

ICMJE Form for Disclosure of Potential Conflicts of Interest

Instructions

The purpose of this form is to provide readers of your manuscript with information about your other interests that could influence how they receive and understand your work. The form is designed to be completed electronically and stored electronically. It contains programming that allows appropriate data display. Each author should submit a separate form and is responsible for the accuracy and completeness of the submitted information. The form is in six parts.

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2. The work under consideration for publication.

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4. Intellectual Property.

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Royalties: Funds are coming in to you or your institution due to your patent

ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)

Sharlene

2. Surname (Last Name)

Ho

3. Date

24-June-2020

4. Are you the corresponding author?

☒ Yes ☐ No

5. Manuscript Title

Outcomes of patients requiring prolonged mechanical ventilation in Singapore

6. Manuscript Identifying Number (if you know it)

JECCM-20-61-R1

Section 2. The Work Under Consideration for Publication

Did you or your institution **at any time** receive payment or services from a third party (government, commercial, private foundation, etc.) for any aspect of the submitted work (including but not limited to grants, data monitoring board, study design, manuscript preparation, statistical analysis, etc.)?

Are there any relevant conflicts of interest? ☐ Yes ☒ No

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Dr. Ho has nothing to disclose.

Evaluation and Feedback

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Section 1.

Identifying Information

1. Given Name (First Name)

Chien Joo

2. Surname (Last Name)

Lim

3. Date

19-June-2020

4. Are you the corresponding author?

☐ Yes

☒ No

Corresponding Author's Name

Sharlene Ho

5. Manuscript Title

Outcomes of patients requiring prolonged mechanical ventilation in Singapore

6. Manuscript Identifying Number (if you know it)

Section 2.

The Work Under Consideration for Publication

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Are there any relevant conflicts of interest?

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☒ No

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Section 4.

Intellectual Property -- Patents & Copyrights

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☐ Yes

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Dr. Lim has nothing to disclose.

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Section 1.

Identifying Information

1. Given Name (First Name)

Ser Hon

2. Surname (Last Name)

Puah

3. Date

24-June-2020

4. Are you the corresponding author?

☐ Yes

☒ No

Corresponding Author's Name

Sharlene Ho

5. Manuscript Title

Outcomes of patients requiring prolonged mechanical ventilation in Singapore

6. Manuscript Identifying Number (if you know it)

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Sennen Jin Wen

2. Surname (Last Name)

Lew

3. Date

24-June-2020

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☐ Yes

☒ No

Corresponding Author's Name

Sharlene Ho

5. Manuscript Title

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