Date:
 January 4, 2023

 Your Name:
 Benjamin R. Massey, MD

 Manuscript Title:
 Procalcitonin levels and antibiotic use associations with COVID-19 disease severity in hospitalized adults and the potential for an increase in antibiotic resistance: A Cross-Sectional Clinical and Public Health analysis

 Manuscript number (if known):
 JPHE-22-77-R

In the interest of transparency, we ask you to disclose all relationships/activities/interests listed below that are related to the content of your manuscript. "Related" means any relation with for-profit or not-for-profit third parties whose interests may be affected by the content of the manuscript. Disclosure represents a commitment to transparency and does not necessarily indicate a bias. If you are in doubt about whether to list a relationship/activity/interest, it is preferable that you do so.

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		Name all entities with whom you have this relationship or indicate none (add rows as needed)	Specifications/Comments (e.g., if payments were made to you or to your institution)
		Time frame: Since the initial	planning of the work
1	All support for the present	_XNone	
	manuscript (e.g., funding,		
	provision of study materials,		
	medical writing, article		
	processing charges, etc.)		
	No time limit for this item.		
		Time frame: past	36 months
2	Grants or contracts from	X_None	
	any entity (if not indicated		
	in item #1 above).		
3	Royalties or licenses	_XNone	
4	Consulting fees	_XNone	

5	1	XNone	
	lectures, presentations,		
	speakers bureaus,		
	manuscript writing or		
6	educational events	V. Nore	
6	Payment for expert testimony	XNone	
	testimony		
7	Support for attending	X None	
<i>'</i>	meetings and/or travel		
8	Patents planned, issued or	_XNone	
	pending		
9	Participation on a Data	XNone	
	Safety Monitoring Board or		
	Advisory Board		
10	Leadership or fiduciary role	XNone	
	in other board, society,		
	committee or advocacy group, paid or unpaid		
11	Stock or stock options	X None	
11	Stock of Stock options		
12	Receipt of equipment,	X None	
	materials, drugs, medical		
	writing, gifts or other		
	services		
13	Other financial or non-	XNone	
	financial interests		

Please place an "X" next to the following statement to indicate your agreement:

Date:	January 4, 2023	
Your Name:	Sophia Stromberg	
Manuscript Title:_	Procalcitonin levels and antibiotic use	associations with COVID-19 disease severity in
hospital	lized adults and the potential for an incre	ease in antibiotic resistance: A Cross-Sectional
Clinical and Public Health analysis		
Manuscript numb	per (if known):_JPHE-22-77-R	

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		Time frame: past	36 months
2	Grants or contracts from any entity (if not indicated in item #1 above).	X_None	
3	Royalties or licenses	_XNone	
4	Consulting fees	_XNone	

5	Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or educational events Payment for expert testimony	XNone	
7	Support for attending meetings and/or travel	XNone	
8	Patents planned, issued or	X None	
0	pending		
	perioding		
9	Participation on a Data Safety Monitoring Board or Advisory Board	XNone	
10	Leadership or fiduciary role	X None	
	in other board, society,		
	committee or advocacy group, paid or unpaid		
11	Stock or stock options	XNone	
12	Receipt of equipment,	_XNone	
	materials, drugs, medical writing, gifts or other services		
13	Other financial or non-	XNone	
	financial interests		

Please place an "X" next to the following statement to indicate your agreement:

form.

Date:	January 4, 2023	
Your Name:	Kim McFann, PhD	
Manuscript Title:_	Procalcitonin levels and antibiotic use associations with COVID-19 disease severity	in
hospitali	zed adults and the potential for an increase in antibiotic resistance: A Cross-Sectiona	ıl
Clinical and Public Health analysis		
Manuscript numb	er (if known):_JPHE-22-77-R	

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3	Royalties or licenses	_XNone	
4	Consulting fees	_XNone	

5	Payment or honoraria for	XNone	
	lectures, presentations,		
	speakers bureaus,		
	manuscript writing or		
6	educational events Payment for expert	V. Nana	
0	testimony	XNone	
	testimony		
7	Support for attending	X None	
,	meetings and/or travel		
8	Patents planned, issued or	_XNone	
	pending		
9	Participation on a Data	XNone	
	Safety Monitoring Board or		
10	Advisory Board	Y N	
10	Leadership or fiduciary role in other board, society,	XNone	
	committee or advocacy		
	group, paid or unpaid		
11	Stock or stock options	X None	
12	Receipt of equipment,	_XNone	
	materials, drugs, medical		
	writing, gifts or other		
12	services	V. Nere	
13	Other financial or non- financial interests	XNone	
	mancial interests		

Please place an "X" next to the following statement to indicate your agreement:

Date: January, 11, 2023____

Your Name: Stephanie M. LaVergne__

Manuscript Title: Procalcitonin levels and antibiotic use associations with COVID-19 disease severity in hospitalized adults and the potential for an increase in antibiotic resistance: A Cross-Sectional Clinical and Public Health analysis______

