

Instructions

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1. Identifying information.

2. The work under consideration for publication.

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Wilfong 1



Section 1.	Identifying Inform	ation				
1. Given Name (Fil	rst Name)	2. Surname (La	st Name)		3. Date 17-September-2020	
4. Are you the cor	responding author?	✓ Yes	No			
5. Manuscript Title Severity of Illnes	e s Scores at Presentation	Predict ICU Ad	mission and Mortal	ity in COVID-	19	
6. Manuscript Ider JECCM-20-92-R1	ntifying Number (if you kn	ow it)				
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Section 2.	The Work Under Co	nsideration f	or Publication			
any aspect of the s statistical analysis,	ubmitted work (including	but not limited to			nt, commercial, private foundation, etc.) and design, manuscript preparation,	for
If yes, please fill o		rmation below.	If you have more t	han one entit	ry press the "ADD" button to add a ro	w.
Name of Institut	ion/Company	Grant? Pers		Other?	Comments	
National Heart Lung	and Blood Institute	✓			T32HL087738	
National Center for A Sciences	dvancing Translational	✓			UL1TR000445	
Section 3.	Relevant financial	activities outs	ide the submitte	ed work.		
of compensation clicking the "Add) with entities as descri +" box. You should rep	bed in the instrue Fort relationship	ictions. Use one lin s that were presen	e for each en	ial relationships (regardless of amour tity; add as many lines as you need b 36 months prior to publication.	
Are there any rel	evant conflicts of intere	st? Yes	√ No			
Section 4.	Intellectual Proper	ty Patents &	Copyrights			
Do you have any	patents, whether plans	ned, pending or	issued, broadly rel	evant to the	work? ☐ Yes 🗸 No	

Wilfong 2



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	elationships or activities that readers could perceive to have influenced, or that give the appearance of ncing, what you wrote in the submitted work?
Yes, the follow	wing relationships/conditions/circumstances are present (explain below):
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	nuscript acceptance, journals will ask authors to confirm and, if necessary, update their disclosure statements rnals may ask authors to disclose further information about reported relationships.
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	rts grants from National Heart Lung and Blood Institute, grants from National Center for Advancing ences, during the conduct of the study; .

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If yes, please fill	out the appropriate info	ormation below. If y	1	one entity press the "ADD" bu	itton to add a row.
Excess rows can	be removed by pressin	g the "X" button.			
Name of Institut	tion/Company	Grant? Persona Fees?	I Non-Financial Support?	Other? Comments	
National Cancer Insti	itute	✓		P30-CA086485	
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of compensation clicking the "Add Are there any rel	n) with entities as descr	ibed in the instruction port relationships the est? Yes	ons. Use one line fo	ove financial relationships (rega or each entity; add as many line uring the 36 months prior to	es as you need by
Name of Entity		Grant? Persona	Non-Financial Support?	Other? Comments	
Novartis		✓		Not currently active	
Xcovery		✓		Not currently active	
Foundation Medicine	e			Consultant/Advisory bo	oard member



Name of Entity	Grant?	Personal 7	_	Other?	Comments	
		Fees?	Support?			
Pfizer		✓			Consultant/Advisory board member	
Novartis		✓			Consultant/Advisory board member	
Astra-Zeneca		✓			Consultant/Advisory board member	
Genoptix		✓			Consultant/Advisory board member	
Sequenom		✓			Consultant/Advisory board member	
Ariad		\checkmark			Consultant/Advisory board member	
Takeda		\checkmark			Consultant/Advisory board member	
Blueprints Medicine		\checkmark			Consultant/Advisory board member	
Cepheid		✓			Consultant/Advisory board member	
Achilles		\checkmark			Consultant/Advisory board member	
Genentech		✓			Consultant/Advisory board member	
Eli Lilly		✓			Consultant/Advisory board member	
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Do you have any patents, whether plann Section 5. Relationships not o	ed, pend	ing or issue		int to the	work? ☐ Yes ✔ No	
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Section 6.

