ICMJE Form for Disclosure of Potential Conflicts of Interest

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.

1. Identifying information.

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

5. Relationships not covered above.

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Other: Anything not covered under the previous three boxes
Pending: The patent has been filed but not issued
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Licensed: The patent has been licensed to an entity, whether earning royalties or not
Royalties: Funds are coming in to you or your institution due to your patent
ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)  Morey
2. Surname (Last Name)  Blinder
3. Date  27-February-2017
4. Are you the corresponding author?  No

Corresponding Author's Name  Suresh Vedantham

5. Manuscript Title  Pharmacomechanical Catheter-Directed Thrombolysis for Deep-Vein Thrombosis
6. Manuscript Identifying Number (if you know it)  16-15066

Section 2. The Work Under Consideration for Publication

Did you or your institution at any time receive payment or services from a third party (government, commercial, private foundation, etc.) for any aspect of the submitted work (including but not limited to grants, data monitoring board, study design, manuscript preparation, statistical analysis, etc.)?  No

Are there any relevant conflicts of interest?  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.

If yes, please fill out the appropriate information below.

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<tr>
<th>Name of Entity</th>
<th>Grant?</th>
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<th>Non-Financial Support?</th>
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Section 4. Intellectual Property -- Patents & Copyrights

Do you have any patents, whether planned, pending or issued, broadly relevant to the work?  No

Blinder
ICMJE Form for Disclosure of Potential Conflicts of Interest

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?

☐ Yes, the following relationships/conditions/circumstances are present (explain below):
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Section 6. Disclosure Statement

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Dr. Blinder reports personal fees from Janssen Pharmaceuticals outside the submitted work.

Evaluation and Feedback

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Section 1. Identifying Information

1. Given Name (First Name)  
   David  

2. Surname (Last Name)  
   Cohen  

3. Date  
   28-February-2017  

4. Are you the corresponding author?  
   Yes  ✔  No  
   Corresponding Author’s Name  
   Suresh Vedantham  

5. Manuscript Title  
   Pharmacomechanical Catheter-Directed Thrombolysis for Deep-Vein Thrombosis  

6. Manuscript Identifying Number (if you know it)  
   16-15066  

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Are there any relevant conflicts of interest?  
   Yes  ✔  No  

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<td>✔</td>
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<td>Research grant to institution; consulting income</td>
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<td></td>
<td>Research grant to institution</td>
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<td>Boston Scientific</td>
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<td>Research grant to institution</td>
</tr>
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<td>Cardinal Health</td>
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<td>✔</td>
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Dr. Cohen reports grants and personal fees from Medtronic, grants from Abbott Vascular and Boston Scientific, and personal fees from Cardinal Health outside the submitted work.

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Section 1. Identifying Information

1. Given Name (First Name)  
   Anthony

2. Surname (Last Name)  
   Comerota

3. Date  
   03-March-2017

4. Are you the corresponding author?  
   ☑ No

Corresponding Author’s Name  
Suresh Vedantham

5. Manuscript Title  
Pharmacomechanical Catheter-Directed Thrombolysis for Deep-Vein Thrombosis

6. Manuscript Identifying Number (if you know it)  
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☑ No

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Section 4. Intellectual Property -- Patents & Copyrights

Do you have any patents, whether planned, pending or issued, broadly relevant to the work?  
☑ No  
☐ Yes
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Dr. Comerota reports personal fees from Medtronic outside the submitted work.

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<tr>
<td>Mary Clare</td>
<td>Derfler</td>
<td>27-February-2017</td>
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<th>4. Are you the corresponding author?</th>
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<th>Corresponding Author’s Name</th>
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<td>Suresh Vedantham</td>
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Did you or your institution at any time receive payment or services from a third party (government, commercial, private foundation, etc.) for any aspect of the submitted work (including but not limited to grants, data monitoring board, study design, manuscript preparation, statistical analysis, etc.)?

