Journal of Clinical Oncology Author Disclosure Declaration

Manuscript Title: _____________________________________________________________

Name: _____________________________ Manuscript No. JCO/_______________________

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1. Employment

Have you or an immediate family member been employed by any for-profit health care company currently or during the past 2 years?

☐ Yes, I have employment to disclose.
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  * - required field

☐ No, I have no employment to disclose.

2. Leadership

Have you or an immediate family member been compensated for a leadership role (such as officer or member of a board of directors) in any for-profit health care company, currently or during the past 2 years?

☐ Yes, I have a leadership role to disclose.
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  * - required field

☐ No, I do not have a leadership role to disclose.
3. **Stock or Other Ownership**

Have you or an immediate family member owned stock or held an ownership interest in any for-profit health care company (publicly traded or privately held), currently or during the past 2 years?

You do not need to disclose ownership in diversified funds that are not controlled by you or an immediate family member.

☐ Yes, I have stock or other ownership Interest to disclose.

Company*: _____________________________

Recipient*: ☐ You ☐ An Immediate Family Member

* - required field

☐ No, I do not have stock or other ownership Interest to disclose.

4. **Honoraria**

Have you or an immediate family member been paid honoraria directly by any for-profit health care company, currently or during the past 2 years?

You do not need to disclose honoraria for certified Continuing Education.

☐ Yes, I have honoraria to disclose.

Company*: _____________________________

Recipient*: ☐ You ☐ An Immediate Family Member

* - required field

☐ No, I do not have honoraria to disclose.

5. **Consulting or Advisory Role**

Have you or an immediate family member been paid for any consulting or advisory role by any for-profit health care company, currently or during the past 2 years?

You do not need to disclose an uncompensated consulting or advisory role.

☐ Yes, I have a consulting or advisory role to disclose.

Company*: _____________________________

Recipient*: ☐ You ☐ An Immediate Family Member ☐ Your Institution

* - required field

☐ No, I do not have a consulting or advisory role to disclose.

6. **Speakers’ Bureau**

Have you or an immediate family member been paid to participate in a speakers’ bureau for any for-profit health care company, currently or during the past 2 years?

☐ Yes, I have a speakers’ bureau to disclose.

Company*: _____________________________

Recipient*: ☐ You ☐ An Immediate Family Member

* - required field

☐ No, I do not have a speakers’ bureau to disclose.
7. Research Funding

Have you or an immediate family member conducted any research project funded, in whole or in part, by any for-profit health care company, currently or during the past 2 years?

Disclose research funding if: research payments are/were made directly from the for-profit health care company to the individual, if the individual’s salary is supported (in whole or part) through the research funding, if the individual is/was the national or overall principal investigator, if the individual has a role as a regulatory principal investigator, if the individual is a site principal investigator, or if the individual is a member of a steering committee of a study that does not have a principal investigator.

You do not need to disclose funding from NIH or a non-profit foundation.

☐ Yes, I have research funding to disclose.
Company*: _____________________________
Recipient*: ☐ You ☐ An Immediate Family Member ☐ Your Institution
* - required field

☐ No, I do not have research funding to disclose.

8. Patents, Royalties, Other Intellectual Property

Do you or an immediate family member hold patents, have patents pending, receive royalties, participate in royalty sharing agreements, or have other intellectual property interests from a discovery or technology relating to health or medicine, currently or during the past 2 years?

☐ Yes, I have a patent or intellectual property interest to disclose.
Company*: _____________________________
Recipient*: ☐ You ☐ An Immediate Family Member ☐ Your Institution
* - required field

☐ No, I do not have a patent or other intellectual property interest to disclose.

9. Expert Testimony

Have you or an immediate family member been paid to provide expert testimony on behalf of any for-profit health care company, currently or during the past 2 years?

☐ Yes, I have expert testimony to disclose.
Company*: _____________________________
Recipient*: ☐ You ☐ An Immediate Family Member
* - required field

☐ No, I do not have expert testimony to disclose.
10. Travel, Accommodations, Expenses

Have you or an immediate family member had travel, accommodations, or other expenses paid or reimbursed by any for-profit health care company, currently or during the past 2 years?

You do not need to disclose travel, accommodations, or expenses that were part of roles or activities you have already disclosed above.

☐ Yes, I have travel, accommodations, or expenses to disclose.

