

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.

🔣 Identifying information.

The work under consideration for publication.

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Relevant financial activities outside the submitted work.

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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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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



Section 1. Identifying Inform	mation		
Given Name (First Name) Lutz	2. Surname (Last Name) Beckert		3. Date 19-March-2019
4. Are you the corresponding author?	Yes ✓ No	Corresponding Auth	or's Name
5. Manuscript Title Phase 1 dose-escalation trial of intraple complicated parapneumonic effusions		rokinase plasminoge	n activator/scuPA) in patients with
6. Manuscript Identifying Number (if you k 127470-INS-CMED-TR-2	snow it)		
Section 2. The Work Under C	Consideration for Publi	cation	AND THE PARTY NAMED AND
	eive payment or services from g but not limited to grants, da	a third party (governm	ent, commercial, private foundation, etc.) for tudy design, manuscript preparation,
If yes, please fill out the appropriate in Excess rows can be removed by pressing		e more than one ent	ity press the "ADD" button to add a row.
Name of Institution/Company	Giant	n-Financial Other?	Comments
ung Therapeutics, Inc. (LTI)		V	a) Lung Therapeutics, Inc. (LTI) provided funding for preparation of the drug product and for the trial. b) As the trial side we received cost reimbursement for each patient recruited.
Section 3. Relevant financial	activities outside the s	submitted work.	
	ribed in the instructions. Use port relationships that we	se one line for each e	cial relationships (regardless of amount ntity; add as many lines as you need by e 36 months prior to publication.

Beckert 2



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. Beckert reports non-financial support and other from Lung Therapeutics, Inc. (LTI), during the conduct of the study;

Evaluation and Feedback

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



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Brockway 1



Section 1. Identifying Inform	nation	
1. Given Name (First Name) Ben	2. Surname (Last Name) Brockway	3. Date 25-March-2019
4. Are you the corresponding author?	Yes 🗸 No	Corresponding Author's Name Steven Idell
complicated parapneumonic effusions	(CPE) or empyema	rokinase plasminogen activator/scuPA) in patients with
6. Manuscript Identifying Number (if you kr JCI Insight reference 127470-INS-CMED		
Section 2. The Work Under C	onsideration for Public	ration
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	ive payment or services from y but not limited to grants, da	a third party (government, commercial, private foundation, etc.) for ita monitoring board, study design, manuscript preparation,
Section 3. Relevant financial	activities outside the s	submitted work.
of compensation) with entities as descr	ibed 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	rty Patents & Copyri	ghts and the same of the same
Do you have any patents, whether plan	ned, pending or issued, br	oadly relevant to the work? Yes Vo

Brockway 2



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Based on the abo	ove disclosures, this form will automatically generate a disclosure statement, which will appear in the box
Dr. Brockway ha	s nothing to disclose.

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Simpson 1



Section 1. Identifying Inform	ation	
1. Given Name (First Name) Graham	2. Surname (Last Name) Simpson	3. Date 19-March-2019
4. Are you the corresponding author?	Yes ✓ No	Corresponding Author's Name Steve Idell
5. Manuscript Title : Phase 1 dose-escalation trial of intraple complicated parapneumonic effusions (6. Manuscript Identifying Number (if you kn ———————————————————————————————————	CPE) or empyema (our ref	rokinase plasminogen activator/scuPA) in patients with erence 127470-INS-CMED-TR-2)
Section 2. The Work Under Co	onsideration for Public	ation
	but not limited to grants, dat	a third party (government, commercial, private foundation, etc.) for a monitoring board, study design, manuscript preparation,
Section 3. Relevant financial a	activities outside the s	ubmitted work.
of compensation) with entities as descri	bed 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 Proper	ty Patents & Copyrig	hts
Do you have any patents, whether plann	ned, pending or issued, bro	padly relevant to the work? Yes Vo



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Section 6.	Disclosure Statement
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Dr. Simpson 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

