ICMJE Form for Disclosure of Potential Conflicts of Interest

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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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”.

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4. Intellectual Property.

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

5. Relationships not covered above.

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Royalties: Funds are coming in to you or your institution due to your patent
ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)  
   David

2. Surname (Last Name)  
   Sprunger

3. Date  
   08-August-2019

4. Are you the corresponding author?  
   Yes ❑  No ❑

   Corresponding Author’s Name  
   Evans Fernandez Perez

5. Manuscript Title  
   Reply to: Hypersensitivity Pneumonitis Mortality by Industry and Occupation

6. Manuscript Identifying Number (if you know it)  
   Blue-201904-0876LE

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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 ❑

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Are there any relevant conflicts of interest?  
   Yes ❑  No ❑

Section 4. Intellectual Property -- Patents & Copyrights

Do you have any patents, whether planned, pending or issued, broadly relevant to the work?  
   Yes ❑  No ❑
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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. Sprunger has nothing to disclose.

**Evaluation and Feedback**

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# ICMJE Form for Disclosure of Potential Conflicts of Interest

## Section 1. Identifying Information

| 1. Given Name (First Name) | Evans |
|-----------------------------|-------|
| 2. Surname (Last Name)     | Fernández Pérez |
| 3. Date                     | 29-July-2019 |
| 4. Are you the corresponding author? | Yes | No |
| 5. Manuscript Title         | Reply to: Hypersensitivity Pneumonitis Mortality by Industry and Occupation |
| 6. Manuscript Identifying Number (if you know it) | Blue-201904-0876LE |

## Section 2. The Work Under Consideration for Publication

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

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Are there any relevant conflicts of interest? Yes | No

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Dr. Fernández Pérez has nothing to disclose.

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Section 1. Identifying Information

1. Given Name (First Name)  
Joshua

2. Surname (Last Name)  
Solomon

3. Date  
08-August-2019

4. Are you the corresponding author?  
☑ No  

Corresponding Author’s Name  
Evans Fernandez Perez

5. Manuscript Title  
Reply to: Hypersensitivity Pneumonitis Mortality by Industry and Occupation

6. Manuscript Identifying Number (if you know it)  
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Dr. Solomon has nothing to disclose.

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)  
   Jeffrey

2. Surname (Last Name)  
   Swigris

3. Date  
   08-August-2019

4. Are you the corresponding author?  
   ✔ No

   Corresponding Author’s Name  
   Evans Fernandez Perez

5. Manuscript Title  
   Reply to: Hypersensitivity Pneumonitis Mortality by Industry and Occupation

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   ✔ No

Jeffrey Swigris
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Dr. Swigris has nothing to disclose.

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| 1. Given Name (First Name) | 2. Surname (Last Name) | 3. Date |
|---------------------------|------------------------|---------|
| Lisa                      | Maier                  | 08-August-2019 |

4. Are you the corresponding author? ☑️ No

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   Reply to: Hypersensitivity Pneumonitis Mortality by Industry and Occupation

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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
ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name) Michael
2. Surname (Last Name) Mohning
3. Date 08-August-2019
4. Are you the corresponding author? 
   [ ] Yes ☑ No
   Corresponding Author’s Name
   Evans Fernandez Perez
5. Manuscript Title
   Reply to: Hypersensitivity Pneumonitis Mortality by Industry and Occupation
6. Manuscript Identifying Number (if you know it)
   Blue-201904-0876LE

Section 2. The Work Under Consideration for Publication

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

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Are there any relevant conflicts of interest? 
   [ ] Yes ☑ No

Section 4. Intellectual Property -- Patents & Copyrights

Do you have any patents, whether planned, pending or issued, broadly relevant to the work? 
   [ ] Yes ☑ No
ICMJE Form for Disclosure of Potential Conflicts of Interest

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

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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. Mohning has nothing to disclose.

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)  
Pailin

2. Surname (Last Name)  
Ratanawatkul

3. Date  
08-August-2019

4. Are you the corresponding author?  
☐ Yes  ☑ No

Corresponding Author’s Name  
Evans Fernandez Perez

5. Manuscript Title  
Reply to: Hypersensitivity Pneumonitis Mortality by Industry and Occupation

6. Manuscript Identifying Number (if you know it)  
Blue-201904-0876LE

Section 2. The Work Under Consideration for Publication

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Are there any relevant conflicts of interest?  
☐ Yes  ☑ No

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Are there any relevant conflicts of interest?  
☐ Yes  ☑ No

Section 4. Intellectual Property -- Patents & Copyrights

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ICMJE Form for Disclosure of Potential Conflicts of Interest

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Dr. Ratanawatkul has nothing to disclose.

