

Dunican

Section 1. Identifying Information	ation	
Given Name (First Name) Eleanor	2. Surname (Last Name) Dunican	3. Date 27-September-2017
4. Are you the corresponding author?	☐ Yes ✓ No	Corresponding Author's Name John V Fahy
5. Manuscript Title LINKS BETWEEN MUCUS PLUGS, EOSINO	PHILIA AND AIRFLOW OB	STRUCTION IN ASTHMA
6. Manuscript Identifying Number (if you kno 95693-JCI-CMED-RV-2	ow it)	
Section 2		
Section 2. The Work Under Co	nsideration for Public	ation
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National Institutes of Health		
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Section 4. Intellectual Property	r Patents & Copyrigl	hts
Do you have any patents, whether planne If yes, please fill out the appropriate inforr Excess rows can be removed by pressing t	nation below. If you have	adly relevant to the work? Yes No more than one entity press the "ADD" button to add a row.



Patent?	Pending? Issued?	Licensed? Royalties?	Licensee?	Comments	
48536-587001WO	V				
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Yes, the following relationsh No other relationships/condi At the time of manuscript accept On occasion, journals may ask ac	tions/circumstances tl	hat present a potential c	conflict of interes	date their disclosure statem	ents.
Section 6. Disclosure St	tatement				
Based on the above disclosures, below.	:his form will automat	ically generate a disclos	ure statement, w	hich will appear in the box	
Dr. Dunican reports grants from a patent 48536-587001WO pend		Health, during the cond	uct of the study;	In addition, Dr. Dunican ha	S

Evaluation and Feedback



Section 1. Identifying I	nformation						
1. Given Name (First Name) Brett	2. Surname (Last Name) Elicker	3. Date 29-September-2017					
4. Are you the corresponding autho	r? Yes 🗸 No	Corresponding Author's Name John Fahy					
5. Manuscript Title LINK BETWEEN MUCUS PLUGS, EOSINOPHILIA AND AIRFLOW OBSTRUCTION IN ASTHMA							
6. Manuscript Identifying Number (i 95693-JCI-CMED-RV-2	f you know it)						
Section 2. The Work Un	der Consideration for Public	cation					
	cluding but not limited to grants, da	a third party (government, commercial, private foundation, etc.) for ta monitoring board, study design, manuscript preparation,					
Section 3. Relevant fina	ncial activities outside the s	ubmitted work.					
of compensation) with entities as	described in the instructions. Us uld report relationships that wer	ether you have financial relationships (regardless of amount e one line for each entity; add as many lines as you need by e present during the 36 months prior to publication .					
Section 4. Intellectual P	roperty Patents & Copyrig	hts					
Do you have any patents, whether if yes, please fill out the appropriation of the control of the	ite information below. If you have	padly relevant to the work? Yes No e more than one entity press the "ADD" button to add a row.					
Patent?	Pending? Issued? Licensed?	Royalties? Comments					



Patent?	Pending?	Issued?	Licensed?	Royalties?	Licensee?	Comments
1DCT mucous plugging scoring ystem	V					Named inventor on a patent describing a mucus plug scoring system in MDCT lung images as a method for quantifying mucus plugs in asthma and other airway diseases
Section 5. Relationsl	nips not cove	ered abo	ve			
Are there other relationships optentially influencing, what y	or activities that	t readers	could perce	eive to have	influenced, or t	hat give the appearance of
Yes, the following relations No other relationships/con						est
At the time of manuscript acce On occasion, journals may ask						update their disclosure statements nships.
Section 6. Disclosure	Statement					
Based on the above disclosure below.	s, this form will	automat	tically gener	rate a disclos	sure statement,	which will appear in the box
Dr. Elicker reports In addition,	Dr. Elicker has	a patent	MDCT muc	ous plugging	g scoring syster	m pending.

Evaluation and Feedback

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



Section 1. Identifying Inform	ation	
1. Given Name (First Name) David	2. Surname (Last Name) Gierada	3. Date 29-September-2017
4. Are you the corresponding author?	Yes ✓ No	Corresponding Author's Name John Fahy
5. Manuscript Title Link between mucus plugs, eosinophilia	a and airflow obstruction i	in asthma
6. Manuscript Identifying Number (if you kn	ow it)	
Section 2. The Work Under Co	onsideration for Public	cation
any aspect of the submitted work (including statistical analysis, etc.)? Are there any relevant conflicts of intere	but not limited to grants, danst. Yes No rmation below. If you hav	a third party (government, commercial, private foundation, etc.) for the monitoring board, study design, manuscript preparation, we more than one entity press the "ADD" button to add a row.
Excess rows can be removed by pressing		n-Financial Cul. 7 Comments
Name of Institution/Company	Grant	upport? Comments
National Institutes of Health		
Section 3. Relevant financial a	activities outside the s	ubmitted work.
of compensation) with entities as describ	oed in the instructions. Us ort relationships that wer	ether you have financial relationships (regardless of amount se one line for each entity; add as many lines as you need by e present during the 36 months prior to publication .
Section 4. Intellectual Propert	y Patents & Copyrig	hts
Do you have any patents, whether plann If yes, please fill out the appropriate infor Excess rows can be removed by pressing	rmation below. If you have	oadly relevant to the work? Yes No No e more than one entity press the "ADD" button to add a row.