Southcott



Section 1. Identifying Inform	nation	
1. Given Name (First Name) Anne Marie	2. Surname (Last Name) Southcott	3. Date 19-March-2019
4. Are you the corresponding author?	Yes ✓ No	Corresponding Author's Name Steven Idell
 Manuscript Title Phase 1 dose-escalation trial of intraple complicated parapneumonic effusions Manuscript Identifying Number (if you kr 127470-INS-CMED-TR-2 	(CPE) or empyema	okinase plasminogen activator/scuPA) in patients with
	Managaran beggi gara	•
Section 2. The Work Under Co	onsideration for Public	ation
	but not limited to grants, da	a third party (government, commercial, private foundation, etc.) for ta monitoring board, study design, manuscript preparation,
If yes, please fill out the appropriate info Excess rows can be removed by pressin		e more than one entity press the "ADD" button to add a row.
Name of Institution/Company	Grant	o-Financial Other? Comments
CNS (Study sponsor)	✓	Payment to site to conduct study - set up and close out costs. Total AUD 6159.23
Section 3. Relevant financial	activities outside the s	ubmitted work.
of compensation) with entities as descri	bed in the instructions. Us port 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 Proper	ty Patents & Copyrig	hts
Do you have any patents, whether plan	ned, pending or issued, br	padly relevant to the work? Yes No

Southcott 2



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Dr. Southcott reports grants from CNS (Study sponsor), during the conduct of the study; .

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YC Gary



Section 1. Identifying Infor	mation	
1. Given Name (First Name) Lee	2. Surname (Last Nam YC Gary	ne) 3. Date 27-March-2019
4. Are you the corresponding author?	Yes No	Corresponding Author's Name Steven Idell
5. Manuscript Title Phase 1 dose-escalation trial of intrap complicated parapneumonic effusion 6. Manuscript Identifying Number (if you CI Insight reference 127470-INS-CME	s (CPE) or empyema know it)	in urokinase plasminogen activator/scuPA) in patients with
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any aspect of the submitted work (including statistical analysis, etc.)? Are there any relevant conflicts of inte	ng but not limited to grant	from a third party (government, commercial, private foundation, etc.) f is, data monitoring board, study design, manuscript preparation, No
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of compensation) with entities as desc	cribed in the instructions eport relationships that rest?	whether you have financial relationships (regardless of amoun s. Use one line for each entity; add as many lines as you need by were present during the 36 months prior to publication . lo
Name of Entity	Grant? Personal Fees?	Non-Financial Other? Comments
ocket Ltd		Dr Lee has led clinical trials for which Rocket Ltd provided pleural drainage kits for patients without charge.
CareFusion/BD		✓ Advisor
Section 4. Intellectual Prope	erty Patents & Cop	yrights
Do you have any patents, whether pla		

YC Gary



Section 5.	
Section 5.	Relationships not covered above
	elationships or activities that readers could perceive to have influenced, or that give the appearance of ncing, what you wrote in the submitted work?
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Unpaid advisor to	DLTI.
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Dr. YC Gary repo LTi.	rts other from Rocket Ltd , other from CareFusion/BD, outside the submitted work; and Unpaid advisor to

Evaluation and Feedback

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earning royalties of not

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

Rahman

1



Section 1. Identifying Inform	nation		33
1. Given Name (First Name) Najib	2. Surname (Last Name) Rahman	3. Date 22-March-2019	of make in . 1984
4. Are you the corresponding author?	☐ Yes 🗸 No	Corresponding Author's Name	
 5. Manuscript Title Phase 1 dose-escalation trial of intraple complicated parapneumonic effusions 6. Manuscript Identifying Number (if you keep) 	(CPE) or empyema	rokinase plasminogen activator/scuPA) in patients with	
Section 2. The Work Under C	onsideration for Public	cation	
any aspect of the submitted work (includin statistical analysis, etc.)? Are there any relevant conflicts of inter	g but not limited to grants, da	a third party (government, commercial, private foundation, etc ata monitoring board, study design, manuscript preparation,	c.) for
Section 3. Relevant financial	activities outside the s	submitted work.	31
of compensation) with entities as descr	ibed in the instructions. Us port relationships that wer est?	ether you have financial relationships (regardless of amo se one line for each entity; add as many lines as you need re present during the 36 months prior to publication .	d by
Name of Entity	Grant	n-Financial Other? Comments	
ung Therapeutics USA			
Section 4. Intellectual Prope	rty Patents & Copyrig	ghts	
Do you have any patents, whether plan	ned, pending or issued, br	oadly relevant to the work? Yes V No	

Rahman 2



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. rnals 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
Dr. Rahman repo	orts personal fees from Lung Therapeutics USA, outside the submitted work;

Evaluation and Feedback

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Instructions

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Relevant financial activities outside the submitted work.

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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.

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.