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3. Relevant financial activities outside the submitted work.

4. Intellectual Property.

5. Relationships not covered above.

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### Section 1. Identifying Information

| 1. Given Name (First Name) | 2. Surname (Last Name) | 3. Date |
|---------------------------|------------------------|---------|
| Rebecca                  | Keith                  | 08-August-2019 |

4. Are you the corresponding author?  
   - Yes  
   - No  
   ✔ No

5. Manuscript Title  
   Reply to: Hypersensitivity Pneumonitis Mortality by Industry and Occupation

6. Manuscript Identifying Number (if you know it)  
   Blue-201904-0876LE

### Section 2. The Work Under Consideration for Publication

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Are there any relevant conflicts of interest?  
   - Yes  
   - No  
   ✔ No

### Section 3. Relevant financial activities outside the submitted work.

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Are there any relevant conflicts of interest?  
   - Yes  
   - No  
   ✔ No

### Section 4. Intellectual Property -- Patents & Copyrights

Do you have any patents, whether planned, pending or issued, broadly relevant to the work?  
   - Yes  
   - No  
   ✔ No
ICMJE Form for Disclosure of Potential Conflicts of Interest

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Dr. Keith has nothing to disclose.

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name) Tristan
2. Surname (Last Name) Huie
3. Date 08-August-2019
4. Are you the corresponding author? ☑ No
5. Manuscript Title
   Reply to: Hypersensitivity Pneumonitis Mortality by Industry and Occupation

6. Manuscript Identifying Number (if you know it)
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Dr. Huie has nothing to disclose.

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)  Kevin
2. Surname (Last Name)  Brown
3. Date  31-May-2019
4. Are you the corresponding author?  Yes  ✔
   No

Corresponding Author’s Name  Evans Fernandez-Perez

5. Manuscript Title  Reply to: Hypersensitivity Pneumonitis Mortality by Industry and Occupation

6. Manuscript Identifying Number (if you know it)  Blue-201904-0876LE

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Are there any relevant conflicts of interest?  Yes  ✔
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Are there any relevant conflicts of interest?  Yes  ✔
   No

If yes, please fill out the appropriate information below.

| Name of Entity | Grant? | Personal Fees? | Non-Financial Support? | Other? | Comments |
|----------------|--------|----------------|------------------------|--------|----------|
| NHLBI          | ✔      |                |                        |        | Multiple lung fibrosis grants |
| Biogen         |        | ✔              |                        |        |          |
| Galecto        |        | ✔              |                        |        |          |
| Genoa          |        |                |                        | ✔      | Conversation under CDA only |
| MedImmune      |        | ✔              |                        |        |          |
| ProMetic       |        | ✔              |                        |        |          |
| Third Pole     |        | ✔              |                        |        |          |
| Galapagos      |        | ✔              |                        |        |          |
### ICMJE Form for Disclosure of Potential Conflicts of Interest

| Name of Entity                  | Grant? | Personal Fees? | Non-Financial Support? | Other? | Comments                  |
|--------------------------------|--------|----------------|------------------------|--------|---------------------------|
| Boehringer Ingelheim           |        | ✔              |                        |        |                           |
| Theravance                     |        | ✔              |                        |        |                           |
| Three Lakes Partners           |        | ✔              |                        |        |                           |
| Lifemax                        |        | ✔              |                        |        |                           |
| Pliant                         |        | ✔              |                        |        |                           |
| monARC Bionetworks             |        | ✔              |                        |        |                           |
| Blade Therapeutics             |        | ✔              |                        |        |                           |
| Open Source Imaging Consoritum (OSIC) | ☐        | ☐              | ☑ No financial relationship |        |                           |
| Veracyte                       |        | ✔              |                        |        |                           |
| Huitai Biomedicine             |        | ✔              |                        |        |                           |
| Lilly                          |        | ✔              |                        |        |                           |

### Section 4. Intellectual Property -- Patents & Copyrights

Do you have any patents, whether planned, pending or issued, broadly relevant to the work?  

- Yes  
- ☑ No

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Dr. Brown reports the following outside the submitted work: grants from NIH, and advisory board participation for the following: Biogen, Blade, Boehringer Ingelheim, Galapagos, Galecto, Genoa, Lifemax, MedImmune, monARC Bionetworks, OSIC (Open Source Imaging Consortium), Pliant, ProMetic, Third Pole, Theravance, Three Lakes Partners, Veracyte.

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