ICMJE DISCLOSURE FORM

Date:	Decem	ber 24 th , 2023
Your N	Name:	Isobel Galloway
Manu	script Title:	Withdrawal and Withholding of Life Sustaining Treatment (WWLST); an under recognised factor in the
morbi	dity or mor	tality of periviable infants? – A narrative review
Manu	script numl	per (if known): TP-23-468

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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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.

In item #1 below, report all support for the work reported in this manuscript without time limit. For all other items, the time frame for disclosure is the past 36 months.

		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 manuscript (e.g., funding, provision of study materials, medical writing, article processing charges, etc.) No time limit for this item.	XNone	
		Time frame: past	36 months
2	Grants or contracts from any entity (if not indicated in item #1 above).	XNone	
3	Royalties or licenses	XNone	
4	Consulting fees	XNone	

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5	Payment or honoraria for	X None		
3	lectures, presentations,			
	speakers bureaus,			_
	manuscript writing or			
	educational events			
6	Payment for expert	XNone		
	testimony			
7	Support for attending	X None		
′	meetings and/or travel	None		
	,			
8	Patents planned, issued or	XNone		
	pending			
9	Participation on a Data	XNone		
	Safety Monitoring Board or			
10	Advisory Board	V N		
10	Leadership or fiduciary role in other board, society,	XNone		
	committee or advocacy			
	group, paid or unpaid			
11	Stock or stock options	XNone		
12	Receipt of equipment,	X_None		
	materials, drugs, medical			
	writing, gifts or other services			
13	Other financial or non-	XNone		
	financial interests			
Plea	ase summarize the above co	nflict of interest in the foll	owing box:	
N	lone.			

None.

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

__X_ I certify that I have answered every question and have not altered the wording of any of the questions on this form.

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Date: D	ecember 24 th , 2023
Your Name:	: Charles Roehr
Manuscript	Title: Withdrawal and Withholding of Life Sustaining Treatment (WWLST); an under recognised factor in the
morbidity o	or mortality of periviable infants? – A narrative review
Manuscript	number (if known): TP-23-468

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		Time frame: past	36 months
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3	Royalties or licenses	XNone	
4	Consulting fees	XNone	

				_
5	Payment or honoraria for	X None		
3	lectures, presentations,			
	speakers bureaus,			_
	manuscript writing or			
	educational events			
6	Payment for expert	XNone		
	testimony			
7	Support for attending	X None		
′	meetings and/or travel	None		
	,			
8	Patents planned, issued or	XNone		
	pending			
9	Participation on a Data	XNone		
	Safety Monitoring Board or			
10	Advisory Board	V N		
10	Leadership or fiduciary role in other board, society,	XNone		
	committee or advocacy			
	group, paid or unpaid			
11	Stock or stock options	XNone		
12	Receipt of equipment,	X_None		
	materials, drugs, medical			
	writing, gifts or other services			
13	Other financial or non-	XNone		
	financial interests			
Plea	ase summarize the above co	nflict of interest in the foll	owing box:	
N	lone.			

None.

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

__X_ I certify that I have answered every question and have not altered the wording of any of the questions on this form.

ICMJE DISCLOSURE FORM

Date: 30 Januar	y 2024
Your Name:	Kenneth Tan
Manuscript Title:	Withdrawal and Withholding of Life Sustaining Treatment (WWLST); an under recognised factor in
the morbidity or i	mortality of periviable infants? – A narrative review
Manuscript numb	per (if known): TP-23-468

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1	All support for the present manuscript (e.g., funding,	X_None	
	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 any entity (if not indicated in item #1 above).	X_None	
3	Royalties or licenses	X None	
4	Consulting fees	X_None	

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_			
5	Payment or honoraria for	X_None	
	lectures, presentations,		
	speakers bureaus,		
	manuscript writing or		
	educational events		
6	Payment for expert	X_None	
	testimony		
7	Support for attending	X_None	
	meetings and/or travel		
8	Patents planned, issued or	X_None	
	pending		
9	Participation on a Data	X_None	
	Safety Monitoring Board or		
	Advisory Board		
10	Leadership or fiduciary role		Unpaid Editorial Board member of Translational
	in other board, society,		Pediatrics from January 2023 to December 2024
	committee or advocacy		
	group, paid or unpaid		
11	Stock or stock options	X_None	
	·		
12	Receipt of equipment,	X_None	
	materials, drugs, medical		
	writing, gifts or other		
	services		
13	Other financial or non-	X_None	
	financial interests		

Please summarize the above conflict of interest in the following box:

Kenneth Tan served as an unpaid editorial board member of Translational Pediatrics from Jacobsen 2024.	anuary 2023 to

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

_X I certify that I have answered every question and have not altered the wording of any of the questions on this form.