

#### 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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### 4. Intellectual Property.

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

### 5. Relationships not covered above.

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patent

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Section 1. Identifying Inform	ation	
1. Given Name (First Name) Neal	2. Surname (Last Name) Barnard	3. Date 03-June-2020
4. Are you the corresponding author?	✓ Yes No	
and low-income areas	ncer prevention policies focusing on processe	ed meats: a survey of patients in high-
6. Manuscript Identifying Number (if you kn JHMHP-20-19	ow it)	
Section 2. The Work Under Co	onsideration for Publication	
	ve payment or services from a third party (governi but not limited to grants, data monitoring board, est? Yes I No	

## Section 3. Relevant financial activities outside the submitted work.

Place a check in the appropriate boxes in the table to indicate whether you have financial relationships (regardless of amount of compensation) with entities as described in the instructions. Use one line for each entity; add as many lines as you need by clicking the "Add +" box. You should report relationships that were **present during the 36 months prior to publication**.

No

Are there any relevant conflicts of interest?	$\checkmark$	Yes	
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If yes, please fill out the appropriate information below.

Name of Entity	Grant?	Personal Fees <b>?</b>	Non-Financial Support?	Other?	Comments	
					Dr. Barnard reports that he writes books and articles and gives lectures on nutrition and has received royalties and honoraria from these sources.	

Section 4.	Intellectual Property Patents & Copyrights	
Do you have any	patents, whether planned, pending or issued, broadly relevant to the work?	✓ No



## Section 5. Relationships not covered above

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✓ Yes, the following relationships/conditions/circumstances are present (explain below):

No other relationships/conditions/circumstances that present a potential conflict of interest

Dr. Barnard serves without compensation as president of the Physicians Committee for Responsible Medicine and the Barnard Medical Center, organizations that promote the use of low-fat, plant-based diets and discourage the use of animalderived, fatty, and sugary foods. He is a member of the American Medical Association and the American College of Cardiology, organizations that have called for healthy food options in hospital menus.

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#### Section 6.

Disclosure Statement

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Dr. Barnard reports other from null, outside the submitted work; and Dr. Barnard serves without compensation as president of the Physicians Committee for Responsible Medicine and the Barnard Medical Center, organizations that promote the use of low-fat, plant-based diets and discourage the use of animal-derived, fatty, and sugary foods. He is a member of the American Medical Association and the American College of Cardiology, organizations that have called for healthy food options in hospital menus.

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1. Given Name (First N Marijane	lame)	2. Surname (Last Name) Hynes		3. Date 03-June-2020
4. Are you the corresp			Corresponding Author's Nar Neal Barnard, MD, FACC	ne
5. Manuscript Title Hospital patient attin and low-income area		cer prevention policies for	cusing on processed meats	: a survey of patients in high-
6. Manuscript Identify JHMHP-20-19	ing Number (if you kno	ow it)		
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Section 4.				
Int	tellectual Propert	y Patents & Copyrig	hts	
Do you have any pat	tents, whether plann	ed, pending or issued, bro	oadly relevant to the work?	Yes 🖌 No



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Dr. Hynes has nothing to disclose.

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Section 1.	Identifying Inform	ation	
1. Given Name (Fin Raymond	rst Name)	2. Surname (Last Name) Tu	3. Date 03-June-2020
4. Are you the cor	responding author?	Yes 🖌 No	Corresponding Author's Name Neal Barnard, MD, FACC
5. Manuscript Title Hospital patient and low-income	attitudes regarding car	ncer prevention policies for	cusing on processed meats: a survey of patients in high-
6. Manuscript Ider JHMHP-20-19	ntifying Number (if you kn	ow it)	
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any aspect of the s statistical analysis,	ubmitted work (including	but not limited to grants, dat	a third party (government, commercial, private foundation, etc.) for a monitoring board, study design, manuscript preparation,
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of compensation clicking the "Add	) with entities as descri	bed in the instructions. Us port relationships that were	ether you have financial relationships (regardless of amount e one line for each entity; add as many lines as you need by e <b>present during the 36 months prior to publication</b> .
	I		
Section 4.	Intellectual Proper	ty Patents & Copyrig	hts
Do you have any	patents, whether planr	ned, pending or issued, bro	oadly relevant to the work? 🔄 Yes 🖌 No



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Dr. Tu is a member of the American Medical Association, which has called for healthy food options in hospital menus.

