

ICMJE DISCLOSURE FORM

Date: 02/03/23

Your Name: Anna Kitta

Manuscript Title: On Dying Alone in Prison and the Social Responsibility of Medicine: A Pilot Interview Study with Physicians Caring for Incarcerated Patients

Manuscript number (if known): _____

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 manuscript (e.g., funding, provision of study materials, medical writing, article processing charges, etc.) No time limit for this item.	<input checked="" type="checkbox"/> None	
Time frame: past 36 months			
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3	Royalties or licenses	<input checked="" type="checkbox"/> None	
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11	Stock or stock options	<input checked="" type="checkbox"/> None	
12	Receipt of equipment, materials, drugs, medical writing, gifts or other services	<input checked="" type="checkbox"/> None	
13	Other financial or non-financial interests	<input checked="" type="checkbox"/> None	

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

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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: 02/03/23

Your Name: Andreas Wippel

Manuscript Title: On Dying Alone in Prison and the Social Responsibility of Medicine: A Pilot Interview Study with Physicians Caring for Incarcerated Patients

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Date: 02/03/23

Your Name: Franziska Ecker

Manuscript Title: On Dying Alone in Prison and the Social Responsibility of Medicine: A Pilot Interview Study with Physicians Caring for Incarcerated Patients

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ICMJE DISCLOSURE FORM

Date: 02/03/23

Your Name: Lea Kum

Manuscript Title: On Dying Alone in Prison and the Social Responsibility of Medicine: A Pilot Interview Study with Physicians Caring for Incarcerated Patients

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ICMJJE DISCLOSURE FORM

Date: 25.01.2023

Your Name: Elisabeth L Zeilinger

Manuscript Title: On Dying Alone in Prison and the Social Responsibility of Medicine: A Pilot Interview Study with Physicians Caring for Incarcerated Patients

Manuscript number (if known): _____

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None

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ICMJE DISCLOSURE FORM

Date: 02/03/23

Your Name: Jessica Stöger

Manuscript Title: On Dying Alone in Prison and the Social Responsibility of Medicine: A Pilot Interview Study with Physicians Caring for Incarcerated Patients

Manuscript number (if known): _____

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ICMJE DISCLOSURE FORM

Date: 12/03/23

Your Name: Dagmar Vohla

Manuscript Title: On Dying Alone in Prison and the Social Responsibility of Medicine: A Pilot Interview Study with Physicians Caring for Incarcerated Patients

Manuscript number (if known): _____

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ICMJE DISCLOSURE FORM

Date: 12/03/23

Your Name: Matthias Unseld

Manuscript Title: On Dying Alone in Prison and the Social Responsibility of Medicine: A Pilot Interview Study with Physicians Caring for Incarcerated Patients

Manuscript number (if known): _____

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ICMJE DISCLOSURE FORM

Date: 02/03/23

Your Name: Eva Katharina

Masel _____

Manuscript Title: On Dying Alone in Prison and the Social Responsibility of Medicine: A Pilot Interview Study with Physicians Caring for Incarcerated Patients

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