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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

Light



Section 1. Identifying Inform	nation	
1. Given Name (First Name) Richard	2. Surname (Last Name) Light	3. Date 25-March-2019
4. Are you the corresponding author?	Yes ✓ No	Corresponding Author's Name Steven Idell
 5. Manuscript Title Phase 1 dose-escalation trial of intraple complicated parapneumonic effusions 6. Manuscript Identifying Number (if you known in the properties) JCI Insight reference 127470-INS-CMED 	(CPE) or empyema now it)	rokinase plasminogen activator/scuPA) in patients with
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	ibed in the instructions. Use 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	rty Patents & Copyrig	ghts
Do you have any patents, whether plant	ned, pending or issued, br	roadly relevant to the work? Yes 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 follo	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.	Disclosure Statement
Based on the abo below.	ove disclosures, this form will automatically generate a disclosure statement, which will appear in the box
Dr. Light has not	hing to disclose.

Evaluation and Feedback

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Instructions

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Intellectual Property.

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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

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



Section 1. Identifying Inform	ation	
Given Name (First Name) Steven	2. Surname (Last Name) Shoemaker	3. Date 18-March-2019
4. Are you the corresponding author?	Yes ✓ No	Corresponding Author's Name Steven Idell
5. Manuscript Title Phase 1 dose-escalation trial of intraple complicated parapneumonic effusions		okinase plasminogen activator/scuPA) in patients with
6. Manuscript Identifying Number (if you kn	ow it)	
Section 2. The Work Under Co	onsideration for Public	ration
Did you or your institution at any time recei	ve payment or services from	a third party (government, commercial, private foundation, etc.) for ta monitoring board, study design, manuscript preparation,
Are there any relevant conflicts of intere		e more than one entity press the "ADD" button to add a row.
Excess rows can be removed by pressing	the "X" button.	e more than one entity press the NDD suiton to add a row.
Name of Institution/Company	Grant	o-Financial Other? Comments
ung Therapeutics, Inc.		
Section 3. Relevant financial	activities outside the s	ubmitted work.
of compensation) with entities as descril	bed 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 intere		
If yes, please fill out the appropriate info	rmation below.	
Name of Entity	Giailt	-Financial Other? Comments
ung Therapeutics, Inc		

Shoemaker 2



Section 4. Intellectual Property Patents & Copyrights
Do you have any patents, whether planned, pending or issued, broadly relevant to the work? Yes Vo
Continue E
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
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Dr. Shoemaker reports personal fees from Lung Therapeutics, Inc., during the conduct of the study; personal fees from Lung Therapeutics, Inc, outside the submitted work;

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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

Gillies 1



Section 1.			
Identifying Information			
1. Given Name (First Name) 2. Su john Gillie	urname (Last Name) es		3. Date 20-March-2019
4. Are you the corresponding author?	∕es ✓ No	Corresponding Author's Nam Steven Idell	e
5. Manuscript Title Phase 1 dose escalation trial of intrapleural LT complicated parapneumonnic effusions (CPE)	T-01 (single chain uro or empyema	kinase plasminogen activat	or/scuPA in patients with
6. Manuscript Identifying Number (if you know it) 127470-INS-CMED-TR-2	- 1		
Section 2			
Section 2. The Work Under Consider	eration for Publica	tion	
Did you or your institution at any time receive payr any aspect of the submitted work (including but no statistical analysis, etc.)? Are there any relevant conflicts of interest?	ment or services from a of limited to grants, data	third party (government, com monitoring board, study desi	mercial, private foundation, etc.) for gn, manuscript preparation,
If yes, please fill out the appropriate information Excess rows can be removed by pressing the "X	on below. If you have	more than one entity press	the "ADD" button to add a row.
Name of Institution/Company Gran	TLS	Financial Other? Comr	nents
Clinical Netrwork Services		Salaried	employee
Section 3. Relevant financial activit	ties outside the su	bmitted work.	
Place a check in the appropriate boxes in the to of compensation) with entities as described in clicking the "Add +" box. You should report rela	the instructions. Use	one line for each entity; add	d as many lines as you need by
Are there any relevant conflicts of interest?	Yes ✓ No		
Section 4. Intellectual Property P	atents & Copyrigh	ts	
Do you have any patents, whether planned, pe			Yes ✓ No

Gillies



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 follo	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.	Disclosure Statement
Based on the abo	ove disclosures, this form will automatically generate a disclosure statement, which will appear in the box
Dr. Gillies report	s personal fees from Clinical Netrwork Services, during the conduct of the study; .