Manuscript number (if known): JPHE 22-77____

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1	All support for the present	X_None	
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	No time limit for this item.		
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2	Grants or contracts from	X_None	
	any entity (if not indicated		
	in item #1 above).		
3	Royalties or licenses	X_None	
4	Consulting fees	X_None	

5	Payment or honoraria for lectures, presentations,	X_None	
	speakers bureaus, manuscript writing or educational events		
6	Payment for expert testimony	_XNone	
7	Support for attending meetings and/or travel	_XNone	
8	Patents planned, issued or pending	XNone	
9	Participation on a Data	X None	
	Safety Monitoring Board or		
	Advisory Board		
10	Leadership or fiduciary role	X_None	
	in other board, society,		
	committee or advocacy group, paid or unpaid		
11	Stock or stock options	X None	
12	Receipt of equipment,	XNone	
	materials, drugs, medical		
	writing, gifts or other services		
13	Other financial or non-	X None	
10	financial interests		

Please place an "X" next to the following statement to indicate your agreement:

Date: January, 11, 2023____

Your Name: Bridget A. Baxter_

Manuscript Title: Procalcitonin levels and antibiotic use associations with COVID-19 disease severity in hospitalized adults and the potential for an increase in antibiotic resistance: A Cross-Sectional Clinical and Public Health analysis______

Manuscript number (if known): JPHE 22-77_____

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		Time frame: past	36 months
2	Grants or contracts from any entity (if not indicated in item #1 above).	X_None	
3	Royalties or licenses	X_None	
4	Consulting fees	X_None	

5	Payment or honoraria for lectures, presentations,	X_None	
	speakers bureaus, manuscript writing or educational events		
6	Payment for expert	_XNone	
	testimony		
-			
7	Support for attending meetings and/or travel	_XNone	
8	Patents planned, issued or	XNone	
	pending		
-			
9	Participation on a Data	_XNone	
	Safety Monitoring Board or Advisory Board		
10	Leadership or fiduciary role	X None	
10	in other board, society,		
	committee or advocacy		
	group, paid or unpaid		
11	Stock or stock options	XNone	
12	Receipt of equipment,	XNone	
	materials, drugs, medical writing, gifts or other		
	services		
13	Other financial or non-	XNone	
	financial interests		

Please place an "X" next to the following statement to indicate your agreement:

Date: January, 11, 2023____

Your Name: Linda Zier___

Manuscript Title: Procalcitonin levels and antibiotic use associations with COVID-19 disease severity in hospitalized adults and the potential for an increase in antibiotic resistance: A Cross-Sectional Clinical and Public Health analysis______

Manuscript number (if known): JPHE 22-77_____

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3	Royalties or licenses	X_None	
4	Consulting fees	X_None	

5	Payment or honoraria for lectures, presentations,	X_None	
	speakers bureaus, manuscript writing or educational events		
6	Payment for expert testimony	_XNone	
7	7 Support for attending meetings and/or travel	_XNone	
8	Patents planned, issued or pending	XNone	
9	Participation on a Data	X None	
	Safety Monitoring Board or		
	Advisory Board		
10	Leadership or fiduciary role	X_None	
	in other board, society,		
	committee or advocacy group, paid or unpaid		
11	Stock or stock options	X None	
12	,	XNone	
	materials, drugs, medical		
	writing, gifts or other services		
13	Other financial or non-	X None	
10	financial interests		

Please place an "X" next to the following statement to indicate your agreement:

Date: January, 11, 2023_____ Your Name: Elizabeth P. Ryan_____

Manuscript Title: Procalcitonin levels and antibiotic use associations with COVID-19 disease severity in hospitalized adults and the potential for an increase in antibiotic resistance: A Cross-Sectional Clinical and Public Health analysis______

Manuscript number (if known): JPHE 22-77_____

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3	Royalties or licenses	X_None		
4	Consulting fees	X_None		
	-			

5	Payment or honoraria for lectures, presentations,	X_None	
	speakers bureaus, manuscript writing or		
	educational events		
6	Payment for expert	_XNone	
	testimony		
7	Support for attending meetings and/or travel	_XNone	
8	Patents planned, issued or	XNone	
	pending		
9	Participation on a Data	_XNone	
	Safety Monitoring Board or		
	Advisory Board		
10	Leadership or fiduciary role	X_None	
	in other board, society,		
	committee or advocacy group, paid or unpaid		
11	Stock or stock options	X None	
12	Receipt of equipment, materials, drugs, medical	XNone	
	writing, gifts or other		
10	services		
13	Other financial or non-	XNone	
	financial interests		

Please place an "X" next to the following statement to indicate your agreement:

Date: January, 11, 2023___

Your Name: Julie Dunn___

Manuscript Title: Procalcitonin levels and antibiotic use associations with COVID-19 disease severity in hospitalized adults and the potential for an increase in antibiotic resistance: A Cross-Sectional Clinical and Public Health analysis______

Manuscript number (if known): JPHE 22-77______

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6	Payment for expert testimony	_XNone	
7	7 Support for attending meetings and/or travel	_XNone	
8	Patents planned, issued or pending	XNone	
9	Participation on a Data	X None	
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12	,	XNone	
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13	Other financial or non-	X None	
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