Disclosure Statement

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Dr. Lovly reports grants from National Cancer Institute, during the conduct of the study; grants from Novartis, grants from Xcovery, personal fees from Foundation Medicine, personal fees from Pfizer, personal fees from Novartis, personal fees from Astra-Zeneca, personal fees from Genoptix, personal fees from Sequenom, personal fees from Ariad, personal fees from Takeda, personal fees from Blueprints Medicine, personal fees from Cepheid, personal fees from Achilles, personal fees from Genentech, personal fees from Eli Lilly, outside the submitted work;

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Gillaspie 1



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4. Are you the cor	responding author?	Yes	✓ No	Corresponding Author's Na Erin Wilfong	me
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of compensation clicking the "Add) with entities as descri	ibed in the port relatio	instructions. U	se one line for each entity; a	ationships (regardless of amount add as many lines as you need by nonths prior to publication.
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Do you have any	patents, whether plan	ned, pendi	ng or issued, b	roadly relevant to the work?	? Yes Vo

Gillaspie 2



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Dr. Gillaspie has nothing to disclose.

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patent

Huang 1



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1. Given Name (First Name) Li-Ching	2. Surname (Last Name) Huang	3. Date 17-September-2020
4. Are you the corresponding author?	☐ Yes ✓ No	Corresponding Author's Name Erin Wilfong
5. Manuscript Title Severity of Illness Scores at Presentation	n Predict ICU Admission ar	nd Mortality in COVID-19
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Huang 2



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This section asks about your financial relationships with entities in the bio-medical arena that could be perceived to influence, or that give the appearance of potentially influencing, what you wrote in the submitted work. You should disclose interactions with ANY entity that could be considered broadly relevant to the work. For example, if your article is about testing an epidermal growth factor receptor (EGFR) antagonist in lung cancer, you should report all associations with entities pursuing diagnostic or therapeutic strategies in cancer in general, not just in the area of EGFR or lung cancer.

Report all sources of revenue paid (or promised to be paid) directly to you or your institution on your behalf over the 36 months prior to submission of the work. This should include all monies from sources with relevance to the submitted work, not just monies from the entity that sponsored the research. Please note that your interactions with the work's sponsor that are outside the submitted work should also be listed here. If there is any question, it is usually better to disclose a relationship than not to do so.

For grants you have received for work outside the submitted work, you should disclose support ONLY from entities that could be perceived to be affected financially by the published work, such as drug companies, or foundations supported by entities that could be perceived to have a financial stake in the outcome. Public funding sources, such as government agencies, charitable foundations or academic institutions, need not be disclosed. For example, if a government agency sponsored a study in which you have been involved and drugs were provided by a pharmaceutical company, you need only list the pharmaceutical company.

4. Intellectual Property.

This section asks about patents and copyrights, whether pending, issued, licensed and/or receiving royalties.

5. Relationships not covered above.

Use this section to report other relationships or activities that readers could perceive to have influenced, or that give the appearance of potentially influencing, what you wrote in the submitted work.

Definitions.

Entity: government agency, foundation, commercial sponsor, academic institution, etc.

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Personal Fees: Monies paid to you for services rendered, generally honoraria, royalties, or fees for consulting, lectures, speakers bureaus, expert testimony, employment, or other affiliations

Non-Financial Support: Examples include drugs/equipment supplied by the entity, travel paid by the entity, writing assistance, administrative support, etc.