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Other: Anything not covered under the previous three boxes

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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

Komissarov



Section 1. Identifying Inform	ation	
1. Given Name (First Name) Andrey	2. Surname (Last Name) Komissarov	3. Date 19-March-2019
4. Are you the corresponding author?	Yes ✓ No	Corresponding Author's Name Steven Idell
5. Manuscript Title Phase 1 Dose-Escalation Trial of Intraple Complicated Parapneumonic Effusions		Urokinase Plasminogen Activator/scuPA) in Patients with
6. Manuscript Identifying Number (if you kn 127470-INS-CEMED-TR-2	ow it)	
Section 2. The Work Under Co	onsideration for Public	cation
		a third party (government, commercial, private foundation, etc.) for ata monitoring board, study design, manuscript preparation,
Are there any relevant conflicts of intered in the second of the second	ormation below. If you have	re more than one entity press the "ADD" button to add a row.
Excess rows can be removed by pressing Name of Institution/Company	S	n-Financial Other Comments
LTI, Inc		upport Ciner Comments
NIH, NHLBI		
Section 3. Relevant financial	activities outside the s	submitted work.
of compensation) with entities as descri clicking the "Add +" box. You should rep	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.
Are there any relevant conflicts of intere	est? Yes 🗸 No	
Section 4. Intellectual Proper	ty Patents & Copyric	ghts
Do you have any patents, whether plant If yes, please fill out the appropriate info Excess rows can be removed by pressing	rmation below. If you hav	roadly relevant to the work? Yes No re more than one entity press the "ADD" button to add a row.

Komissarov 2



Patent?	Pending?	Issued	Licensed ?	Royalties	Licensee?	Comments
US 10,175,255 B2		1				

The state of the s	
Section 5.	Relationships not covered above
	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

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

Dr. Komissarov reports grants from LTI, Inc, grants from NIH, NHLBI, during the conduct of the study; In addition, Dr. Komissarov has a patent US 10,175,255 B2 issued.

Evaluation and Feedback

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Komissarov



Instructions

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Relevant financial activities outside the submitted work.

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Relationships not covered above.

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



Section 1. Identifying Inform	ation	OKARA MANGALIN ALTERNATION
1. Given Name (First Name) Galina	2. Surname (Last Name) Florova	3. Date 19-March-2019
4. Are you the corresponding author?	Yes ✓ No	Corresponding Author's Name Steven Idell
5. Manuscript Title Phase 1 Dose-Escalation Trial of Intraple Complicated Parapneumonic Effusions	eural LTI-01 (Single Chain U (CPE) or Empyema	Jrokinase Plasminogen Activator/scuPA) in Patients with
6. Manuscript Identifying Number (if you kn 127470-INS-CEMED-TR-2	Contracting the contracting of the contracting	
Section 2. The Work Under Co	onsideration for Public	ration
Did you or your institution at any time recei any aspect of the submitted work (including statistical analysis, etc.)? Are there any relevant conflicts of intere If yes, please fill out the appropriate info	ve payment or services from a but not limited to grants, dat st? Yes No rmation below. If you have	a third party (government, commercial, private foundation, etc.) for ta monitoring board, study design, manuscript preparation, the more than one entity press the "ADD" button to add a row.
Excess rows can be removed by pressing Name of Institution/Company	Grant Personal Non	n-Financial Other? Comments
TI, Inc	/	
IIH, NHLBI	V	
Section 3. Relevant financial a	activities outside the su	ubmitted work.
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Florova



Patent?	Pending?	Issued	Licensed Roy	yalties?	Licensee?	Comments	
US 10,175,255 B2		1					

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. Florova reports grants from LTI, Inc, grants from NIH, NHLBI, during the conduct of the study; In addition, Dr. Florova has a patent US 10,175,255 B2 issued.

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	nation		
Given Name (First Name) Timothy	Surname (Last Name) Ochran	3. Date 19-March-2019	
4. Are you the corresponding author?	Yes No	Corresponding Author's Name Dr Idell	
5. Manuscript Title Phase 1 dose-escalation trial of intrapler complicated parapneumonic effusions 6. Manuscript Identifying Number (if you kn 127470-INS-CMED-TR-2	(CPE) or empyema	okinase plasminogen activator/scuPA in patie	ents with
Section 2. The Work Under Co	onsideration for Public	ation	
	but not limited to grants, dat	a third party (government, commercial, private fou a monitoring board, study design, manuscript pre	
Section 3. Relevant financial	activities outside the s	ubmitted work.	
of compensation) with entities as descri	bed in the instructions. Use ort relationships that were	ther you have financial relationships (regard) e one line for each entity; add as many lines a e present during the 36 months prior to pu	s you need by
Section 4.			
Intellectual Proper	ty Patents & Copyrig	hts	10 m
Do you have any patents, whether plans	ed, pending or issued, bro	eadly relevant to the work? Yes Ves Ver	>



Section 5. Polationships not sourced above					
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.					
l .					
Dr. Ochran has nothing to disclose.					

