

JIMD – Journal of Inherited Metabolic Disease
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)
- Roaylties
- Payment for development of educational presentations
- Stock/stock options
- Travel/accomodatiois/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)

4. Include this Conflict of Interest on the publication

If the author would like to disclose information but do not want to publish it, they need to put those information in the cover letter.

- No, we don't want this COI on the publication.
- Yes, we want this COI on the publication.

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.



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