Are there any relevant conflicts of interest? Yes ✔ No

If yes, please fill out the appropriate information below. If you have more than one entity press the “ADD” button to add a row. Excess rows can be removed by pressing the "X" button.

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<td>Boston Scientific</td>
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<td></td>
<td></td>
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Dr. Derfler reports grants from National Heart, Lung, and Blood Institute, Covidian (Now Medtronic), and Boston Scientific and non-financial support from Genentech and BSN Medical during the conduct of the study.

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Licensed: The patent has been licensed to an entity, whether earning royalties or not
Royalties: Funds are coming in to you or your institution due to your patent
ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)  James
2. Surname (Last Name)  Duncan
3. Date  01-March-2017
4. Are you the corresponding author?  Yes  No
   Corresponding Author’s Name  Vedantham
5. Manuscript Title  Pharmacomechanical Catheter-Directed Thrombolysis for Deep-Vein Thrombosis
6. Manuscript Identifying Number (if you know it)  16-15066

Section 2. The Work Under Consideration for Publication

Did you or your institution at any time receive payment or services from a third party (government, commercial, private foundation, etc.) for any aspect of the submitted work (including but not limited to grants, data monitoring board, study design, manuscript preparation, statistical analysis, etc.)?  
Are there any relevant conflicts of interest?  Yes  No

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Are there any relevant conflicts of interest?  Yes  No

Section 4. Intellectual Property -- Patents & Copyrights

Do you have any patents, whether planned, pending or issued, broadly relevant to the work?  Yes  No
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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. Duncan has nothing to disclose.

Evaluation and Feedback

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name) Marc
2. Surname (Last Name) Filion
3. Date 27-February-2017
4. Are you the corresponding author? ☑ No
5. Manuscript Title
Pharmacomechanical Catheter-Directed Thrombolysis for Deep-Vein Thrombosis

Section 2. The Work Under Consideration for Publication

Did you or your institution at any time receive payment or services from a third party (government, commercial, private foundation, etc.) for any aspect of the submitted work (including but not limited to grants, data monitoring board, study design, manuscript preparation, statistical analysis, etc.)?

Are there any relevant conflicts of interest? No

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Are there any relevant conflicts of interest? No

Section 4. Intellectual Property -- Patents & Copyrights

Do you have any patents, whether planned, pending or issued, broadly relevant to the work? No
ICMJE Form for Disclosure of Potential Conflicts of Interest

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Dr. Filion has nothing to disclose.

Evaluation and Feedback

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)  
Mark

2. Surname (Last Name)  
Garcia

3. Date  
27-February-2017

4. Are you the corresponding author?  
Yes ✗ No

Corresponding Author’s Name  
Suresh Vedantham

5. Manuscript Title  
Pharmacomechanical Catheter-Directed Thrombolysis for Deep-Vein Thrombosis

6. Manuscript Identifying Number (if you know it)  
16-15066

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Are there any relevant conflicts of interest?  
Yes ✗ No

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Are there any relevant conflicts of interest?  
Yes ✗ No

If yes, please fill out the appropriate information below.

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<th>Name of Entity</th>
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<td>Speaker fees, donation of stents</td>
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</table>

Section 4. Intellectual Property -- Patents & Copyrights

Do you have any patents, whether planned, pending or issued, broadly relevant to the work?  
Yes ✗ No

Garcia
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?

- Yes, the following relationships/conditions/circumstances are present (explain below):
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Based on the above disclosures, this form will automatically generate a disclosure statement, which will appear in the box below.

Dr. Garcia reports grants and personal fees from Boston Scientific, grants, personal fees, and non-financial support from EKOS/BTG, and personal fees and non-financial support from Cook outside the submitted work.

