ICMJE Form for Disclosure of Potential Conflicts of Interest

Instructions

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## ICMJE Form for Disclosure of Potential Conflicts of Interest

### Section 1. Identifying Information

1. **Given Name (First Name)**
   - Jeffrey L

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

3. **Date**
   - 23-March-2018

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

5. **Manuscript Title**
   - Implementation of a Cardiac PET Stress Program: Comparison of Outcomes to the Preceding SPECT Era

6. **Manuscript Identifying Number (if you know it)**
   - 120949-INS-CMED-1

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

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**Are there any relevant conflicts of interest?**

- Yes  ☑ No

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Dr. Lappe has nothing to disclose.

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   Santanu

2. Surname (Last Name)  
   Biswas

3. Date  
   23-March-2018

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   [ ] Yes  [X] No  
   Corresponding Author’s Name  
   Kirk Knowlton

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

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

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

   **Corresponding Author’s Name**  
   Kirk Knowlton

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Section 1. Identifying Information

1. Given Name (First Name)  Jon-David
2. Surname (Last Name)  Ethington
3. Date  23-March-2018
4. Are you the corresponding author?  Yes  ✗ No  Corresponding Author’s Name  Kirk Knowlton

5. Manuscript Title
Implementation of a Cardiac PET Stress Program: Comparison of Outcomes to the Preceding SPECT Era

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Jon-David Ethington has nothing to disclose.

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## Section 1. Identifying Information

1. **Given Name (First Name)**
   - Kurt R

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

3. **Date**
   - 23-March-2018

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

   **Corresponding Author’s Name**
   - Kirk Knowlton

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

1. Given Name (First Name)  
   Stacey

2. Surname (Last Name)  
   Knight

3. Date  
   23-March-2018

4. Are you the corresponding author?  
   Yes ☑ No

   Corresponding Author’s Name  
   Kirk Knowlton

5. Manuscript Title  
   Implementation of a Cardiac PET Stress Program: Comparison of Outcomes to the Preceding SPECT Era

6. Manuscript Identifying Number (if you know it)  
   120949-INS-CMED-1

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Are there any relevant conflicts of interest?  
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   Yes ☐ No

Section 4. Intellectual Property -- Patents & Copyrights

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

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Dr. Knight has nothing to disclose.

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# ICMJE Form for Disclosure of Potential Conflicts of Interest

## Section 1. Identifying Information

<table>
<thead>
<tr>
<th>1. Given Name (First Name)</th>
<th>2. Surname (Last Name)</th>
<th>3. Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>Kirk</td>
<td>Knowlton</td>
<td>23-March-2018</td>
</tr>
</tbody>
</table>

4. Are you the corresponding author?  
   ✔ Yes  
   No

5. Manuscript Title
   Implementation of a Cardiac PET Stress Program: Comparison of Outcomes to the Preceding SPECT Era

6. Manuscript Identifying Number (if you know it)
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## Section 2. The Work Under Consideration for Publication

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

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

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)  Donald L
2. Surname (Last Name)  Lappe
3. Date  23-March-2018
4. Are you the corresponding author?  No
5. Manuscript Title  Implementation of a Cardiac PET Stress Program: Comparison of Outcomes to the Preceding SPECT Era
6. Manuscript Identifying Number (if you know it)  120949-INS-CMED-1

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Dr. Lappe has nothing to disclose.

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Section 1. Identifying Information

1. Given Name (First Name) Viet T
2. Surname (Last Name) Le
3. Date 23-March-2018
4. Are you the corresponding author? ☑ No

Corresponding Author’s Name
Kirk Knowlton

5. Manuscript Title
Implementation of a Cardiac PET Stress Program: Comparison of Outcomes to the Preceding SPECT Era

6. Manuscript Identifying Number (if you know it)
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1. Given Name (First Name)  
Steven M

2. Surname (Last Name)  
Mason

3. Date  
23-March-2018

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Kirk Knowlton

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Steve Mason has nothing to disclose.

