Date:	15, August, 2022					
Your Name:	Kento Takeshima					
Manuscript Title:_	Prognostic value of B-type natriur	etic peptide for nursing- and healthcare-associated pneumonia				
and aspiration pn	eumonia in comparison with procald	itonin and A-DROP score: a prospective cohort study_				
Manuscript number (if known): ATM-22-4151						

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.

The following questions apply to the author's relationships/activities/interests as they relate to the <u>current</u> <u>manuscript only</u>.

The author's relationships/activities/interests should be <u>defined broadly</u>. For example, if your manuscript pertains to the epidemiology of hypertension, you should declare all relationships with manufacturers of antihypertensive medication, even if that medication is not mentioned in the manuscript.

		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)
1	All support for the present manuscript (e.g., funding, provision of study materials, medical writing, article processing charges, etc.) No time limit for this item.	None None	planning of the work
		Time frame: past	36 months
2	Grants or contracts from any entity (if not indicated in item #1 above).	None	
3	Royalties or licenses	None	
4	Consulting fees	None	

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

None			

Date:	15, August, 2022
Your Name:	Daisuke Usuda
Manuscript Title:_	Prognostic value of B-type natriuretic peptide for nursing- and healthcare-associated pneumoni
and aspiration pne	eumonia in comparison with procalcitonin and A-DROP score: a prospective cohort study_
Manuscript numb	er (if known): ATM-22-4151

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.

The following questions apply to the author's relationships/activities/interests as they relate to the <u>current</u> <u>manuscript only</u>.

The author's relationships/activities/interests should be <u>defined broadly</u>. For example, if your manuscript pertains to the epidemiology of hypertension, you should declare all relationships with manufacturers of antihypertensive medication, even if that medication is not mentioned in the manuscript.

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

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

None			

Date:	16, August, 2022	
Your Name:	Toshihide Izumida	
Manuscript Title:_	Prognostic value of B-type natriureti	peptide for nursing- and healthcare-associated pneumonia
and aspiration pne	umonia in comparison with procalcito	nin and A-DROP score: a prospective cohort study_
Manuscript number	r (if known): ATM-22-4151	

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.

The following questions apply to the author's relationships/activities/interests as they relate to the <u>current</u> <u>manuscript only</u>.

The author's relationships/activities/interests should be <u>defined broadly</u>. For example, if your manuscript pertains to the epidemiology of hypertension, you should declare all relationships with manufacturers of antihypertensive medication, even if that medication is not mentioned in the manuscript.

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

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

None			

Date:	16, August, 2022
Your Name:	Ryusyo Sangen
Manuscript Title:_	Prognostic value of B-type natriuretic peptide for nursing- and healthcare-associated pneumonia
and aspiration pno	eumonia in comparison with procalcitonin and A-DROP score: a prospective cohort study_
Manuscript numb	er (if known): ATM-22-4151

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.

The following questions apply to the author's relationships/activities/interests as they relate to the <u>current</u> <u>manuscript only</u>.

The author's relationships/activities/interests should be <u>defined broadly</u>. For example, if your manuscript pertains to the epidemiology of hypertension, you should declare all relationships with manufacturers of antihypertensive medication, even if that medication is not mentioned in the manuscript.

		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	None	
	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	None	
	any entity (if not indicated		
	in item #1 above).		
3	Royalties or licenses	None	
4	Consulting fees	None	

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

None			

Date:	16, August, 2022
Your Name:	Toshihiro Higashikawa
Manuscript Title:_	Prognostic value of B-type natriuretic peptide for nursing- and healthcare-associated pneumonia
and aspiration pne	umonia in comparison with procalcitonin and A-DROP score: a prospective cohort study
Manuscript number	er (if known): ATM-22-4151

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.

The following questions apply to the author's relationships/activities/interests as they relate to the <u>current</u> <u>manuscript only</u>.

The author's relationships/activities/interests should be <u>defined broadly</u>. For example, if your manuscript pertains to the epidemiology of hypertension, you should declare all relationships with manufacturers of antihypertensive medication, even if that medication is not mentioned in the manuscript.

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

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

None			

Date:	16, August, 2022	
Your Name:	Yuji Kasamaki	
Manuscript Title:_	Prognostic value of B-type natriu	retic peptide for nursing- and healthcare-associated pneumonia
and aspiration pne	umonia in comparison with proca	citonin and A-DROP score: a prospective cohort study_
Manuscript number	er (if known): ATM-22-4151	

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.

The following questions apply to the author's relationships/activities/interests as they relate to the <u>current</u> <u>manuscript only</u>.

The author's relationships/activities/interests should be <u>defined broadly</u>. For example, if your manuscript pertains to the epidemiology of hypertension, you should declare all relationships with manufacturers of antihypertensive medication, even if that medication is not mentioned in the manuscript.

		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)
1	All support for the present manuscript (e.g., funding, provision of study materials, medical writing, article processing charges, etc.) No time limit for this item.	None None	planning of the work
		Time frame: past	36 months
2	Grants or contracts from any entity (if not indicated in item #1 above).	None	
3	Royalties or licenses	None	
4	Consulting fees	None	

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

None			