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)  
   Samuel

2. Surname (Last Name)  
   Goldhaber

3. Date  
   28-February-2017

4. Are you the corresponding author?  
   Yes ☐  No ☑

   Corresponding Author's Name  
   Suresh Vedantham, MD

5. Manuscript Title  
   Pharmacomechanical Catheter-Directed Thrombolysis for Deep-Vein Thrombosis

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Are there any relevant conflicts of interest?  
   Yes ☐  No ☑

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Dr. Goldhaber reports grants and personal fees from Boehringer Ingelheim, BMS, Daiichi Sankyo, Janssen, Portola, Bayer, and BTG/EKOS and grants from BiO2 Medical outside the submitted work.

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## Section 1. Identifying Information

1. Given Name (First Name)  
   Heather

2. Surname (Last Name)  
   Gornik

3. Date  
   04-March-2017

4. Are you the corresponding author?  
   Yes [✓]  No [ ]  
   Corresponding Author's Name  
   Suresh Vedantham

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<td>National Heart, Lung, and Blood Institute</td>
<td>✔</td>
<td>✕</td>
<td>✕</td>
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<td>Funding as steering committee member and as a clinical site for ATTRCT trial</td>
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Dr. Gornik reports grants from National Heart, Lung, and Blood Institute during the conduct of the study.

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)  Chu-Shu
2. Surname (Last Name)  Gu
3. Date  27-February-2017
4. Are you the corresponding author?  No
Corresponding Author’s Name  Suresh Vedantham
5. Manuscript Title  Pharmacomechanical Catheter-Directed Thrombolysis for Deep-Vein Thrombosis
6. Manuscript Identifying Number (if you know it)  16-15066

Section 2. The Work Under Consideration for Publication

Did you or your institution at any time receive payment or services from a third party (government, commercial, private foundation, etc.) for any aspect of the submitted work (including but not limited to grants, data monitoring board, study design, manuscript preparation, statistical analysis, etc.)?

Are there any relevant conflicts of interest?  No

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Are there any relevant conflicts of interest?  No

Section 4. Intellectual Property -- Patents & Copyrights

Do you have any patents, whether planned, pending or issued, broadly relevant to the work?  No
ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 5. Relationships not covered above

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☐ Yes, the following relationships/conditions/circumstances are present (explain below):
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Section 6. Disclosure Statement

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Dr. Gu has nothing to disclose.

Evaluation and Feedback

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1. Given Name (First Name)  
   Michael

2. Surname (Last Name)  
   Jaff

3. Date  
   27-February-2017

4. Are you the corresponding author?  
   ☑ Yes

   Corresponding Author's Name  
   Suresh Vedantham

5. Manuscript Title  
   Pharmacomechanical Catheter-Directed Thrombolysis for Deep-Vein Thrombosis

6. Manuscript Identifying Number (if you know it)  
   16-15066

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Are there any relevant conflicts of interest?  
   ☑ Yes
   ☑ No

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Are there any relevant conflicts of interest?  
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ICMJE Form for Disclosure of Potential Conflicts of Interest

**Section 4. Intellectual Property -- Patents & Copyrights**

Do you have any patents, whether planned, pending or issued, broadly relevant to the work?  
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Board Member, VIVA Physicians, a 501 c 3 not-for-profit education and research organization

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**Section 6. Disclosure Statement**

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Dr. Jaff reports other support from Boston Scientific, Cordis Corporation, Medtronic, Embolitech, and Venarum outside the submitted work. Dr. Jaff is a Board Member of VIVA Physicians, a 501 c 3 not-for-profit education and research organization.

**Evaluation and Feedback**

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name) Jim
2. Surname (Last Name) Julian
3. Date 01-March-2017
4. Are you the corresponding author? ☑ No
   Corresponding Author’s Name Suresh Vedantham
5. Manuscript Title
   Pharmacomechanical Catheter-Directed Thrombolysis for Deep-Vein Thrombosis
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<td>National Heart, Lung, and Blood Institute</td>
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Dr. Julian reports grants from National Heart, Lung, and Blood Institute during the conduct of the study.

