***C:\Users\mgraves\Desktop\A1_test.tif***

***PM&R* Reviewer Conflict of Interest Policy and Disclosure Form**

**Instructions**The purpose of this form is to provide the PM&R Editor in Chief and Senior Editors with information about your relationships that could potentially be considered a source of bias within the peer review process.  **No signature is required. The form is designed to be filled out in Microsoft Word and emailed back to the Editorial Office at** [pmrjournal@aapmr.org](mailto:pmrjournal@aapmr.org). All PM&R reviewers are required to submit this form and update it annually.

**1. Identifying information**

Enter your full name and email address.

**2. Relevant financial activities.**

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, your reviews. You should disclose interactions with ANY entity that could be considered broadly relevant. Report all sources of revenue paid over the past 36 months (or promised to be paid) directly to you or your institution on your behalf. If there is any uncertainty, it is usually better to disclose a relationship than not to do so.

**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, your reviews.

**Section 1. Reviewer information**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **First Name** |  | **Last name** |  |  | **Completion date (DD/MM/YY)** |
|  |  |  |

|  |  |
| --- | --- |
| **Email address:** |  |

**Section 2. Relevant financial activities**

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. You should report relationships that were present during the previous 36 months.

Complete each row by checking “No” or providing the requested information.

**Relevant financial activities**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Type of Relationship** | **No** | **Money**  **Paid to**  **You** | **Money**  **To Your**  **Institution\*** | **Entity** | **Comments** |
| **1. Board membership** |  |  |  |  |  |
| **2. Consultancy** |  |  |  |  |  |
| **3. Employment** |  |  |  |  |  |
| **4. Expert testimony** |  |  |  |  |  |
| **5. Grants or**  **Pending grants** |  |  |  |  |  |
| **6. Payment for lectures including service on speakers bureaus** |  |  |  |  |  |
| **7. Payment for manuscript preparation** |  |  |  |  |  |
| **8. Patents (planned, pending or issued)** |  |  |  |  |  |
| **9. Royalties** |  |  |  |  |  |
| **10. Payment for development of educational presentations** |  |  |  |  |  |
| **11. Stock/stock options** |  |  |  |  |  |
| **12. Travel, accommodations and/or meeting expenses unrelated to activities listed\*\*** |  |  |  |  |  |
| **13. Other (err on the side of full disclosure)** |  |  |  |  |  |

**\*** This means money that your institution received for your efforts. **\*\*** For example, if you reported a consultancy above there is no need to report a travel related to that consultancy on this line

**Section 3. Other Relationships**

Are there other relationships or activities that could have influenced, or that give the appearance of potentially influencing, the comments in your review?

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

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

|  |
| --- |
|  |

On occasion, the Journal may ask reviewers to disclose further information about reported relationships.