### Date:\_\_17/3/2021

# Your Name:\_\_\_Paul Little

Manuscript Title:\_\_\_\_\_\_ Antibiotics for lower Respiratory Tract Infection in Children presenting in Primary Care (ARTIC PC): a randomised placebo controlled trial with nested qualitative, observational and economic studies\_\_\_\_\_\_

Manuscript number (if known):\_

N/A ( but the grant reference is 13/34/64)\_\_\_\_\_

In the interest of transparency, we ask you to disclose all relationships/activities/interests listed below that are related to the content of your manuscript. "Related" means any relation with for-profit or not-for-profit third parties whose interests may be affected by the content of the manuscript. Disclosure represents a commitment to transparency and does not necessarily indicate a bias. If you are in doubt about whether to list a relationship/activity/interest, it is preferable that you do so.

The following questions apply to the author's relationships/activities/interests as they relate to the <u>current</u> <u>manuscript only</u>.

The author's relationships/activities/interests should be <u>defined broadly</u>. For example, if your manuscript pertains to the epidemiology of hypertension, you should declare all relationships with manufacturers of antihypertensive medication, even if that medication is not mentioned in the manuscript.

		Name all entities with whom you have this relationship or indicate none (add rows as needed)	Specifications/Comments (e.g., if payments were made to you or to your institution)
		Time frame: Since the initial	planning of the work
1	All support for the present manuscript (e.g., funding, provision of study materials, medical writing, article processing charges, etc.) <b>No time limit for this item.</b>	NIHR HTA grant	Funds provided to the institution
		Time frame: past	36 months
2	Grants or contracts from any entity (if not indicated in item #1 above).	None	
3	Royalties or licenses	None	

4	Consulting fees	Nono	
4	Consulting lees	None	
5	Payment or honoraria for	None	
	lectures, presentations,		
	speakers bureaus, manuscript writing or		
	educational events		
6	Payment for expert	None	
	testimony		
_			
7	Support for attending meetings and/or travel	None	
8	Patents planned, issued or	None	
	pending		
9	Participation on a Data	None	
5	Safety Monitoring Board or		
	Advisory Board		
10	Leadership or fiduciary role	None	PL was a member of the Journals Library Board until
	in other board, society, committee or advocacy		September 2017.
	group, paid or unpaid		
11	Stock or stock options	None	
12	Descipt of any imment	None	
12	Receipt of equipment, materials, drugs, medical	None	
	writing, gifts or other		
	services		
13		None	
	inancial interests		
13	Other financial or non- financial interests	None	

\_X\_\_ I certify that I have answered every question and have not altered the wording of any of the questions on this form.

Date:\_\_\_\_\_18/3/2021\_\_

Your Name:\_\_\_Nick Francis\_\_\_

**Manuscript Title**: Antibiotics for lower Respiratory Tract Infection in Children presenting in Primary Care (ARTIC PC): a randomised placebo controlled trial with nested qualitative, observational and economic studies

### Manuscript number (if known):\_\_\_\_\_

In the interest of transparency, we ask you to disclose all relationships/activities/interests listed below that are related to the content of your manuscript. "Related" means any relation with for-profit or not-for-profit third parties whose interests may be affected by the content of the manuscript. Disclosure represents a commitment to transparency and does not necessarily indicate a bias. If you are in doubt about whether to list a relationship/activity/interest, it is preferable that you do so.

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		Name all entities with whom you have this relationship or indicate none (add rows as needed)	Specifications/Comments (e.g., if payments were made to you or to your institution)
		Time frame: Since the initial	planning of the work
1	All support for the present	NIHR HTA	
	manuscript (e.g., funding,		
	provision of study materials,		
	medical writing, article		
	processing charges, etc.)		
	No time limit for this item.		
		Time frame: past	36 months
2	Grants or contracts from any entity (if not indicated	Synairgen	Research Grant from Synairgen PLC for COVID-19 research
	in item #1 above).	Abbott	Non-financial support for an NIHR HTA trial on reducing
			antibiotics for COPD
3	Royalties or licenses	None	

4	Consulting fees	None	
5	Payment or honoraria for	Abbott	Speaker fee
	lectures, presentations,		
	speakers bureaus,		
	manuscript writing or educational events		
6	Payment for expert	None	
0	testimony		
	testimony		
7	Support for attending	None	
,	meetings and/or travel		
8	Patents planned, issued or	None	
	pending		
9	Participation on a Data	None	
	Safety Monitoring Board or		
	Advisory Board		
10	Leadership or fiduciary role	None	
	in other board, society,		
	committee or advocacy group, paid or unpaid		
11	Stock or stock options	Synairgen	
		Astra Zeneca	
12	Receipt of equipment,	None	
	materials, drugs, medical		
	writing, gifts or other		
	services		
13	Other financial or non-	None	
	financial interests		

\_X\_\_ I certify that I have answered every question and have not altered the wording of any of the questions on this form.

