

ICMJE Form for Disclosure of Potential Conflicts of Interest

Instructions

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2. The work under consideration for publication.

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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) Alison	2. Surname (Last Name) Cahill	3. Date 09-October-2015
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Methodius Tuuli
5. Manuscript Title A Randomized Trial Comparing Skin Antiseptic Agents at Cesarean Delivery		
6. Manuscript Identifying Number (if you know it) 15-11048		

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

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Dr. Cahill has nothing to disclose.

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Section 1. Identifying Information

1. Given Name (First Name) Graham	2. Surname (Last Name) Colditz	3. Date 12-October-2015
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Methodius Tuuli
5. Manuscript Title A Randomized Trial Comparing Skin Antiseptic Agents at Cesarean Delivery		
6. Manuscript Identifying Number (if you know it) 15-11048		

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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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Dr. Colditz 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) Jingxia	2. Surname (Last Name) Liu	3. Date 09-October-2015
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Methodius Tuuli
5. Manuscript Title A Randomized Trial Comparing Skin Antiseptic Agents at Cesarean Delivery		
6. Manuscript Identifying Number (if you know it) 15-11048		

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Are there any relevant conflicts of interest? Yes No

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Section 4. Intellectual Property -- Patents & Copyrights

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Dr. Liu has nothing to disclose.

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Section 1. Identifying Information

1. Given Name (First Name) George	2. Surname (Last Name) Macones	3. Date 08-October-2015
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Methodius Tuuli
5. Manuscript Title A Randomized Trial Comparing Skin Antiseptic Agents at Cesarean Delivery		
6. Manuscript Identifying Number (if you know it) 15-11048		

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Section 1. Identifying Information

1. Given Name (First Name) Shannon	2. Surname (Last Name) Martin	3. Date 08-October-2015
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Methodius Tuuli
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Ms. Martin has nothing to disclose.

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Section 1. Identifying Information

1. Given Name (First Name) Anthony	2. Surname (Last Name) Odibo	3. Date 08-October-2015
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Methodius Tuuli
5. Manuscript Title A Randomized Trial Comparing Skin Antiseptic Agents at Cesarean Delivery		
6. Manuscript Identifying Number (if you know it) 15-11048		

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

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Dr. Odibo has nothing to disclose.

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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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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.

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4. Intellectual Property.

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

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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

ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name) Molly	2. Surname (Last Name) Stout	3. Date 09-October-2015
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Methodius Tuuli
5. Manuscript Title A Randomized Trial Comparing Skin Antiseptic Agents at Cesarean Delivery		
6. Manuscript Identifying Number (if you know it) 15-11048		

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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

Do you have any patents, whether planned, pending or issued, broadly relevant to the work? Yes No

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Section 1. Identifying Information

1. Given Name (First Name)
Methodius

2. Surname (Last Name)
Tuuli

3. Date
08-October-2015

4. Are you the corresponding author? Yes No

5. Manuscript Title
A Randomized Trial Comparing Skin Antiseptic Agents at Cesarean Delivery

6. Manuscript Identifying Number (if you know it)
15-11048

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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 Fees?	Non-Financial Support?	Other?	Comments
National Institutes of Health	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

Section 3. Relevant financial activities outside the submitted work.

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Are there any relevant conflicts of interest? Yes No

Section 4. Intellectual Property -- Patents & Copyrights

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Dr. Tuuli reports grant support from the National Institutes of Health during the conduct of the study.

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