

# ICMJE DISCLOSURE FORM

Date: 4-12-2022

Your Name: Sailaja Kamaraju

Manuscript Title: Patient Specific Factors Associated with Inpatient Hospital Length of Stay for Solid Tumor Oncology Patients: A Retrospective Cohort Study

Manuscript number (if known): ACE-21-15-R1

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)
<b>Time frame: Since the initial planning of the work</b>			
1	All support for the present manuscript (e.g., funding, provision of study materials, medical writing, article processing charges, etc.) <b>No time limit for this item.</b>	The work is supported by American Society of Clinical Oncology (ASCO) Niarchos Foundation Grant and, Faculty Vitality Award, Medical College of Wisconsin (Department of Medicine, Division of hematology-oncology).	This is a training grant only, and has no direct funds involved.  The Faculty Vitality Award provided funds to hire a coordinator for the QI projects. There are no other direct benefits involved.
<b>Time frame: past 36 months</b>			
2	Grants or contracts from any entity (if not indicated in item #1 above).	<u>None</u>	
3	Royalties or licenses	<u>None</u>	
4	Consulting fees	<u>None</u>	

5	Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or educational events	___ None	
6	Payment for expert testimony	___ None	
7	Support for attending meetings and/or travel	___ Yes	Through the Faculty Vitality Award
8	Patents planned, issued or pending	___ None	
9	Participation on a Data Safety Monitoring Board or Advisory Board	___ None	
10	Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid	___ None	
11	Stock or stock options	___ None	
12	Receipt of equipment, materials, drugs, medical writing, gifts or other services	___ None	
13	Other financial or non-financial interests	___ None	

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

The work is supported by American Society of Clinical Oncology (ASCO) Niarchos Foundation Grant and, Faculty Vitality Award, Medical College of Wisconsin (Department of Medicine, Division of hematology-oncology).

The ASCO grant is a quality improvement (QI) grant only with no direct transaction of funds.

The Faculty Vitality Award provided funds to hire a coordinator for the QI projects. There are no other direct benefits involved.

**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: 4-12-2022  
 Your Name: Bethany Canales  
 Manuscript Title: Patient Specific Factors Associated with Inpatient Hospital Length of Stay for Solid Tumor Oncology Patients: A Retrospective Cohort Study  
 Manuscript number (if known): ACE-21-15-R1

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# ICMJE DISCLOSURE FORM

Date: 4-12-2022

Your Name **Tamiah Wright**

Manuscript Title: **Patient Specific Factors Associated with Inpatient Hospital Length of Stay for Solid Tumor Oncology Patients: A Retrospective Cohort Study**

Manuscript number (if known): ACE-21-15-R1

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# ICMJE DISCLOSURE FORM

Date: 4-26-2022

Your Name John Charlson

Manuscript Title: **Patient Specific Factors Associated with Inpatient Hospital Length of Stay for Solid Tumor Oncology Patients: A Retrospective Cohort Study**

Manuscript number (if known): ACE-21-15-R1

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<b>Time frame: past 36 months</b>			
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3	Royalties or licenses	<u>None</u>	
4	Consulting fees	<u>None</u>	

5	Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or educational events	___ None	
6	Payment for expert testimony	___ None	
7	Support for attending meetings and/or travel	___ None	
8	Patents planned, issued or pending	___ None	
9	Participation on a Data Safety Monitoring Board or Advisory Board	___ None	
10	Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid	___ None	
11	Stock or stock options	___ None	
12	Receipt of equipment, materials, drugs, medical writing, gifts or other services	___ None	
13	Other financial or non-financial interests	___ None	

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# ICMJE DISCLOSURE FORM

Date: 4-26-2022

Your Name Thomas Wetzel

Manuscript Title: Patient Specific Factors Associated with Inpatient Hospital Length of Stay for Solid Tumor Oncology Patients: A Retrospective Cohort Study

Manuscript number (if known): ACE-21-15-R1

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11	Stock or stock options	___ None	
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# ICMJE DISCLOSURE FORM

Date: 4-12-2022

Your Name Jennifer Cadman

Manuscript Title: **Patient Specific Factors Associated with Inpatient Hospital Length of Stay for Solid Tumor Oncology Patients: A Retrospective Cohort Study**

Manuscript number (if known): ACE-21-15-R1

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# ICMJE DISCLOSURE FORM

Date: 4-12-2022

Your Name **Aniko Szabo**

Manuscript Title: **\_\_\_ Patient Specific Factors Associated with Inpatient Hospital Length of Stay for Solid Tumor Oncology Patients: A Retrospective Cohort Study**

Manuscript number (if known): **\_\_\_ACE-21-15-R1**

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# ICMJE DISCLOSURE FORM

Date: 4-12-2022

Your Name Joni Williams

Manuscript Title: Patient Specific Factors Associated with Inpatient Hospital Length of Stay for Solid Tumor Oncology Patients: A Retrospective Cohort Study

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# ICMJE DISCLOSURE FORM

Date: 4-12-2022

Your Name **Steve Power**

Manuscript Title: **\_\_\_ Patient Specific Factors Associated with Inpatient Hospital Length of Stay for Solid Tumor Oncology Patients: A Retrospective Cohort Study**

Manuscript number (if known): **\_\_\_ACE-21-15-R1**

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# ICMJE DISCLOSURE FORM

Date: 4-12-2022

Your Name Grace Campbell

Manuscript Title: Patient Specific Factors Associated with Inpatient Hospital Length of Stay for Solid Tumor Oncology Patients: A Retrospective Cohort Study

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