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   Susan  
2. Surname (Last Name)  
   Kahn  
3. Date  
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Dr. Kahn reports grants from Canadian Institutes of Health Research during the conduct of the study, as well as personal fees from Bayer and BMS Pfizer and grants from Canadian Institutes of Health Research outside the submitted work.

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name) Clive
2. Surname (Last Name) Kearon
3. Date 28-August-2017
4. Are you the corresponding author? No

5. Manuscript Title
Pharmacomechanical Catheter-Directed Thrombolysis for Deep-Vein Thrombosis

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<tr>
<td>Heart and Stroke Foundation of Canada</td>
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<td>Jack Hirsh Professorship in Thromboembolism</td>
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<td></td>
<td></td>
<td>✔</td>
<td>McMaster University investigator award</td>
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Are there any relevant conflicts of interest? No

Section 4. Intellectual Property -- Patents & Copyrights

Do you have any patents, whether planned, pending or issued, broadly relevant to the work? No
ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 5. Relationships not covered above

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

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Dr. Kearon reports other support from Heart and Stroke Foundation of Canada and Jack Hirsh Professorship in Thromboembolism during the conduct of the study.

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)  Stephen
2. Surname (Last Name)  Kee
3. Date  27-February-2017
4. Are you the corresponding author?  No

Corresponding Author’s Name  Suresh Vedantham

5. Manuscript Title
Pharmacomechanical Catheter-Directed Thrombolysis for Deep-Vein Thrombosis

6. Manuscript Identifying Number (if you know it)
16-15066

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Are there any relevant conflicts of interest?  No

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Dr. Kee has nothing to disclose.

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Licensed: The patent has been licensed to an entity, whether earning royalties or not.
Royalties: Funds are coming in to you or your institution due to your patent.
ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name) Lawrence
2. Surname (Last Name) Lewis
3. Date 28-February-2017
4. Are you the corresponding author? Yes ☑ No
Corresponding Author’s Name Suresh Vedantham
5. Manuscript Title Pharmacomechanical Catheter-Directed Thrombolysis for Deep-Vein Thrombosis
6. Manuscript Identifying Number (if you know it) 16-15066

Section 2. The Work Under Consideration for Publication

Did you or your institution at any time receive payment or services from a third party (government, commercial, private foundation, etc.) for any aspect of the submitted work (including but not limited to grants, data monitoring board, study design, manuscript preparation, statistical analysis, etc.)?

Are there any relevant conflicts of interest? Yes ☑ No
If yes, please fill out the appropriate information below. If you have more than one entity press the “ADD” button to add a row. Excess rows can be removed by pressing the “X” button.

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Section 4. Intellectual Property -- Patents & Copyrights

Do you have any patents, whether planned, pending or issued, broadly relevant to the work? ☐ Yes ✔ No

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Dr. Lewis reports grants from National Institute of Health National Heart, Lung, and Blood Institute, Genentech Inc., Boston Scientific, and Medtronic and non-financial support from BSN Medical during the conduct of the study.

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### Identifying Information

1. **Given Name (First Name)**
   - Judith

2. **Surname (Last Name)**
   - Lin

3. **Date**
   - 27-February-2017

4. **Are you the corresponding author?**
   - Yes [ ]
   - No [x]

   **Corresponding Author’s Name**
   - Suresh Vedantham

5. **Manuscript Title**
   - Pharmacomechanical Catheter-Directed Thrombolysis for Deep-Vein Thrombosis

6. **Manuscript Identifying Number (if you know it)**
   - 16-15066

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Dr. Lin has nothing to disclose.