Other: Anything not covered under the previous three boxes

Pending: The patent has been filed but not issued **Issued:** The patent has been issued by the agency

Licensed: The patent has been licensed to an entity, whether earning royalties or not

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

Casey 1



Section 1.	Identifying Inform	nation		
1. Given Name (Fi Jonathan	rst Name)	2. Surname (Last Name Casey	·)	3. Date 17-September-2020
4. Are you the cor	responding author?	☐ Yes ✓ No	Corresponding Auth Erin Wilfong	nor's Name
5. Manuscript Title Severity of Illnes		n Predict ICU Admissior	n and Mortality in COVII	D-19
6. Manuscript Idei JECCM-20-92-R1	ntifying Number (if you kr	now it)		
Section 2.	The Work Under C	onsideration for Pul	olication	
any aspect of the s statistical analysis, Are there any rel	ubmitted work (including etc.)? evant conflicts of intere	g but not limited to grants	, data monitoring board, s	nent, commercial, private foundation, etc.) for study design, manuscript preparation, tity press the "ADD" button to add a row.
Excess rows can	be removed by pressin			
Name of Institut	ion/Company	Grant? Personal Fees?	Non-Financial Other Support?	Comments
National Heart Lung	and Blood Institute	✓		K12HL133117, 2T32HL087738-12
Section 3.	Relevant financial	activities outside th	e submitted work.	
of compensation clicking the "Ado) with entities as descri	ibed in the instructions port relationships that v	. Use one line for each owere present during th	ncial relationships (regardless of amount entity; add as many lines as you need by ne 36 months prior to publication.
Section 4.	Intellectual Proper	rty Patents & Copy	vrights	
Do you have any	•	ned, pending or issued		e work? ☐ Yes ✓ No

Casey 2



Section 5. Polotionships not sovered above
Relationships not covered above
Are there other relationships or activities that readers could perceive to have influenced, or that give the appearance of potentially influencing, what you wrote in the submitted work?
Yes, the following relationships/conditions/circumstances are present (explain below):
✓ No other relationships/conditions/circumstances that present a potential conflict of interest
At the time of manuscript acceptance, journals will ask authors to confirm and, if necessary, update their disclosure statements. On occasion, journals may ask authors to disclose further information about reported relationships.
Section 6. Disclosure Statement
Based on the above disclosures, this form will automatically generate a disclosure statement, which will appear in the box below.
Dr. Casey reports grants from National Heart Lung and Blood Institute, during the conduct of the study; .

Evaluation and Feedback

Please visit http://www.icmje.org/cgi-bin/feedback to provide feedback on your experience with completing this form.

Casey 3



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.

Identifying information.

2. The work under consideration for publication.

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



Section 1. Identifying Infor	mation		
1. Given Name (First Name) Brian	2. Surname (Last Name) Rini		3. Date 17-September-2020
4. Are you the corresponding author?	Yes ✓ No	Corresponding Auth Erin Wilfong	or's Name
5. Manuscript Title Severity of Illness Scores at Presentation	on Predict ICU Admission a	nd Mortality in COVID)-19
6. Manuscript Identifying Number (if you JECCM-20-92-R1	know it)		
		_	
Section 2. The Work Under	Consideration for Publi	cation	
Did you or your institution at any time recany aspect of the submitted work (including statistical analysis, etc.)? Are there any relevant conflicts of interesting the statistical analysis.	ng but not limited to grants, d		ent, commercial, private foundation, etc.) fo tudy design, manuscript preparation,
If yes, please fill out the appropriate in	formation below. If you hav	ve more than one ent	ity press the "ADD" button to add a row
Excess rows can be removed by pressi			
Name of Institution/Company	Grant	n-Financial Support?	Comments
ational Center for Advancing Translational ciences	✓		UL1TR000445
Section 3. Relevant financia	l activities outside the	submitted work.	
of compensation) with entities as desc clicking the "Add +" box. You should r	cribed in the instructions. U eport relationships that we	se one line for each e	cial relationships (regardless of amount ntity; add as many lines as you need by e 36 months prior to publication.
Are there any relevant conflicts of inte If yes, please fill out the appropriate in			
,, p			
Name of Entity	Grant'	n-Financial Other	Comments
fizer	V		
erck	✓		