Company*: _____________________________

Recipient*: ☐ You ☐ An Immediate Family Member

* - required field

☐ No, I do not have travel, accommodations, or expenses to disclose.

11. Other Relationship

Have you or an immediate family member had another relationship, role, activity, or interest, currently or during the past 2 years, that could be perceived to influence your work or your professional activities? Disclosure is encouraged.

☐ Yes, I have another relationship to disclose.

Company*: _____________________________

Recipient*: ☐ You ☐ An Immediate Family Member

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☐ No, I do not have another relationship to disclose.

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Print Name: _____________________________

Signature: _____________________________ Date: ______________
Journal of Clinical Oncology Author Contribution Form

Manuscript Title: ________________________________________________________________

Name: ___________________________________________ Manuscript No. JCO/________________

Independent of the number of authors, contributions must be substantive to justify authorship. Each author must have participated in each of the following sections: 1) the conception and design of the study, collection and assembly of data, or data analysis and interpretation; and 2) writing the manuscript; and 3) final approval of the manuscript. Authors themselves, not JCO, are responsible for settling any disputes about authorship. Additionally, authors must be able to take public responsibility for the content. All other contributors, who do not meet sufficient criteria for authorship as described above, should instead be noted in the Acknowledgements section. Equally important, all individuals who participated in all of the proceeding activities must be listed as an author.

If someone other than the authors, such as a science writer or corporate employee, has participated in only writing the paper, this participation must be disclosed. If a multicenter group conducted the research, the group should identify a writing committee that accepts direct responsibility for the manuscript.

Every submission must include the Author Contribution information. As part of the online submission process, the corresponding author must enter this information on behalf of every author. We recommend, therefore, that each author complete the Author Contribution form and forward it to the corresponding author before the formal online submission.

Indicate this author’s contributions to the manuscript below:

SECTION 1 (ONE ROLE REQUIRED):

☐ Conception and design
☐ Collection and assembly of data
☐ Data analysis and interpretation

SECTION 2 (REQUIRED):

☐ Manuscript writing

SECTION 3 (REQUIRED):

☐ Final approval of manuscript

ADDITIONAL INFORMATION ON ROLES NOT JUSTIFYING AUTHORSHIP (NOT REQUIRED):

☐ Financial support
☐ Administrative support
☐ Provision of study material or patients

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Print Name: ________________________________

Signature: ________________________________ Date:________________

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Definitions

For-profit health care Company: means a business that develops, produces, markets or distributes drugs, devices, services or therapies used to diagnose, treat, monitor, manage, or alleviate health conditions.

Immediate family member: means a spouse or dependent child.

Honoraria: means money paid to recognize participation in an activity such as a speech or seminar presentation. If you directed your honoraria to another individual or to a charity, please note.

Consulting or advisory role: means the provision of any services, including advisory boards, scientific review, or editorial services. If you participated in an unpaid capacity but received travel expenses or reimbursement, please disclose either in this category or the “Travel” category.

Speakers’ bureau: means a compensated role as a presenter for which any of the following criteria are met: (a) a for-profit health care company has a contractual right to dictate or control the content of the presentation or talk; (b) a company creates the slides or presentation material and has final approval of the content and edits; or (c) the presenter is expected to act as a company’s agent or spokesperson for the primary purpose of disseminating company or product information. ASCO recognizes that some activities called “speakers’ bureaus” may not meet these criteria and, conversely, that activities may meet these criteria and not be termed “speakers’ bureaus.” ASCO will rely on the judgment and integrity of disclosing individuals to determine whether an activity constitutes a speakers’ bureau under this Policy. This definition of “speakers’ bureau” does not extend to employees of a for-profit health care company who make presentations as part of their employment.

A Company may review a speaker’s slides strictly for regulatory or compliance purposes. So long as the speaker has control and approval rights over scientific content and is not acting as the Company’s agent or spokesperson, the activity will not fall within the definition of a speaker’s bureau.

Research funding: Disclose research funding if: research payments are/were made directly from the for-profit health care company to the individual, if the individual’s salary is supported (in whole or part) through the research funding, if the individual is/was the national or overall principal investigator, if the individual has a role as a regulatory principal investigator, if the individual is a site principal investigator, or if the individual is a member of a steering committee of a study that does not have a principal investigator.

You do not need to disclose funding from NIH, other government agency, or a non-profit foundation.