Form for Disclosure of Potential Conflict of Interest

Mandatory Submission Form for Manuscript No. _______________________

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. All authors are responsible for the accuracy and completeness of the submitted information. The corresponding author is requested to sign and submit the scanned form together with the revised manuscript through Editorial Manager.

1. The Work Under Consideration for Publication
Did you or your institution at any time receive payment or services from a third party for any aspect of the submitted work (including but not limited to grants, data monitoring board, study design, manuscript preparation, statistical analysis, etc...)?
This includes:
- Grants
- Consulting fee or honorarium
- Support for travel to meetings the study or other purposes
- Fees for participation in review activities such as data monitoring boards, statistical analysis, end point committees, and the like
- Payment for writing or reviewing the manuscript
- Provision of writing assistance, medicines, equipment, or administrative support.

☐ No, financial relationships that present a potential conflict of interest
☐ Yes, the following financial relationships are present (explain on separate sheet).

2. Relevant financial activities outside the submitted work
Does any of the submitting author have financial relationships (regardless of amount of compensation) 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. This includes:
- Board Membership
- Consultancy
- Employment
- Expert testimony
- Grants/grants pending
- Payment for lectures including service on speaker bureaus
- Payment for manuscript preparation
- Patents (planned, pending of issued)
- Royalties
- Payment for development of educational presentations
- Stock/stock options
- Travel/accomodations/meeting expenses unrelated to activities listed

☐ No, financial relationships that present a potential conflict of interest
☐ Yes, the following financial relationships are present (explain below)

3. Other relationships
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?

☐ No other relationships that present a potential conflict of interest
☐ Yes, the following relationships/conditions/circumstances are present (explain below)
If any commercial interests/arrangements are described above, I understand that the staff of the Journal will keep this information confidential but communicate it to the handling Communicating Editor and – if necessary – to the reviewers. I also understand that if the manuscript is accepted, the Editors will discuss with me the manner in which such information is to be communicated to the reader. I hereby grant permission for any such information to be included with publication of the manuscript in the *Journal of Inherited Metabolic Disease*.

Author               Signature, Date

____________________________________  ______________________________________

Please scan the completed and signed form and then submit it as an electronic file along with your revised manuscript. No manuscripts will be accepted for publication without this form.

http://www.springer.com/10545
Explanations

1. **The work under consideration for publication.**
   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".

2. **Relevant financial activities outside the submitted work.**
   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.

3. **Other relationships.**
   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.