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Brandon



Section 1. Identifying Inform	nation	
1. Given Name (First Name) Lizoralia	2. Surname (Last Name) Brandon	3. Date 03-June-2020
4. Are you the corresponding author?	Yes 🖌 No	Corresponding Author's Name Neal Barnard, MD, FACC
5. Manuscript Title Hospital patient attitudes regarding car and low-income areas	ncer prevention policies fo	cusing on processed meats: a survey of patients in high-
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The there any relevant connets of intere		
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No other relationships/conditions/circumstances that present a potential conflict of interest

At the time of this research, Ms. Brandon was an employee of the Physicians Committee for Responsible Medicine, a nonprofit organization that promotes the use of low-fat, plant-based diets and discourages the use of animal-derived, fatty, and sugary foods.

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1. Given Name (First Name) Elizabeth	2. Surname (Last Name) Ghandakly	3. Date 03-June-2020
4. Are you the corresponding author?	uthor? Yes 🖌 No Corresponding Author's Name Neal Barnard, MD, FACC	
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Dr. Ghandakly has nothing to disclose.

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Section 1. Identifying Inform	nation			
1. Given Name (First Name) Keerthi	2. Surname (Last Name) Vemulapalli	3. Date 03-June-2020		
4. Are you the corresponding author?	you the corresponding author? Yes 🖌 No Corresponding Auth Neal Barnard, MD,			
5. Manuscript Title Hospital patient attitudes regarding ca and low-income areas	ncer prevention policies fo	cusing on processed meats: a survey of patients in high-		
6. Manuscript Identifying Number (if you k JHMHP-20-19	now it)			
		-		
Section 2. The Work Under C	onsideration for Public	ation		
Did you or your institution <b>at any time</b> rece	eive payment or services from g but not limited to grants, da	a third party (government, commercial, private foundation, etc.) for ta monitoring board, study design, manuscript preparation,		
Section 3. Delevent financial				
Relevant financial	activities outside the s			
Place a check in the appropriate boxes in the table to indicate whether you have financial relationships (regardless of amount of compensation) with entities as described in the instructions. Use one line for each entity; add as many lines as you need by clicking the "Add +" box. You should report relationships that were <b>present during the 36 months prior to publication</b> . Are there any relevant conflicts of interest? Yes Vo				
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Section 4. Intellectual Prope	rty Patents & Copyrig	hts		
Do you have any patents, whether plan	ned, pending or issued, br	oadly 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?

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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. Vemulapalli has nothing to disclose.

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#### Instructions

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This section asks for information about the work that you have submitted for publication. The time frame for this reporting is that of the work itself, from the initial conception and planning to the present. The requested information is about resources that you received, either directly or indirectly (via your institution), to enable you to complete the work. Checking "No" means that you did the work without receiving any financial support from any third party -- that is, the work was supported by funds from the same institution that pays your salary and that institution did not receive third-party funds with which to pay you. If you or your institution received funds from a third party to support the work, such as a government granting agency, charitable foundation or commercial sponsor, check "Yes".

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Section 1. Identifying Inform	ation	
1. Given Name (First Name) Alyssa	2. Surname (Last Name) Burns	3. Date 03-June-2020
4. Are you the corresponding author?	Yes 🖌 No	Corresponding Author's Name Neal Barnard, MD, FACC
5. Manuscript Title Hospital patient attitudes regarding car and low-income areas	ncer prevention policies fo	cusing on processed meats: a survey of patients in high-
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Continued		
Section 4. Intellectual Proper	ty Patents & Copyrig	hts
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At the time of this research, Dr. Burns was an employee of the Physicians Committee for Responsible Medicine, a nonprofit organization that promotes the use of low-fat, plant-based diets and discourages the use of animal-derived, fatty, and sugary foods.

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patent

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Section 1.	Identifying Inform	ation		
1. Given Name (Fir Amber	st Name)	2. Surname (Last Name) Nowak		Date 3-June-2020
4. Are you the corr			Corresponding Author's Name Neal Barnard, MD, FACC	
5. Manuscript Title Hospital patient a and low-income	attitudes regarding car	ncer prevention policies for	cusing on processed meats: a	survey of patients in high-
6. Manuscript Iden JHMHP-20-19	ntifying Number (if you kn	now it)		
Section 2.	The Work Under Co	onsideration for Public	ation	
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Section 3.	Relevant financial	activities outside the s	ubmitted work.	
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Section 4.				
Section 4.	Intellectual Proper	ty Patents & Copyrig	hts	
Do you have any	patents, whether plan	ned, pending or issued, bro	oadly relevant to the work?	Yes 🖌 No



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#### **Evaluation and Feedback**