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Ochran 3



Section 1. Identifying Inform	nation				
1. Given Name (First Name) William	2. Surname (Last Name) Bradley		3. Date 21-March-2019		
4. Are you the corresponding author?	Yes ✓ No	Corresponding Author's Nat Dr Idell	me		
 Manuscript Title Phase 1 dose-escalation trial of intrapleural LTI-01 (single chain urokinase plasminogen activator/scuPA in patients with complicated parapneumonic effusions (CPE) or empyema Manuscript Identifying Number (if you know it) 127470-INS-CMED-TR-2 					
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 s	ubmitted work.	NET TO A YELL		
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 Yes					
Section 4. Intellectual Proper	ty Patents & Copyrig	hts			
Do you have any patents, whether planned, pending or issued, broadly relevant to the work? Yes Vo					



Cartinu C	
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.	Disclosure Statement
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Dr. Bradley has n	othing to disclose.

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Relevant financial activities outside the submitted work.

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Intellectual Property.

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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 **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

Ndetan



3-51-31-32-32-32-32-32-32-32-32-32-32-32-32-32-		
Section 1. Identifying Inform	mation	
1. Given Name (First Name) Harrison	2. Surname (Last Name) Ndetan	3. Date 25-March-2019
4. Are you the corresponding author?	Yes ✓ No	Corresponding Author's Name Dr. Steven Idell
complicated parapneumonic effusion:	s (CPE) or empyema	rokinase plasminogen activator/scuPA) in patients with
6. Manuscript Identifying Number (if you k JCI Insight reference 127470-INS-CMEI		
Section 2. The Week Heder		
The Work Under C	Consideration for Public	cation
	g but not limited to grants, da	a third party (government, commercial, private foundation, etc.) for ita monitoring board, study design, manuscript preparation,
Section 3. Relevant financia	l activities outside the s	submitted work.
of compensation) with entities as desc	ribed in the instructions. Us eport 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 se present during the 36 months prior to publication.
Section 4. Intellectual Prope	erty Patents & Copyrig	ghts
Do you have any patents, whether plan	nned, pending or issued, br	oadly relevant to the work? Yes No

Ndetan 2



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
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Dr. Ndetan has r	nothing to disclose.

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earning royalties or not

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



Section 1. Identifying Inform	nation	
1. Given Name (First Name) Karan	2. Surname (Last Name) Singh	3. Date 19-March-2019
4. Are you the corresponding author?	Yes ✓ No	Corresponding Author's Name Steven Idell, M. D., Ph.D.
Complicated Parapneumonic Effusions	(CPE) or Empyema	Urokinase Plasminogen Activator/scuPA) in Patients with
6. Manuscript Identifying Number (if you kr ms. 127470-INS-CMED-TR-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 ita monitoring board, study design, manuscript preparation,
Section 3. Relevant financial	activities outside the s	submitted work.
Place a check in the appropriate boxes i of compensation) with entities as descri	n the table to indicate whiled in the instructions. Use port relationships that werest?	ether you have financial relationships (regardless of amount se one line for each entity; add as many lines as you need by see present during the 36 months prior to publication.
Name of Entity	Grant	n-Financial Other? Comments
ung Therapeutics, Inc. (LTI)		Equity in the company.
Section 4. Intellectual Proper	ty Patents & Copyric	ghts
Do you have any patents, whether plans	ned, pending or issued, br	oadly relevant to the work? Yes V

Singh



Section 5. Polationships not revered above
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
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. Singh reports other from Lung Therapeutics, Inc. (LTI), outside the submitted work; .

Evaluation and Feedback



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

administrative support, etc.