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   Kent  
2. Surname (Last Name)  
   Meredith  
3. Date  
   23-March-2018  
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   Yes ☐ No ☑  
   Corresponding Author’s Name  
   Kirk Knowlton  
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Dr. Meredith has nothing to disclose.

Evaluation and Feedback

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1. **Identifying information.**

2. **The work under consideration for publication.**

   This section asks for information about the work that you have submitted for publication. The time frame for this reporting is that of the work itself, from the initial conception and planning to the present. The requested information is about resources that you received, either directly or indirectly (via your institution), to enable you to complete the work. Checking “No” means that you did the work without receiving any financial support from any third party -- that is, the work was supported by funds from the same institution that pays your salary and that institution did not receive third-party funds with which to pay you. If you or your institution received funds from a third party to support the work, such as a government granting agency, charitable foundation or commercial sponsor, check “Yes”.

3. **Relevant financial activities outside the submitted work.**

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4. **Intellectual Property.**

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

5. **Relationships not covered above.**

   Use this section to report other relationships or activities that readers could perceive to have influenced, or that give the appearance of potentially influencing, what you wrote in the submitted work.

**Definitions.**

- **Entity:** government agency, foundation, commercial sponsor, academic institution, etc.
- **Grant:** A grant from an entity, generally [but not always] paid to your organization
- **Personal Fees:** Monies paid to you for services rendered, generally honoraria, royalties, or fees for consulting, lectures, speakers bureaus, expert testimony, employment, or other affiliations
- **Non-Financial Support:** Examples include drugs/equipment supplied by the entity, travel paid by the entity, writing assistance, administrative support, etc.
- **Other:** Anything not covered under the previous three boxes
- **Pending:** The patent has been filed but not issued
- **Issued:** The patent has been issued by the agency
- **Licensed:** The patent has been licensed to an entity, whether earning royalties or not
- **Royalties:** Funds are coming in to you or your institution due to your patent
ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)  
   David B

2. Surname (Last Name)  
   Min

3. Date  
   23-March-2018

4. Are you the corresponding author?  
   ☑ No

Corresponding Author’s Name  
Kirk Knowlton

5. Manuscript Title  
Implementation of a Cardiac PET Stress Program: Comparison of Outcomes to the Preceding SPECT Era

6. Manuscript Identifying Number (if you know it)  
120949-INS-CMED-1

Section 2. The Work Under Consideration for Publication

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

Are there any relevant conflicts of interest?  
☑ No

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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.

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☑ No

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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.

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Section 1. Identifying Information

1. Given Name (First Name)  J Brent
2. Surname (Last Name)  Muhlestein
3. Date  23-March-2018

4. Are you the corresponding author?  No

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Dr. Lappe has nothing to disclose.

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## STROBE Statement—checklist of items that should be included in reports of observational studies

