

ICMJE DISCLOSURE FORM

Date: 8/5/2022

Your Name: Katrina Wilcox Hagberg

Manuscript Title: Quality and completeness of malignant cancer recording in United Kingdom Clinical Practice Research Datalink Aurum compared to Hospital Episode Statistics

Manuscript Number (if known): ACE-22-4

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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☒ 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: 8/5/2022

Your Name: Catherine Vasilakis-Scaramozza

Manuscript Title: Quality and completeness of malignant cancer recording in United Kingdom Clinical Practice Research Datalink Aurum compared to Hospital Episode Statistics

Manuscript Number (if known): ACE-22-4

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Date: 8/5/2022

Your Name: Rebecca Persson

Manuscript Title: Quality and completeness of malignant cancer recording in United Kingdom Clinical Practice Research Datalink Aurum compared to Hospital Episode Statistics

Manuscript Number (if known): ACE-22-4

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Your Name: Eleanor Yelland

Manuscript Title: Quality and completeness of malignant cancer recording in United Kingdom Clinical Practice Research Datalink Aurum compared to Hospital Episode Statistics

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Date: 8/5/2022

Your Name: Tim Williams

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ICMJE DISCLOSURE FORM

Date: 8/5/2022

Your Name: Puja Myles

Manuscript Title: Quality and completeness of malignant cancer recording in United Kingdom Clinical Practice Research Datalink Aurum compared to Hospital Episode Statistics

Manuscript Number (if known): ACE-22-4

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.

The author's relationships/activities/interests should be defined broadly. For example, if your manuscript pertains to the epidemiology of hypertension, you should declare all relationships with manufacturers of antihypertensive medication, even if that medication is not mentioned in the manuscript.

In item #1 below, report all support for the work reported in this manuscript without time limit. For all other items, the time frame for disclosure is the past 36 months.

	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	<input type="checkbox"/> None <input type="checkbox"/> CPRD	CPRD is jointly sponsored by the UK government's Medicines and Healthcare products Regulatory Agency and the National Institute for Health Research (NIHR). As a not-for-profit UK government body, CPRD seeks to recoup the cost of delivering its research services to academic, industry and government researchers through research user license fees. PM, EY and TW are employees of CPRD, the data custodians for CPRD Aurum
		Click the tab key to add additional rows.
Time frame: past 36 months		
2	<input checked="" type="checkbox"/> None	

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ICMJE DISCLOSURE FORM

Date: 8/5/2022

Your Name: Susan Jick

Manuscript Title: Quality and completeness of malignant cancer recording in United Kingdom Clinical Practice Research Datalink Aurum compared to Hospital Episode Statistics

Manuscript Number (if known): ACE-22-4

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