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name) Elizabeth
2. Surname (Last Name) Magnuson
3. Date 02-March-2017
4. Are you the corresponding author? Yes
5. Manuscript Title
   Pharmacomechanical Catheter-Directed Thrombolysis for Deep-Vein Thrombosis
6. Manuscript Identifying Number (if you know it) 16-15066

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<td>National Heart, Lung, and Blood Institute</td>
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Magnuson
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Royalties: Funds are coming in to you or your institution due to your patent
ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)  Vasco
2. Surname (Last Name)  Marques
3. Date  30-March-2017
4. Are you the corresponding author?  No
5. Manuscript Title  Pharmacomechanical Catheter-Directed Thrombolysis for Deep-Vein Thrombosis
6. Manuscript Identifying Number (if you know it)  16-15066

Section 2. The Work Under Consideration for Publication

Did you or your institution at any time receive payment or services from a third party (government, commercial, private foundation, etc.) for any aspect of the submitted work (including but not limited to grants, data monitoring board, study design, manuscript preparation, statistical analysis, etc.)?

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Are there any relevant conflicts of interest?  No

Section 4. Intellectual Property -- Patents & Copyrights

Do you have any patents, whether planned, pending or issued, broadly relevant to the work?  No
ICMJE Form for Disclosure of Potential Conflicts of Interest

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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Dr. Marques has nothing to disclose.

Evaluation and Feedback

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**Royalties:** Funds are coming in to you or your institution due to your patent
**Section 1. Identifying Information**

1. **Given Name (First Name)**: Stephan  
2. **Surname (Last Name)**: Moll  
3. **Date**: 01-March-2017  
4. **Are you the corresponding author?**: Yes  
   Corresponding Author’s Name: Suresh Vedantham  
5. **Manuscript Title**: Pharmacomechanical Catheter-Directed Thrombolysis for Deep-Vein Thrombosis  
6. **Manuscript Identifying Number (if you know it)**: 16-15066

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Are there any relevant conflicts of interest? □ Yes   □ No

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<table>
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<th>1. Given Name (First Name)</th>
<th>Timothy</th>
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<tr>
<td>2. Surname (Last Name)</td>
<td>Murphy</td>
</tr>
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<td>4. Are you the corresponding author?</td>
<td>Yes □ No □</td>
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<tr>
<td>Corresponding Author’s Name</td>
<td>Suresh Vedantham</td>
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### Section 1. Identifying Information

1. Given Name (First Name)  
   Patricia

2. Surname (Last Name)  
   Nieters

3. Date  
   28-February-2017

4. Are you the corresponding author?  
   ✔ Yes  
   No

   Corresponding Author’s Name  
   Suresh Vedantham

5. Manuscript Title  
   Pharmacomechanical Catheter-Directed Thrombolysis for Deep-Vein Thrombosis

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Patricia Nieters has nothing to disclose.

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)  Mahmood
2. Surname (Last Name)  Razavi
3. Date  14-March-2017
4. Are you the corresponding author?  
   ☐ Yes  ☑ No
   Corresponding Author’s Name  Suresh Vedantham
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If yes, please fill out the appropriate information below.

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## Section 1. Identifying Information

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   Rahul

2. **Surname (Last Name)**
   Razdan

3. **Date**
   27-February-2017

4. **Are you the corresponding author?**
   ✔ No

5. **Manuscript Title**
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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?

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

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Section 6. Disclosure Statement

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Dr. Razdan has nothing to disclose.

Evaluation and Feedback

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Intellectual Property.

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

Relationships not covered above.

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)  
John  

2. Surname (Last Name)  
Rundback  

3. Date  
15-March-2017

4. Are you the corresponding author?  
No

5. Manuscript Title  
Pharmacomechanical Catheter-Directed Thrombolysis Versus Anticoagulation Alone for Proximal Deep Vein Thrombosis: A Stratified Randomized Trial

6. Manuscript Identifying Number (if you know it)  
16-15066

Section 2. The Work Under Consideration for Publication

Did you or your institution at any time

Are there any relevant conflicts of interest?  
No

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<th>Name of Entity</th>
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<td>☐</td>
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<td>☐</td>
<td>☐</td>
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</tr>
<tr>
<td>Boston Scientific</td>
<td>☐</td>
<td>✔</td>
<td>☐</td>
<td>☐</td>
<td>Scientific Advisory Board</td>
</tr>
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### Section 4. Intellectual Property -- Patents & Copyrights

Do you have any patents, whether planned, pending or issued, broadly relevant to the work?  