Gierada



Patent?	Pending?	Issued? L	icensed?	Royalties?	Licensee?	Comments
CT mucus score	/					Named inventor on a patent describing a mucus plug scoring system in MDCT lung images as a method for quantifying mucus plugs in asthma and other airway diseases
Section 5. Relatio	nships not cove	ered abov	/e	95000		
Are there other relationship potentially influencing, wh				eive to have	influenced, or	that give the appearance of
Yes, the following relationships/				2. 10 10		rest
At the time of manuscript a On occasion, journals may						update their disclosure statements. onships.
Section 6. Disclose						
Disclosu	ure Statement					
Based on the above disclos below.	ures, this form wi	ll automatio	cally gener	rate a disclos	sure statement	t, which will appear in the box
Dr. Gierada reports grants of patent CT mucus score per		itutes of Ho	ealth, duri	ing the cond	luct of the stud	dy; In addition, Dr. Gierada has a

Evaluation and Feedback

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



Nagle

ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1.	Identifying Inform	nation				
1. Given Name (Fi Scott	rst Name)	2. Surnan Nagle	ne (Last Nam	e)		3. Date 27-September-2017
4. Are you the con	responding author?	Yes	✓ No	Correspond	ding Autho hy	r's Name
5. Manuscript Title Link between mu	e ucus plugs, eosinophili	a and airflo	w obstructi	on in asthma		
6. Manuscript Iden 95693-JCI-CMED	ntifying Number (if you kr -RV-2	now it)				
Section 2.	The Work Under Co	onsiderat	ion for Pu	blication		
any aspect of the su statistical analysis, o	titution at any time recei ubmitted work (including	ive payment but not lim	or services f	rom a third party s, data monitoring	-	nt, commercial, private foundation, etc.) for dy design, manuscript preparation,
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Name of Entity		Grant?	Personal Fees	Non-Financial Support?	Other?	Comments
ertex Pharmaceutica	ls		✓			Consultant
Merck Pharmaceutical	s		✓			Consultant
E Healthcare					√ [Departmental research support
Section 4.	Intellectual Duana	w Doto	oto 8 Com	mi ab ta		
	Intellectual Proper					
Do you have any p	patents, whether plann	ned, pendir	g or issued	, broadly releva	nt to the w	/ork? ✓ Yes No

2



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.

Patent?	Pending?	Issued?	Licensed?	Royalties?	Licensee?	Comments
Named inventor on a patent describing a mucus plug scoring system in MDCT lung images as a method for quantifying mucus plugs in asthma and other airway diseases	V					

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Section 5.	Dalationalinameters	
	Relationships not covered a	pove

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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✓ 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. Disclosur

Disclosure Statement

Based on the above disclosures, this form will automatically generate a disclosure statement, which will appear in the box below.

Dr. Nagle reports personal fees from Vertex Pharmaceuticals, personal fees from Merck Pharmaceuticals, other from GE Healthcare, outside the submitted work; In addition, Dr. Nagle is a named inventor on a patent describing a mucus plug scoring system in MDCT lung images as a method for quantifying mucus plugs in asthma and other airway diseases pending.

Evaluation and Feedback

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



Section 1.	Identifying Inform	ation	
1. Given Name (Fi Mark	rst Name)	2. Surname (Last Name) Schiebler	3. Date 09-October-2017
4. Are you the cor	responding author?	Yes ✓ No	Corresponding Author's Name John Fahy
5. Manuscript Title LINK BETWEEN N		PHILIA AND AIRFLOW OB	STRUCTION IN ASTHMA
6. Manuscript Ider 95693-JCI-CMED	ntifying Number (if you kn 9-RV-2	ow it)	
Section 2.	The Work Under Co	onsideration for Publi	cation
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of compensation clicking the "Add) with entities as describ	oed in the instructions. Use ort relationships that we	nether you have financial relationships (regardless of amount se one line for each entity; add as many lines as you need by re present during the 36 months prior to publication.
Section 4.	Intellectual Propert	ty Patents & Copyri	ghts
Do you have any	patents, whether plann	ed, pending or issued, br	roadly relevant to the work? Yes V No



Section 5.	Relationships not covered above
	elationships or activities that readers could perceive to have influenced, or that give the appearance of encing, what you wrote in the submitted work?
	wing relationships/conditions/circumstances are present (explain below): tionships/conditions/circumstances that present a potential conflict of interest
Stockhoder: 1. Stemina Bioma 2. Healthmyne, Ir	arkers, Inc, Madison, WI nc, Madison, WI
On occasion, jour	nuscript acceptance, journals will ask authors to confirm and, if necessary, update their disclosure statements rnals may ask authors to disclose further information about reported relationships.
Section 6.	Disclosure Statement
Based on the abo below.	ve disclosures, this form will automatically generate a disclosure statement, which will appear in the box
Dr. Schiebler repo Stockhoder: 1. Stemina Bioma 2. Healthmyne, Ir	arkers, Inc, Madison, WI

Evaluation and Feedback



Section 1. Identifying Infor	mation	
1. Given Name (First Name) John	2. Surname (Last Name) Newell	3. Date 03-October-2017
4. Are you the corresponding author?	☐ Yes ✓ No	Corresponding Author's Name Eleanor Dunican
5. Manuscript Title Links between Mucus Plugs, Eosinoph	ilia and Airflow Obstruction	in Asthma
6. Manuscript Identifying Number (if you 95693-JCI-CMED-RV-2	know it)	
Section 2. The Work Under (Consideration for Public	ation
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If yes, please fill out the appropriate in Excess rows can be removed by pressi		e more than one entity press the "ADD" button to add a row.
Name of Institution/Company	Grant	Other? Comments
University of Iowa	✓	SARP NIH Grant
Section 3. Relevant financia	activities outside the s	ubmitted work.
of compensation) with entities as desc	ribed in the instructions. Us	ether you have financial relationships (regardless of amount e one line for each entity; add as many lines as you need by e present during the 36 months prior to publication .
Are there any relevant conflicts of inter- lf yes, please fill out the appropriate inf		
if yes, please fill out the appropriate in	ormation below.	
Name of Entity	Grant [®]	-Financial Other? Comments
IDA Diagnostics Inc		Paid Consultant. Stock Options
iemens Healthcare	✓	Research Grant



Section 4.	Intellectual	Property	Patents	& Copyr	ights			
Do you have any If yes, please fill o Excess rows can b	ut the appropr	iate informa	tion belo	w. If you ha			? ✓ Yes No	٧.
Patent	?	Pending?	Issued?	Licensed 2	Royalties?	Licensee?	Comments	
Named inventor on a plescribing a mucus plesystem in MDCT lung is method for quantifyin in asthma and other air	ug scoring mages as a g mucus plugs	V					Patent is being applied for in connection to the submitted work.	
Section 5.	Relationship	as not cove	wod abo	WO.				
Are there other re potentially influer	ationships or a	activities tha	t readers	could perc	eive to have	influenced, or th	nat give the appearance of	
Yes, the follow	ing relationshi	ps/condition	ns/circum	stances are	present (ex	plain below):		
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	ns Healthcare,	outside the	submitte				ees from VIDA Diagnostics Inc, atent Imaging Assessment of	