Sarva



Section 1. Identifying Inform	nation		m
1. Given Name (First Name) Krishna	2. Surname (Last Name) Sarva	3. Date 25-March-2019	
4. Are you the corresponding author?	Yes ✓ No	Corresponding Author's Name Steven Idell	
complicated parapneumonic effusions	(CPE) or empyema	rokinase plasminogen activator/scuPA) in patients with	
Manuscript Identifying Number (if you kn JCI Insight reference 127470-INS-CMED			
Section 2. The Work Under Co	onsideration for Public	cation	
	but not limited to grants, da	a third party (government, commercial, private foundation, etc.) ata monitoring board, study design, manuscript preparation,	for
	ormation below. If you hav	ve more than one entity press the "ADD" button to add a ro	w.
Name of Institution/Company	Giant	n-Financial upport? Comments	
-Ti, Inc			
Sarking 2			
Section 3. Relevant financial	activities outside the s	ubmitted work.	
of compensation) with entities as descri clicking the "Add +" box. You should rep	bed in the instructions. Us port relationships that wer	ether you have financial relationships (regardless of amour se one line for each entity; add as many lines as you need b re present during the 36 months prior to publication .	
Are there any relevant conflicts of intere	est? Yes 🗸 No		
Section 4. Intellectual Proper	ty Patents & Copyrig	ahts	10
Do you have any patents, whether plans			

Sarva



Section 5.	Relationships not covered above
	elationships or activities that readers could perceive to have influenced, or that give the appearance of ncing, what you wrote in the submitted work?
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Sarva reports gra	ants from LTI, Inc, during the conduct of the study; .

Evaluation and Feedback



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earning royalties or not

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

patent



Section 1.				
Identifying Inform	nation			
Given Name (First Name) Steven	2. Surname (Last Name Idell	e)		3. Date 26-March-2019
4. Are you the corresponding author?	✓ Yes No			
 Manuscript Title Phase 1 dose-escalation trial of intraple complicated parapneumonic effusions Manuscript Identifying Number (if you known in the properties of the properties) JCI Insight reference 127470-INS-CMED 	(CPE) or empyema now it)	n urokinase plas	sminoger	n activator/scuPA) in patients with
Section 2. The Work Under C	onsideration for Pul	olication	7/15	
any aspect of the submitted work (including statistical analysis, etc.)? Are there any relevant conflicts of inter-	g but not limited to grants est? Yes No primation below. If you l	, data monitoring	board, st	ent, commercial, private foundation, etc.) for udy design, manuscript preparation, ty press the "ADD" button to add a row.
Name of Institution/Company	Grant? Personal Fees?	Non-Financial Support ?	Other?	Comments
				NIH SMARTT HHSN268201100014C (SI) provided funding of the manufacturing of the drug substance, toxicology studies and regulatory support, NIH UO-1 HL121841-01A1(SI) provided initial funding in preparation for the clinical trial.
Section 3. Relevant financial	activities outside th	e submitted v	work.	
Place a check in the appropriate boxes in of compensation) with entities as describled the "Add +" box. You should replace there any relevant conflicts of interesting the specific propriate info	ibed in the instructions. port relationships that vest? Yes	Use one line fo vere present d u	r each er	ntity; add as many lines as you need by

Idell 2



Name of Entity	Grant?	Personal Fees?	Non-Financial Support?	Other?	Comments
ung Therapeutics Inc.(LTI)					Dr. Idell serves as a Founder and Chief Scientific Officer of LTI and a member of the Board of Directors of LTI, which provided funding for preparation of the drug product and for the trial. He has an equity position (first tier COI) in the company, as does the University of Texas Horizon Fund and The University of Texas Health Science Center at Tyler (UTHSCT). He has a conflict of interest plan acknowledging and managing these declared conflicts of interest through The University of Texas Health Science Center at Tyler (UTHSCT) and UT System.

Section 4	
Section 4.	Intellectual Property Patents & Copyrights

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

Patent?	Pending?	Issued?	Licensed?	Royalties?	Licensee?	Comments
USPTO # 7332469		V	7	V	LTI	Dr. Idell is the inventor on a patent USPTO # 7332469 held by the UT Board of Regents and licensed to LTI. For the use of scuPA (LTI-01) in pleural injury. Royalties currently accrue to the institution.
USPTO # 10,175,255 B2		V				For the fibrinolytic potential; detectable fibrinolytic activity after PA supplementation of pleural fluids.

Idell 3



Company of the Compan	
Section 5.	Relationships not covered above
	lationships or activities that readers could perceive to have influenced, or that give the appearance of cing, what you wrote in the submitted work?
Yes, the follow	ring relationships/conditions/circumstances are present (explain below):
✓ No other relati	onships/conditions/circumstances that present a potential conflict of interest
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	rants from NIH, during the conduct of the study; other from Lung Therapeutics Inc.(LTI); In addition, Dr. USPTO # 7332469 with royalties paid to UTHSCT, and a patent USPTO # 10,175,255 B2 issued.

Evaluation and Feedback

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Idell 4