- Yes  
- No  

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Dr. Rundback reports personal fees from Biotronic, personal fees from Simbionix (now 3D Systems), personal fees from Gore, personal fees from Abbott, grants and personal fees from Cook, personal fees from Cardiovascular Systems, grants from Juventas, grants from Daichii Sankyo, grants from Mercator, grants from Bard, grants from Intact, grants from Atrium, grants from NHLBI BEST-CLI Trial, personal fees from VIVA Physicians Inc, grants and personal fees from Medtronic, and personal fees from Boston Scientific outside the submitted work.

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**Royalties:** Funds are coming in to you or your institution due to your patent...
ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)  
   Nael

2. Surname (Last Name)  
   Saad

3. Date  
   27-February-2017

4. Are you the corresponding author?  
   □ Yes  ✔ No

   Corresponding Author’s Name  
   Vedantham

5. Manuscript Title  
   Pharmacomechanical Catheter-Directed Thrombolysis for Deep-Vein Thrombosis

6. Manuscript Identifying Number (if you know it)  
   16-15066

Section 2. The Work Under Consideration for Publication

Did you or your institution at any time receive payment or services from a third party (government, commercial, private foundation, etc.) for any aspect of the submitted work (including but not limited to grants, data monitoring board, study design, manuscript preparation, statistical analysis, etc.)?

Are there any relevant conflicts of interest?  
   □ Yes  ✔ No

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Are there any relevant conflicts of interest?  
   □ Yes  ✔ No

Section 4. Intellectual Property -- Patents & Copyrights

Do you have any patents, whether planned, pending or issued, broadly relevant to the work?  
   □ Yes  ✔ No
ICMJE Form for Disclosure of Potential Conflicts of Interest

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Dr. Saad has nothing to disclose.

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### Section 1. Identifying Information

1. Given Name (First Name)  
   David

2. Surname (Last Name)  
   Sacks

3. Date  
   28-February-2017

4. Are you the corresponding author?  
   Yes [ ]  No [x]

   Corresponding Author’s Name  
   Suresh Vedantham

5. Manuscript Title  
   Pharmacomechanical Catheter-Directed Thrombolysis for Deep-Vein Thrombosis

6. Manuscript Identifying Number (if you know it)  
   16-15066

### Section 2. The Work Under Consideration for Publication

Did you or your institution at any time receive payment or services from a third party (government, commercial, private foundation, etc.) for any aspect of the submitted work (including but not limited to grants, data monitoring board, study design, manuscript preparation, statistical analysis, etc.)?

Are there any relevant conflicts of interest?  
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### Section 3. Relevant financial activities outside the submitted work.

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Are there any relevant conflicts of interest?  
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<td>Consulting on DVT treatment device</td>
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### Section 4. Intellectual Property -- Patents & Copyrights

Do you have any patents, whether planned, pending or issued, broadly relevant to the work?  
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ICMJE Form for Disclosure of Potential Conflicts of Interest

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Dr. Sacks reports personal fees from Teleflex outside the submitted work.

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**ICMJE Form for Disclosure of Potential Conflicts of Interest**

### Section 1. Identifying Information

1. **Given Name (First Name)**
   - Joseph

2. **Surname (Last Name)**
   - Schneider

3. **Date**
   - 02-March-2017

4. **Are you the corresponding author?**
   - ☑ No

5. **Manuscript Title**
   - Pharmacomechanical Catheter-Directed Thrombolysis for Deep-Vein Thrombosis

6. **Manuscript Identifying Number (if you know it)**
   - 16-15066

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Dr. Schneider has nothing to disclose.