Evaluation and Feedback



Section 1. Identifying Infor	mation		
Given Name (First Name) Wilfred	2. Surname (Last Name) Raymond		. Date 9-October-2017
4. Are you the corresponding author?	☐ Yes ✓ No	Corresponding Author's Name John V. Fahy	6
5. Manuscript Title LINK BETWEEN MUCUS PLUGS, EOSING	OPHILIA AND AIRFLOW OBS	STRUCTION IN ASTHMA	
6. Manuscript Identifying Number (if you I 95693-JCI-CMED-RV-2	(now it)		
Section 2. The Work Under 0	Consideration for Public	cation	
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Place a check in the appropriate boxes of compensation) with entities as desc clicking the "Add +" box. You should re Are there any relevant conflicts of inter	ribed in the instructions. Us eport relationships that were	se one line for each entity; add	l as many lines as you need by
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Section 4. Intellectual Prope	rty Patents & Copyrig	hts	
Do you have any patents, whether plan	nned, pending or issued, bro	oadly relevant to the work?	Yes 🗸 No



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
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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. Raymond has nothing to disclose.

Evaluation and Feedback



Section 1. Identifying Inform	mation	
Given Name (First Name) Marrah	2. Surname (Last Name) Lachowicz-Scroggings	3. Date 27-September-2017
4. Are you the corresponding author?	☐ Yes ✓ No	Corresponding Author's Name John V. Fahy
5. Manuscript Title Link between mucus plugs, eosinophi	lia and airflow obstruction i	n asthma
6. Manuscript Identifying Number (if you l 95693-JCI-CMED-RV-2	know it)	
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Relationships not covered above
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Disclosure Statement
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croggings has nothing to disclose.
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Evaluation and Feedback



Section 1. Identifying Inform	ation	
identifying inform	lation	
Given Name (First Name) Selena	2. Surname (Last Name) Di Maio	3. Date 28-September-2017
4. Are you the corresponding author?	Yes ✓ No	Corresponding Author's Name John V. Fahy
5. Manuscript Title LINK BETWEEN EOSINOPHILIA AND MU	CUS PLUGS IN THE PATHO	GENESIS OF AIRFLOW OBSTRUCTION IN SEVERE ASTHMA
6. Manuscript Identifying Number (if you kn 95693-JCI-CMED-RV-2	ow it)	
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Section 4. Intellectual Proper	ty Patents & Copyrig	hts
Do you have any patents, whether plann	ned, pending or issued, bro	oadly relevant to the work? Yes V No



Section 5.	Relationships not covered above
	relationships or activities that readers could perceive to have influenced, or that give the appearance of encing, what you wrote in the submitted work?
Yes, the follo	owing relationships/conditions/circumstances are present (explain below):
✓ No other rela	ationships/conditions/circumstances that present a potential conflict of interest
	anuscript acceptance, journals will ask authors to confirm and, if necessary, update their disclosure statements. Irnals may ask authors to disclose further information about reported relationships.
Section 6.	Disclosure Statement
Based on the about the below.	ove disclosures, this form will automatically generate a disclosure statement, which will appear in the box
Dr. Di Maio has	nothing to disclose.

Evaluation and Feedback



Section 1. Identifying Information	ation	
Given Name (First Name) Eric	2. Surname (Last Name) Hoffman	3. Date 28-September-2017
4. Are you the corresponding author?	☐ Yes ✓ No	Corresponding Author's Name John V. Fahy
5. Manuscript Title LINK BETWEEN MUCUS PLUGS, EOSINOP	HILIA AND AIRFLOW OBS	TRUCTION IN ASTHMA
6. Manuscript Identifying Number (if you kno 95693-JCI-CMED-RV-2	ow it)	
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of compensation) with entities as describ	ed in the instructions. Use ort relationships that were	ether you have financial relationships (regardless of amount e one line for each entity; add as many lines as you need by e present during the 36 months prior to publication .
Section 4. Intellectual Property	y Patents & Copyrig	hts
Do you have any patents, whether planne		



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
Eric Hoffman is a founder and shareholder of VIDA Diagnostics, a company commercializing lung image analysis software developed, in part, at the University of Iowa
At the time of manuscript acceptance, journals will ask authors to confirm and, if necessary, update their disclosure statement 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. Hoffman reports grants from NIH, during the conduct of the study; and Eric Hoffman is a founder and shareholder of VIDA Diagnostics, a company commercializing lung image analysis software developed, in part, at the University of Iowa.

Evaluation and Feedback



Section 1. Identifying Inform	nation		
1. Given Name (First Name) Mario	2. Surname (Last Name) Castro		3. Date 27-September-2017
4. Are you the corresponding author?	☐ Yes ✓ No	Corresponding Auth John V. Fahy	nor's Name
5. Manuscript Title LINKS BETWEEN MUCUS PLUGS, EOSIN	OPHILIA AND AIRFLOW C	DBSTRUCTION IN ASTH	IMA
6. Manuscript Identifying Number (if you ki 95693-JCI-CMED-RV-2	now it)		
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any aspect of the submitted work (including statistical analysis, etc.)? Are there any relevant conflicts of intere	s but not limited to grants, of est? Yes No ormation below. If you ha	lata monitoring board, s	nent, commercial, private foundation, etc.) for tudy design, manuscript preparation, ity press the "ADD" button to add a row.
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Section 3. Relevant financial	activities outside the	submitted work.	
Place a check in the appropriate boxes i of compensation) with entities as descri clicking the "Add +" box. You should rep Are there any relevant conflicts of intered If yes, please fill out the appropriate info	bed in the instructions. Uport relationships that we est?	lse one line for each er	ntity; add as many lines as you need by
Name of Entity	Grant'	n-Financial Support?	Comments
Boston Scientific			Consultancy, speaker
Holaira	\checkmark		Consultancy
Genentech	✓		Speaker, Consultancy



