	sure state	ement, which will appear in the box	
NO OTHER CONFLICT OF INTEREST					



#### **Evaluation and Feedback**

Please visit <a href="http://www.icmje.org/cgi-bin/feedback">http://www.icmje.org/cgi-bin/feedback</a> to provide feedback on your experience with completing this form.