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

5. Relationships not covered above.
   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.

Definitions.

**Entity:** government agency, foundation, commercial sponsor, academic institution, etc.

**Grant:** A grant from an entity, generally [but not always] paid to your organization

**Personal Fees:** Monies paid to you for services rendered, generally honoraria, royalties, or fees for consulting, lectures, speakers bureaus, expert testimony, employment, or other affiliations

**Non-Financial Support:** Examples include drugs/equipment supplied by the entity, travel paid by the entity, writing assistance, administrative support, etc.

**Other:** Anything not covered under the previous three boxes

**Pending:** The patent has been filed but not issued

**Issued:** The patent has been issued by the agency

**Licensed:** The patent has been licensed to an entity, whether earning royalties or not

**Royalties:** Funds are coming in to you or your institution due to your patent

1. Vander Woude
ICMJE Form for Disclosure of Potential Conflicts of Interest

### Section 1. Identifying Information

<table>
<thead>
<tr>
<th>1. Given Name (First Name)</th>
<th>2. Surname (Last Name)</th>
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<tr>
<td>Eric</td>
<td>Vander Woude</td>
<td>28-February-2017</td>
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4. Are you the corresponding author?  Yes ☐ No ☑

Corresponding Author’s Name
Vedantham

5. Manuscript Title
Pharmacomechanical Catheter-Directed Thrombolysis for Deep-Vein Thrombosis

6. Manuscript Identifying Number (if you know it)
16-15066

### Section 2. The Work Under Consideration for Publication

Did you or your institution at any time receive payment or services from a third party (government, commercial, private foundation, etc.) for any aspect of the submitted work (including but not limited to grants, data monitoring board, study design, manuscript preparation, statistical analysis, etc.)?

Are there any relevant conflicts of interest?  Yes ☐ 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.

Are there any relevant conflicts of interest?  Yes ☐ No ☑

### Section 4. Intellectual Property -- Patents & Copyrights

Do you have any patents, whether planned, pending or issued, broadly relevant to the work?  Yes ☐ No ☑
ICMJE Form for Disclosure of Potential Conflicts of Interest

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?

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

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

At the time of manuscript acceptance, journals will ask authors to confirm and, if necessary, update their disclosure statements. On occasion, journals may ask authors to disclose further information about reported relationships.

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. Vander Woude has nothing to disclose.

Evaluation and Feedback

Please visit http://www.icmje.org/cgi-bin/feedback to provide feedback on your experience with completing this form.
ICMJE Form for Disclosure of Potential Conflicts of Interest

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.

1. Identifying information.

2. 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".

3. Relevant financial activities outside the submitted work.

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## Section 1. Identifying Information

1. **Given Name (First Name)**  
   Suresh

2. **Surname (Last Name)**  
   Vedantham

3. **Date**  
   14-March-2017

4. **Are you the corresponding author?**  
   ✔ Yes  
   No

5. **Manuscript Title**  
   Pharmacomechanical Catheter-Directed Thrombolysis for Deep-Vein Thrombosis

6. **Manuscript Identifying Number (if you know it)**  
   16-15066

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Are there any relevant conflicts of interest?  

✔ Yes  
No

If yes, please fill out the appropriate information below. If you have more than one entity press the “ADD” button to add a row. Excess rows can be removed by pressing the “X” button.

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Are there any relevant conflicts of interest?  

✔ Yes  
No

If yes, please fill out the appropriate information below.
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Dr. Vedantham reports grants from National Heart Lung and Blood Institute, Boston Scientific, Covidien (now Medtronic), non-financial support from BSN Medical, and grants and non-financial support from Genentech (A Roche Company) during the conduct of the study, as well as grants from Cook Medical and Volcano outside the submitted work.
Evaluation and Feedback

Please visit http://www.icmje.org/cgi-bin/feedback to provide feedback on your experience with completing this form.