Name of Entity	Grant?	Personal Fees?	Non-Financial Support?	Other?	Comments		
Amgen	1				Industry-Sponsored Studies		
Teva	✓	\checkmark			Industry-Sponsored Studies, Speaker, Consultant		
GSK	✓	\checkmark			Industry-Sponsored Studies, Data Safety Monitoring Committee		
Sanofi-Aventis	✓				Industry-Sponsored Studies, consultant		
/ectura	\checkmark				Industry-Sponsored Studies		
Boehringer-Ingelheim	\checkmark	\checkmark			Industry-Sponsored Studies, Speaker		
Elsevier		\checkmark			Royalties		
Medimmune	✓				Industry-Sponsored Studies		
nvion	\checkmark				Industry-Sponsored Studies		
viragen		✓			Consultant		
sstra Zeneca	✓	\checkmark			Industry-Sponsored Studies, Speaker		
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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 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 1. Identifying Inform	ation		
1. Given Name (First Name) Sean	2. Surname (Last Name) Fain		3. Date 27-September-2017
4. Are you the corresponding author?	Yes ✓ No	Corresponding Author John V. Fahy	r's Name
5. Manuscript Title Link between mucus plugs, eosinophilia	a and airflow obstruction	in asthma	
6. Manuscript Identifying Number (if you kn 95693-JCI-CMED-RV-2	ow it)		
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Name of Institution/Company	Grant? Personal Nor	n-Financial Other?	Comments
National Institutes of Health	✓		NHLBI Severe Asthma Research
Section 3. Relevant financial a	octivities outside the s	ubmitted work.	
Place a check in the appropriate boxes in of compensation) with entities as describ clicking the "Add +" box. You should rep	ed in the instructions. Us	e one line for each ent	ity; add as many lines as you need by
Are there any relevant conflicts of interes			
If yes, please fill out the appropriate info	rmation below.		
Name of Entity	Grant	n-Financial other?	Comments
GE Healthcare	✓		Vork statement for development of ovel pulmonary imaging



Section 4. Intellectual Property Patents & Copyrights
Do you have any patents, whether planned, pending or issued, broadly relevant to the work? Yes Vo
Section 5. Relationships not covered above
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Section 6. Disclosure Statement
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Dr. Fain reports grants from National Institutes of Health, during the conduct of the study; grants from GE Healthcare, outside the submitted work; .

Evaluation and Feedback



Section 1. Identifying Information	
1. Given Name (First Name) 2. Surname (Last Name) 3. Date Nizar Jarjour 07-December-2017	
4. Are you the corresponding author? Yes No	
5. Manuscript Title Link between mucus plugs, eosinophilia and airflow obstruction in asthma	
6. Manuscript Identifying Number (if you know it) 95693-JCI-CMED-RV-3	
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 foundati any aspect of the submitted work (including but not limited to grants, data monitoring board, study design, manuscript preparat statistical analysis, etc.)? Are there any relevant conflicts of interest? Yes Vo	
If yes, please fill out the appropriate information below. If you have more than one entity press the "ADD" button to a Excess rows can be removed by pressing the "X" button.	add a row.
Name of Institution/Company Grant? Personal Non-Financial Other? Comments	
NIH V	
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 or of compensation) with entities as described in the instructions. Use one line for each entity; add as many lines as you clicking the "Add +" box. You should report relationships that were present during the 36 months prior to publica Are there any relevant conflicts of interest? Yes Vo	need by
If yes, please fill out the appropriate information below.	
Name of Entity Grant? Personal Non-Financial Other? Comments	



Evaluation and Feedback



Section 1. Identifying Inform	nation		
1. Given Name (First Name) Elliot	2. Surname (Last Name) Israel		3. Date 02-October-2017
4. Are you the corresponding author?	Yes V No	Corresponding Au John V. Fahy	thor's Name
5. Manuscript Title Links between mucus plugs, eosinophil	lia and airflow obstructio	n in asthma	
6. Manuscript Identifying Number (if you kr 95693-JCI-CMED-RV-2	now it)		
Section 2. The Work Under Co	onsideration for Publ	ication	
Did you or your institution at any time rece any aspect of the submitted work (including statistical analysis, etc.)? Are there any relevant conflicts of intere	but not limited to grants, d		ment, commercial, private foundation, etc.) for study design, manuscript preparation,
Section 3. Relevant financial	activities outside the	submitted work.	
	bed in the instructions. U	Ise one line for each	ncial relationships (regardless of amount entity; add as many lines as you need by the 36 months prior to publication.
Are there any relevant conflicts of interes	est? ✓ Yes No		
If yes, please fill out the appropriate info	ormation below.		
Name of Entity	Grant*	n-Financial Support?	? Comments
AstraZeneca			Consultant
lovartis			Consultant-Paid & DSMB Member: Unpaid and Paid
hilips Respironics			Consultant
legeneron Pharmaceuticals			Consultant
esearch in Real Life (RiRL)			Travel/Meeting Expenses Only
EVA Specialty Pharmaceuticals			Current Consultant-Paid & Previous Travel/Meeting Expenses Only (Unpaid)



Name of Entity	Grant?	Personal Fees?	Non-Financial Support?	Other?	Comments
Genentech	/				Research Grant: Multi-Center Study
Boehringer Ingelheim			✓		Research Grant: Drug contributed to NIH AsthmaNet SIENA Study
GlaxoSmithKline			✓		Research Grant: Drug contributed to NIH AsthmaNet BARD, Microbiome, & INFANT Studies
Merck			✓		Research Grant: Drug contributed to NIH AsthmaNet INFANT & SIENA Studies
Sunovion			✓		Research Grant: Drug contributed to NIH AsthmaNet VIDA Study
EVA			\checkmark		Research Grant: Drug contributed to NIH AsthmaNet SIENA Study
anofi	1				Research Grant: Multi-Center Study
ird Rock Bio		\checkmark			Consultant
luvelution Pharmaceuticals		✓			Consultant
itaeris, Inc		/			Consultant
oehringer Ingelheim	✓				Research Grant: Multi-Center Study
EVA Specialty Pharmaceuticals			✓		Research Grant: Drug contributed to PCORI-PREPARE Study
anofi		\checkmark			Consultant
Merck		\checkmark			Consultant