<table>
<thead>
<tr>
<th>Item No</th>
<th>Recommendation</th>
</tr>
</thead>
</table>
| **Title and abstract** | 1 | *(a) Indicate the study’s design with a commonly used term in the title or the abstract [in abstract page 3]*  
 *(b) Provide in the abstract an informative and balanced summary of what was done and what was found [in abstract page 3]* |
| **Introduction** | 2 | Explain the scientific background and rationale for the investigation being reported [page 4] |
| **Objectives** | 3 | State specific objectives, including any prespecified hypotheses [page 4] |
| **Methods** | 4 | Present key elements of study design early in the paper [abstract and introduction and page 12] |
| **Setting** | 5 | Describe the setting, locations, and relevant dates, including periods of recruitment, exposure, follow-up, and data collection [page 12] |
| **Participants** | 6 | *(a) Cohort study—Give the eligibility criteria, and the sources and methods of selection of participants. Describe methods of follow-up [page 12]*  
 *Case-control study—Give the eligibility criteria, and the sources and methods of case ascertainment and control selection. Give the rationale for the choice of cases and controls  
 *Cross-sectional study—Give the eligibility criteria, and the sources and methods of selection of participants*  
 *(b) Cohort study—For matched studies, give matching criteria and number of exposed and unexposed*  
 *Case-control study—For matched studies, give matching criteria and the number of controls per case* |
| **Variables** | 7 | Clearly define all outcomes, exposures, predictors, potential confounders, and effect modifiers. Give diagnostic criteria, if applicable [page 14] |
| **Data sources/measurement** | 8* | For each variable of interest, give sources of data and details of methods of assessment (measurement). Describe comparability of assessment methods if there is more than one group [page 14] |
| **Bias** | 9 | Describe any efforts to address potential sources of bias [limitations page 10] |
| **Study size** | 10 | Explain how the study size was arrived at [page 12] |
| **Quantitative variables** | 11 | Explain how quantitative variables were handled in the analyses. If applicable, describe which groupings were chosen and why [page 14] |
| **Statistical methods** | 12 | *(a) Describe all statistical methods, including those used to control for confounding [page 14]*  
 *(b) Describe any methods used to examine subgroups and interactions [page 14]*  
 *(c) Explain how missing data were addressed*  
 *(d) Cohort study—If applicable, explain how loss to follow-up was addressed [page 14]*  
 *(e) Describe any sensitivity analyses* |

Continued on next page
### Results

**Participants**  13*
(a) Report numbers of individuals at each stage of study—eg numbers potentially eligible, examined for eligibility, confirmed eligible, included in the study, completing follow-up, and analysed [page 12]
(b) Give reasons for non-participation at each stage
(c) Consider use of a flow diagram [figure 1]

**Descriptive data**  14*
(a) Give characteristics of study participants (eg demographic, clinical, social) and information on exposures and potential confounders [table 1]
(b) Indicate number of participants with missing data for each variable of interest [notes in tables]
(c) Cohort study—Summarise follow-up time (eg, average and total amount)

**Outcome data**  15*
(Cohort study)—Report numbers of outcome events or summary measures over time [tables 2-4]

Case-control study—Report numbers in each exposure category, or summary measures of exposure

Cross-sectional study—Report numbers of outcome events or summary measures

**Main results**  16
(a) Give unadjusted estimates and, if applicable, confounder-adjusted estimates and their precision (eg, 95% confidence interval). Make clear which confounders were adjusted for and why they were included [Results pages 5-7, Figure 2]
(b) Report category boundaries when continuous variables were categorized
(c) If relevant, consider translating estimates of relative risk into absolute risk for a meaningful time period

**Other analyses**  17
Report other analyses done—eg analyses of subgroups and interactions, and sensitivity analyses [Pages 5-7 and supplementary results]

### Discussion

**Key results**  18
Summarise key results with reference to study objectives [page 8]

**Limitations**  19
Discuss limitations of the study, taking into account sources of potential bias or imprecision. Discuss both direction and magnitude of any potential bias [page 10]

**Interpretation**  20
Give a cautious overall interpretation of results considering objectives, limitations, multiplicity of analyses, results from similar studies, and other relevant evidence [page 11]

**Generalisability**  21
Discuss the generalisability (external validity) of the study results [page 10]

### Other information

**Funding**  22
Give the source of funding and the role of the funders for the present study and, if applicable, for the original study on which the present article is based [title page]

*Give information separately for cases and controls in case-control studies and, if applicable, for exposed and unexposed groups in cohort and cross-sectional studies.

**Note:** An Explanation and Elaboration article discusses each checklist item and gives methodological background and published examples of transparent reporting. The STROBE checklist is best used in conjunction with this article (freely available on the Web sites of PLoS Medicine at http://www.plosmedicine.org/, Annals of Internal Medicine at http://www.annals.org/, and Epidemiology at http://www.epidem.com/). Information on the STROBE Initiative is available at www.strobe-statement.org.