Name of Entity	Grant?	Personal Fees?	Non-Financial Support?	Other?	Comments
GNE/Roche	✓				
Peloton	✓				
Aveo	\checkmark				
Astra-Zeneca	✓				
Bristol-Meyers Squib	✓				
Aveo		\checkmark			Consultant
Novartis		✓			Consultant
Synthorx		\checkmark			Consultant
Peloton		\checkmark			Consultant
Compugen		\checkmark			Consultant
Surface oncology		\checkmark			Consultant
3DMedicines		\checkmark			Consultant
Arravive		\checkmark			Consultant
Alkerines		\checkmark			Consultant
Section 4. Intellectual Property Patents & Copyrights Do you have any patents, whether planned, pending or issued, broadly relevant to the work? Yes No Section 5. Relationships not covered above					
Are there other relationships or activities that readers could perceive to have influenced, or that give the appearance of potentially influencing, what you wrote in the submitted work? Yes, the following relationships/conditions/circumstances are present (explain below): No other relationships/conditions/circumstances that present a potential conflict of interest					
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Section 6.

Disclosure Statement

Based on the above disclosures, this form will automatically generate a disclosure statement, which will appear in the box below.

Dr. Rini reports grants from National Center for Advancing Translational Sciences, during the conduct of the study; grants from Pfizer, grants from Merck, grants from Corvus, grants from GNE/Roche, grants from Peloton, grants from Aveo, grants from Astra-Zeneca, grants from Bristol-Meyers Squib, personal fees from Aveo, personal fees from Novartis, personal fees from Synthorx, personal fees from Peloton, personal fees from Compugen, personal fees from Surface oncology, personal fees from 3DMedicines, personal fees from Arravive, personal fees from Alkerines, outside the submitted work;

Evaluation and Feedback

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patent

Semler 1



Section 1.	Identifying Inform	nation		
1. Given Name (Fi Matthew	rst Name)	2. Surname (Last Name) Semler		3. Date 17-September-2020
4. Are you the cor	responding author?	☐ Yes 🗸 No	Corresponding Auth Erin Wilfong	or's Name
5. Manuscript Title Severity of Illnes		n Predict ICU Admission	and Mortality in COVIE	D-19
6. Manuscript Idei JECCM-20-92-R1	ntifying Number (if you kr	now it)		
Section 2.	The Work Under C	onsideration for Pub	lication	
any aspect of the s statistical analysis, Are there any rel	ubmitted work (including etc.)? evant conflicts of intere	g but not limited to grants,	data monitoring board, s	nent, commercial, private foundation, etc.) for tudy design, manuscript preparation, tity press the "ADD" button to add a row.
Excess rows can	be removed by pressin			
Name of Institut	ion/Company	Grant? Personal N	on-Financial Other Support?	Comments
National Heart Lung	and Blood Institute	✓		K23HL143053
Section 3.	Relevant financial	activities outside the	e submitted work.	
of compensation clicking the "Add) with entities as descri	ibed in the instructions. port relationships that w	Use one line for each e rere present during th	cial relationships (regardless of amount entity; add as many lines as you need by the 36 months prior to publication.
Section 4.	Intellectual Proper	rty Patents & Copy	rights	
Do you have any	•	ned, pending or issued,		e work? ☐ Yes 🗸 No

Semler 2



Section 5.	
Section 5.	Relationships not covered above
	elationships or activities that readers could perceive to have influenced, or that give the appearance of encing, what you wrote in the submitted work?
Yes, the follo	wing relationships/conditions/circumstances are present (explain below):
✓ No other rela	tionships/conditions/circumstances that present a potential conflict of interest
	anuscript acceptance, journals will ask authors to confirm and, if necessary, update their disclosure statements rnals may ask authors to disclose further information about reported relationships.
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Based on the abo	ove disclosures, this form will automatically generate a disclosure statement, which will appear in the box
Dr. Semler repor	ts grants from National Heart Lung and Blood Institute, during the conduct of the study; .

Evaluation and Feedback

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Semler 3