Section 5.	Relationships not covered above
	relationships or activities that readers could perceive to have influenced, or that give the appearance of encing, what you wrote in the submitted work?
_	owing relationships/conditions/circumstances are present (explain below): ationships/conditions/circumstances that present a potential conflict of interest
	nanuscript acceptance, journals will ask authors to confirm and, if necessary, update their disclosure statements. urnals 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. Israel reports personal fees from AstraZeneca, personal fees and other from Novartis, personal fees from Philips Respironics, personal fees from Regeneron Pharmaceuticals, other from Research in Real Life (RiRL), personal fees and other from TEVA Specialty Pharmaceuticals, grants from Genentech, non-financial support from Boehringer Ingelheim, non-financial support from GlaxoSmithKline, non-financial support from Merck, non-financial support from Sunovion, non-financial support from TEVA, grants from Sanofi, personal fees from Boehringer Ingelheim, non-financial support from TEVA Specialty Pharmaceuticals, personal fees from Sanofi, personal fees from Merck, outside the submitted work;

Evaluation and Feedback



Section 1. Identifying Inform	nation		
Given Name (First Name) Bruce	2. Surname (Last Name) Levy		3. Date 29-September-2017
4. Are you the corresponding author?	Yes ✓ No	Corresponding Author's Na John V. Fahy	ame
5. Manuscript Title LINK BETWEEN MUCUS PLUGS, EOSINO	PHILIA AND AIRFLOW OBS	STRUCTION IN ASTHMA	
6. Manuscript Identifying Number (if you kr 95693-JCI-CMED-RV-2	now it)		
Section 2. The Work Under Co	onsideration for Public	cation	
Did you or your institution at any time receany aspect of the submitted work (including statistical analysis, etc.)? Are there any relevant conflicts of interesting the statistical analysis, etc.)? If yes, please fill out the appropriate information in the statistical analysis, etc.)? Name of Institution/Company Belowert financial.	est? Yes No ormation below. If you have g the "X" button. Grant? Personal Fees? S	re more than one entity pre	esign, manuscript preparation,
Relevant financial	activities outside the s	submitted work.	
Place a check in the appropriate boxes i of compensation) with entities as descriclicking the "Add +" box. You should repart there any relevant conflicts of interest.	bed in the instructions. Us port relationships that wer	se one line for each entity; a	add as many lines as you need by
Section 4. Intellectual Proper	ty Patents & Copyrig	Jhts	
Do you have any patents, whether plans	ned, pending or issued, br	oadly relevant to the work?	? ☐ Yes 🗸 No



Section 5.	Relationships not covered above
	er relationships or activities that readers could perceive to have influenced, or that give the appearance of fluencing, what you wrote in the submitted work?
	elationships/conditions/circumstances are present (explain below):
	manuscript acceptance, journals will ask authors to confirm and, if necessary, update their disclosure statements. ournals may ask authors to disclose further information about reported relationships.
Section 6.	Disclosure Statement
Based on the a below.	above disclosures, this form will automatically generate a disclosure statement, which will appear in the box
Dr. Levy repor	rts grants from NIH, during the conduct of the study; .

Evaluation and Feedback



Section 1. Identifying Inform	ation		
Given Name (First Name) Serpil	2. Surname (Last Name) Erzurum		. Date 9-September-2017
4. Are you the corresponding author?	Yes ✓ No	Corresponding Author's Name John Fahy	
5. Manuscript Title Link between mucus plugs, eosinophilia	a and airflow obstruction in	n asthma	
6. Manuscript Identifying Number (if you kn 95693-JCI-CMED-RV-2	ow it)		
Section 2. The Work Under Co	onsideration for Public	ation	
Did you or your institution at any time receivany aspect of the submitted work (including statistical analysis, etc.)? Are there any relevant conflicts of intere If yes, please fill out the appropriate info Excess rows can be removed by pressing Name of Institution/Company lational Institutes of Health	st? Yes No rmation below. If you have the "X" button.	e more than one entity press to the commercial properties of the commercial c	n, manuscript preparation, the "ADD" button to add a row.
Place a check in the appropriate boxes in of compensation) with entities as described clicking the "Add +" box. You should report there any relevant conflicts of interests.	n the table to indicate whe bed in the instructions. Use ort relationships that were	ther you have financial relatic one line for each entity; add	as many lines as you need by
Section 4. Intellectual Property			
Do you have any patents, whether plann	y Patents & Copyrigl ed, pending or issued, bro		Yes 🗸 No



Section 5.	Relationships not covered above
Are there other r potentially influe	elationships or activities that readers could perceive to have influenced, or that give the appearance of encing, what you wrote in the submitted work?
✓ Yes, the follo	wing relationships/conditions/circumstances are present (explain below):
No other rela	tionships/conditions/circumstances that present a potential conflict of interest
Chair of the ABIA	A Pulmonary Disease Board.
	anuscript acceptance, journals will ask authors to confirm and, if necessary, update their disclosure statements rnals may ask authors to disclose further information about reported relationships.
Section 6.	Disclosure Statement
Based on the abo below.	ve disclosures, this form will automatically generate a disclosure statement, which will appear in the box
Dr. Erzurum repo Pulmonary Disea	orts grants from National Institutes of Health, during the conduct of the study; and Chair of the ABIM se Board

Evaluation and Feedback



Section 1. Identifying Inform	nation				
Given Name (First Name) Sally	2. Surnar Wenzel	me (Last Name	e)		3. Date 27-September-2017
4. Are you the corresponding author?	Yes	✓ No	Correspond John Fahy		nor's Name
5. Manuscript Title LINKS BETWEEN MUCUS PLUGS, EOSIN	OPHILIA AN	ND AIRFLOW	OBSTRUCTION	IN ASTH	IMA
6. Manuscript Identifying Number (if you k 95693-JCI-CMED-RV-2	now it)				
Section 2. The Work Under C	onsidera	tion for Pul	blication		
any aspect of the submitted work (including statistical analysis, etc.)? Are there any relevant conflicts of inter If yes, please fill out the appropriate inf Excess rows can be removed by pressin Name of Institution/Company	est? 🕡 \	Yes Notelow. If you lutton.	o have more than Non-Financial		ity press the "ADD" button to add a row
		Fees?	Support?		
straZeneca	✓	✓			Anti IL-5R
SK	✓	✓			Anti-IL5
nofi Aventis	✓	✓			Anti-IL4Ra
ovartis	✓	✓			anti-CRTH2
enentech	✓	\checkmark			general and anti-IL13
Section 3.					
Relevant financial	activities	outside th	e submitted v	work.	
	ibed in the	instructions.	. Use one line fo	r each e	cial relationships (regardless of amount ntity; add as many lines as you need by
Are there any relevant conflicts of intere				anny th	e 30 months prior to publication.
If yes, please fill out the appropriate info	ormation b	elow.			



Name of Entity	Grant? Personal Fees?	Non-Financial Oti	her? Comments	
Merck			general consulting	
Boehringer Ingelheim	V		Anti IL23	
Section 4. Intellectual Proper	rty Patents & Co	pyrights		
Do you have any patents, whether plan	ned, pending or issue	ed, broadly relevant to	the work? Yes	No
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 Stateme	ent			
Based on the above disclosures, this form below.		generate a disclosure	statement, which will appe	ear in the box
Dr. Wenzel reports grants and personal fees from Sanofi Aventis, grants and pe conduct of the study; personal fees fron submitted work;.	ersonal fees from Nov	artis , grants and pers	onal fees from Genentech	, during the



Section 1. Identifying Inform	nation	
Given Name (First Name) Deborah	2. Surname (Last Name) Meyers	3. Date 29-September-2017
4. Are you the corresponding author?	✓ Yes No	
5. Manuscript Title LINK BETWEEN MUCUS PLUGS, EOSING	DPHILIA AND AIRFLOW OBSTRUCTION IN ASTHMA	
6. Manuscript Identifying Number (if you k 95693-JCI-CMED-RV-2	now it)	
Section 2. The Work Under C	onsideration for Publication	
any aspect of the submitted work (including statistical analysis, etc.)? Are there any relevant conflicts of inter	eive payment or services from a third party (government, g but not limited to grants, data monitoring board, study est? Yes V No	
Section 3. Relevant financial	activities outside the submitted work.	
of compensation) with entities as descr	in the table to indicate whether you have financial ribed in the instructions. Use one line for each entity port relationships that were present during the 36 est? Yes Y	y; add as many lines as you need by
Section 4. Intellectual Prope	rty Patents & Copyrights	
	ned, pending or issued, broadly relevant to the wor	rk? Yes 🗸 No



Section 5.	Relationships not covered above		
	relationships or activities that readers could perceive to have influenced, or that give the appearance of encing, what you wrote in the submitted work?		
	wing relationships/conditions/circumstances are present (explain below):		
✓ No other rela	tionships/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.			
Section 6.	Disclosure Statement		
Based on the abo below.	ove disclosures, this form will automatically generate a disclosure statement, which will appear in the box		
Dr. Meyers has n	othing to disclose.		

Evaluation and Feedback

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



Section 1. Identifying Inform		
Identifying Inform	ation	
 Given Name (First Name) Eugene 	2. Surname (Last Name) Bleecker	3. Date 29-September-2017
4. Are you the corresponding author?	✓ Yes No	
5. Manuscript Title LINK BETWEEN MUCUS PLUGS, EOSINOI	PHILIA AND AIRFLOW OBSTRUCTIC	N IN ASTHMA
6. Manuscript Identifying Number (if you kn 95693-JCI-CMED-RV-2	ow it)	
Section 2. The Work Under Co	onsideration for Publication	
	but not limited to grants, data monito	rty (government, commercial, private foundation, etc.) for ring board, study design, manuscript preparation,
Section 3. Relevant financial a	activities outside the submitte	ed work.
of compensation) with entities as describ	oed in the instructions. Use one line ort relationships that were presen	have financial relationships (regardless of amount e for each entity; add as many lines as you need by t during the 36 months prior to publication.
Section 4. Intellectual Propert	ty Patents & Copyrights	
Do you have any patents, whether plann		evant to the work? Yes V No



Section 5.	
Section 5.	Relationships not covered above
	elationships or activities that readers could perceive to have influenced, or that give the appearance of encing, what you wrote in the submitted work?
Yes, the follow	wing relationships/conditions/circumstances are present (explain below):
✓ No other rela	tionships/conditions/circumstances that present a potential conflict of interest
	anuscript acceptance, journals will ask authors to confirm and, if necessary, update their disclosure statements. rnals may ask authors to disclose further information about reported relationships.
Section 6.	
Section 6.	Disclosure Statement
Based on the abo below.	we disclosures, this form will automatically generate a disclosure statement, which will appear in the box
Dr. Bleecker has i	nothing to disclose.

Evaluation and Feedback



Section 1. Identifying Inform	nation	
1. Given Name (First Name) Brenda	2. Surname (Last Name) Phillips	3. Date 02-October-2017
4. Are you the corresponding author?	☐ Yes 🗸 No	Corresponding Author's Name John V. Fahy
5. Manuscript Title LINK BETWEEN MUCUS PLUGS, EOSINO	PHILIA AND AIRFLOW OBS	STRUCTION IN ASTHMA
6. Manuscript Identifying Number (if you kr 95693-JCI-CMED-RV-2	now it)	
Section 2. The Work Under Co	onsideration for Public	cation
	but not limited to grants, da	a third party (government, commercial, private foundation, etc.) for ata monitoring board, study design, manuscript preparation,
Section 3. Relevant financial	activities outside the s	submitted work.
of compensation) with entities as descri	bed in the instructions. Us port relationships that wer	ether you have financial relationships (regardless of amount se one line for each entity; add as many lines as you need by re present during the 36 months prior to publication .
Section 4. Intellectual Proper	ty Patents & Copyrig	hts
Do you have any patents, whether plann	ned, pending or issued, bro	oadly relevant to the work? Yes V No



Section 5.	Relationships not covered above
	relationships or activities that readers could perceive to have influenced, or that give the appearance of encing, what you wrote in the submitted work?
Yes, the follo	wing relationships/conditions/circumstances are present (explain below):
✓ No other rela	ationships/conditions/circumstances that present a potential conflict of interest
	anuscript acceptance, journals will ask authors to confirm and, if necessary, update their disclosure statements Irnals may ask authors to disclose further information about reported relationships.
Section 6.	Disclosure Statement
Based on the abo	ove disclosures, this form will automatically generate a disclosure statement, which will appear in the box
Ms. Phillips has r	nothing to disclose.

Evaluation and Feedback



Section 1. Identifying Inform	nation	
Given Name (First Name) david	2. Surname (Last Name) Mauger	3. Date 27-September-2017
4. Are you the corresponding author?	☐ Yes ✓ No	Corresponding Author's Name John Fahy
5. Manuscript Title LINK BETWEEN MUCUS PLUGS, EOSINC	PHILIA AND AIRFLOW OF	BSTRUCTION IN ASTHMA
6. Manuscript Identifying Number (if you k 95693-JCI-CMED-RV-2	now it)	
Section 2. The Work Under C	onsideration for Publ	lication
	g but not limited to grants, o	om a third party (government, commercial, private foundation, etc.) for data monitoring board, study design, manuscript preparation,
If yes, please fill out the appropriate infe Excess rows can be removed by pressin		ave more than one entity press the "ADD" button to add a row.
Name of Institution/Company	Grant? Personal No	on-Financial Support? Comments
IHLBI	✓	NHLBI funds the SARP
Section 3. Relevant financial	activities outside the	submitted work.
Place a check in the appropriate boxes of compensation) with entities as descr	in the table to indicate wh ibed in the instructions. Upport relationships that we	whether you have financial relationships (regardless of amount Use one line for each entity; add as many lines as you need by ere present during the 36 months prior to publication .
Section 4. Intellectual Proper		
	ty Patents & Copyri	ights
Do you have any patents, whether plan		



Section 5.	Relationships not covered above				
	relationships or activities that readers could perceive to have influenced, or that give the appearance of encing, 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				
	anuscript acceptance, journals will ask authors to confirm and, if necessary, update their disclosure statements. rnals may ask authors to disclose further information about reported relationships.				
Section 6.	Disclosure Statement				
Based on the abo below.	ove disclosures, this form will automatically generate a disclosure statement, which will appear in the box				
Dr. Mauger repo	rts grants from NHLBI, during the conduct of the study; .				

Evaluation and Feedback

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



Section 1. Identifying Information	ation				
Given Name (First Name) Erin	2. Surname (Last Name) Gordon	3. Date 27-September-2017			
4. Are you the corresponding author?	Yes ✓ No	Corresponding Author's Name John Fahy			
5. Manuscript Title Link between mucus plugs, eosinophilia and airflow obstruction in asthma					
6. Manuscript Identifying Number (if you kno 95693-JCI-CMED-RV-2	ow it)				
Continu 2					
Section 2. The Work Under Co	nsideration for Public	cation			
	but not limited to grants, da	a third party (government, commercial, private foundation, etc.) for ta monitoring board, study design, manuscript preparation,			
Section 3. Relevant financial a	ctivities outside the s	submitted work.			
Place a check in the appropriate boxes in of compensation) with entities as describ	n the table to indicate who need in the instructions. Us ort relationships that wer	ether you have financial relationships (regardless of amount se one line for each entity; add as many lines as you need by e present during the 36 months prior to publication .			
Section 4. Intellectual Property	n. Datanta & Camunia	.h.c.			
Intellectual Propert	y Patents & Copyrig	ints			
Do you have any patents, whether plann	ed, pending or issued, br	oadly relevant to the work? Yes V No			



	Section 5.	Relationships not covered above			
		elationships or activities that readers could perceive to have influenced, or that give the appearance of encing, 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					
		anuscript acceptance, journals will ask authors to confirm and, if necessary, update their disclosure statements. rnals may ask authors to disclose further information about reported relationships.			
	Section 6.	Disclosure Statement			
	Based on the abo below.	ove disclosures, this form will automatically generate a disclosure statement, which will appear in the box			
	Dr. Gordon has n	nothing to disclose.			

Evaluation and Feedback



Section 1. Identifying Inform	nation				
Given Name (First Name) Prescott	2. Surna Woodru	me (Last Name) ff)		3. Date 29-September-2017
4. Are you the corresponding author?	Yes	✓ No	Correspond John V. Fa	ding Author's Nar hy	ne
5. Manuscript Title LINK BETWEEN MUCUS PLUGS, EOSINC	PHILIA AN	D AIRFLOW O	BSTRUCTION I	N ASTHMA	
6. Manuscript Identifying Number (if you k 95693-JCI-CMED-RV-2	now it)				
Section 2. The Work Under C	onsidera	tion for Pub	lication		
Did you or your institution at any time rece any aspect of the submitted work (including statistical analysis, etc.)? Are there any relevant conflicts of inter-	g but not lin	nited to grants, Yes ✓ No	data monitoring	board, study des	
Section 3. Relevant financial	activities	outside the	e submitted	work.	
Place a check in the appropriate boxes of compensation) with entities as descr clicking the "Add +" box. You should re Are there any relevant conflicts of interesting the second of the	ibed in the port relation est?	instructions. Inships that were noted to the work of the No	Use one line fo ere present d	r each entity; ac	ld as many lines as you need by
Name of Entity	Grant?	Personal N	on-Financial Support?	Other? Com	ments
heravance		V		Consul	ting
sstra Zeneca		\checkmark		Consul	ting
anofi		✓		Consul	ting
egeneron		\checkmark		Consul	ting
enentech		\checkmark		Consul	ting
lovartis		\checkmark		Consul	ting
anssen		✓		Consul	ting

Woodruff



Section 4. Intellectual Property Patents & Copyrights
Do you have any patents, whether planned, pending or issued, broadly relevant to the work? Yes Vo
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. Woodruff reports personal fees from Theravance, personal fees from Astra Zeneca, personal fees from Sanofi, personal fees from Regeneron, personal fees from Genentech, personal fees from Novartis, personal fees from Janssen, outside the submitted work; .

Evaluation and Feedback



Section 1. Identifying Inform	mation		
Given Name (First Name) Michael	2. Surname (Last Name) Peters	3. Date 29-September-2017	
4. Are you the corresponding author?	☐ Yes ✓ No	Corresponding Author's Name John Fahy	
5. Manuscript Title LINK BETWEEN MUCUS PLUGS, EOSING	DPHILIA AND AIRFLOW OBS	STRUCTION IN ASTHMA	
6. Manuscript Identifying Number (if you k 95693-JCI-CMED-RV-2	now it)		
Section 2. The Work Under C			
The Work Under C	onsideration for Public	cation	
	g but not limited to grants, da	n a third party (government, commercial, private foundation, etc.) ata monitoring board, study design, manuscript preparation,) for
Section 3. Relevant financial	activities outside the s	submitted work.	
of compensation) with entities as descr	ribed in the instructions. Us port relationships that wer est?	nether you have financial relationships (regardless of amou se one line for each entity; add as many lines as you need b re present during the 36 months prior to publication .	
Name of Entity	Grant	on-Financial Other? Comments	
Merck		Advisory Board	
Genentech		Speaker	
Amgen		Speaker	
Section 4. Intellectual Proper	rty Patents & Copyrig	ahts	363
Do you have any patents, whether plan			

Peters



Castian F	
Section 5.	Relationships not covered above
	relationships or activities that readers could perceive to have influenced, or that give the appearance of encing, what you wrote in the submitted work?
Yes, the follo	wing relationships/conditions/circumstances are present (explain below):
✓ No other rela	ationships/conditions/circumstances that present a potential conflict of interest
	anuscript acceptance, journals will ask authors to confirm and, if necessary, update their disclosure statements Irnals may ask authors to disclose further information about reported relationships.
Section 6.	Disclosure Statement
Based on the abo below.	ove disclosures, this form will automatically generate a disclosure statement, which will appear in the box
Dr. Peters report submitted work	ts personal fees from Merck, personal fees from Genentech, personal fees from Amgen, outside the ; .

Evaluation and Feedback



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 four parts.

1. Identifying information.

Enter your full name. If you are NOT the corresponding author please check the box "no" and a space to enter the name of the corresponding author in the space that appears. Provide the requested manuscript information. Double-check the manuscript number and enter it.

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". The complete the appropriate boxes to indicate the type of support and whether the payment went to you, or to your institution, or both.

3. 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.

4. 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.



Section 1. Identifying Info	rmation	
1. Given Name (First Name) John	2. Surname (Last Name) Fahy	3. Effective Date (07-August-2008) 28-September-2017
4. Are you the corresponding author?	✓ Yes No	
5. Manuscript Title Links between mucus plugs, eosinop I 6. Manuscript Identifying Number (if you 95693-JCI-CMED-RV-2	philia and airflow obstruction in asthma	

Section 2. 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...)?

Complete each row by checking "No" or providing the requested information. If you have more than one relationship click the "Add" button to add a row. Excess rows can be removed by clicking the "X" button.

		Money	Money to		A property and the plants of the party of	
Туре	No	Paid to You	Your Institution*	Name of Entity	Comments**	
. Grant			✓	NIH	Research Grants	×
						AD
2. Consulting fee or honorarium	1					×
						AD
3. Support for travel to meetings for the study or other purposes	✓					×
the study or other purposes			_			AD
I. Fees for participation in review						
activities such as data monitoring	✓					>
boards, statistical analysis, end point committees, and the like						
						AD
. Payment for writing or reviewing	✓					×
the manuscript	•					AD
i. Provision of writing assistance,						AL
medicines, equipment, or	✓					>
administrative support						



The Work Under Conside	eration for Pub	lication				
Туре	No	Money Paid to You	Money to Your Institution*	Name of Entity	Comments**	
						ADD
7. Other	\checkmark					×
						ADD

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 submission.

Complete each row by checking "No" or providing the requested information. If you have more than one relationship click the "Add" button to add a row. Excess rows can be removed by clicking the "X" button.

Relevant financial activities out	tside the	e submit	ted work			
Type of Relationship (in alphabetical order)	No	Money Paid to You	Money to Your Institution*	Entity	Comments	
1. Board membership	✓					×
						ADD
2. Consultancy		✓		Boehringer Ingelheim	Consulting, <5000	×
2. Consultancy		\checkmark		Dynavax	Consulting, < 5000	×
2. Consultancy		\checkmark		Medimmune	Consulting, < 5000	×
2. Consultancy		\checkmark		Theravance	Consulting < 5000	×
2. Consultancy		\checkmark		Pieris	Consulting < 5000	×
2. Consultancy				Entrinsic Health Solutions	Consulting < 5000	×
3. Employment	✓					× ADD
4. Expert testimony	✓					×

^{*} This means money that your institution received for your efforts on this study.

^{**} Use this section to provide any needed explanation.



Relevant financial activitie	es outside the	submit	ted work			
Type of Relationship (in alphabetical order)	No	Money Paid to You	Money to Your Institution*	Entity	Comments	
5. Grants/grants pending			1	NHLBI	~ \$2MM annually	×
5. Grants/grants pending			✓	Pfizer	~ \$300,000 annually	×
5. Grants/grants pending			✓	Genentech	~50,000 anually	×
5. Grants/grants pending			✓	Vitaeris	~\$50,000	×
Payment for lectures include service on speakers bureau						ADD X
7. Payment for manuscript preparation	V					ADD ×
8. Patents (planned, pending issued)	or		V	Named inventor on a patent describing biomarkers of Th2 high asthma Named inventor on a	No income	× ×
8. Patents (planned, pending issued)	or		/	patent describing thiol modified carbohydrate compounds as novel mucolytic drugs. Named inventor on a	No income	×
8. Patents (planned, pending issued)	or		/	patent describing a mucus plug scoring system in MDCT lung images as a method for quantifying mucus plugs in asthma and other airway diseases.		×
9. Royalties	✓					X ADD
Payment for development of educational presentations	of 🗸					×
11. Stock/stock options	✓					X ADD



 Travel/accommodations/ meeting expenses unrelated to activities listed** 	/		×
13. Other (err on the side of full disclosure)			ADD ×
* This means money that your institution ** For example, if you report a consultance		I related to that consultancy on this line.	ADD
Section 4. Other relationsh			
potentially influencing, what you wro	te in the submitted work?	ave influenced, or that give the appearance of	
✓ No other relationships/conditions Yes, the following relationships/co	/circumstances that present a poten onditions/circumstances are present		
At the time of manuscript acceptance On occasion, journals may ask authors		n and, if necessary, update their disclosure state out reported relationships.	ments.
Hide All Tab	le Rows Checked 'No'	SAVE	

Evaluation and Feedback

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