Date:22/3/2021		
Your Name:Beth Stuart		
Manuscript Title:ARTIC-PC HTA report		
Manuscript number (if known):		

In the interest of transparency, we ask you to disclose all relationships/activities/interests listed below that are related to the content of your manuscript. "Related" means any relation with for-profit or not-for-profit third parties whose interests may be affected by the content of the manuscript. Disclosure represents a commitment to transparency and does not necessarily indicate a bias. If you are in doubt about whether to list a relationship/activity/interest, it is preferable that you do so.

The following questions apply to the author's relationships/activities/interests as they relate to the <u>current</u> <u>manuscript only</u>.

The author's relationships/activities/interests should be <u>defined broadly</u>. For example, if your manuscript pertains to the epidemiology of hypertension, you should declare all relationships with manufacturers of antihypertensive medication, even if that medication is not mentioned in the manuscript.

		Name all entities with whom you have this relationship or indicate none (add rows as needed)	Specifications/Comments (e.g., if payments were made to you or to your institution)
		Time frame: Since the initial	planning of the work
1	All support for the present	None	
	manuscript (e.g., funding,		
	provision of study materials,		
	medical writing, article		
	processing charges, etc.)		
	No time limit for this item.		
		Time frame: past	36 months
2	Grants or contracts from	None	
	any entity (if not indicated		
	in item #1 above).		
3	Royalties or licenses	None	
4	Consulting fees	None	

5	Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or educational events Payment for expert testimony	None
7	Support for attending meetings and/or travel	None
8	Patents planned, issued or pending	None
9	Participation on a Data Safety Monitoring Board or Advisory Board	None
10	Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid	None
11	Stock or stock options	None
12	Receipt of equipment, materials, drugs, medical writing, gifts or other services	None
13	Other financial or non- financial interests	None

\_\_x\_ I certify that I have answered every question and have not altered the wording of any of the questions on this form.

Date:\_\_\_\_\_15/12/2021\_\_\_\_

Your Name: \_\_\_\_\_Gillian O'Reilly\_\_\_\_

Manuscript Title:\_ Antibiotics for lower Respiratory Tract Infection in Children presenting in Primary Care (ARTIC PC): a randomised placebo controlled trial with nested qualitative, observational and economic studies

Manuscript number (if known):\_\_\_\_\_

In the interest of transparency, we ask you to disclose all relationships/activities/interests listed below that are related to the content of your manuscript. "Related" means any relation with for-profit or not-for-profit third parties whose interests may be affected by the content of the manuscript. Disclosure represents a commitment to transparency and does not necessarily indicate a bias. If you are in doubt about whether to list a relationship/activity/interest, it is preferable that you do so.

The following questions apply to the author's relationships/activities/interests as they relate to the <u>current</u> <u>manuscript only</u>.

The author's relationships/activities/interests should be <u>defined broadly</u>. For example, if your manuscript pertains to the epidemiology of hypertension, you should declare all relationships with manufacturers of antihypertensive medication, even if that medication is not mentioned in the manuscript.

		Name all entities with whom you have this relationship or indicate none (add rows as needed)	Specifications/Comments (e.g., if payments were made to you or to your institution)
		Time frame: Since the initial	planning of the work
1	All support for the present	NIHR	Grant funding for this project
	manuscript (e.g., funding,		
	provision of study materials,		
	medical writing, article		
	processing charges, etc.)		
	No time limit for this item.		
		Time frame: past	36 months
2	Grants or contracts from	None	
	any entity (if not indicated		
	in item #1 above).		
3	Royalties or licenses	None	

4	Consulting fees	None	
-	Deursent en henenerie fen	Neze	
5	Payment or honoraria for lectures, presentations,	None	
	speakers bureaus,		
	manuscript writing or		
	educational events		
6	Payment for expert	None	
	testimony		
7	Support for attending	None	
'	meetings and/or travel		
8	Patents planned, issued or	None	
	pending		
0	Douticipation on a Data	Nega	
9	Participation on a Data Safety Monitoring Board or	None	
	Advisory Board		
10	Leadership or fiduciary role	NIHR	
	in other board, society,		
	committee or advocacy		
11	group, paid or unpaid	Nono	
11	Stock or stock options	None	
12	Receipt of equipment,	None	
	materials, drugs, medical		
	writing, gifts or other services		
13	Other financial or non-	None	
	financial interests		

\_\_X\_ I certify that I have answered every question and have not altered the wording of any of the questions on this form.

Date: 17/03/2021 Your Name: Natalie Thompson Manuscript Title: Antibiotics for lower Respiratory Tract Infection in Children presenting in Primary Care (ARTIC PC): a randomised placebo controlled trial with nested qualitative, observational and economic studies

Manuscript number (if known):\_\_\_\_\_

In the interest of transparency, we ask you to disclose all relationships/activities/interests listed below that are related to the content of your manuscript. "Related" means any relation with for-profit or not-for-profit third parties whose interests may be affected by the content of the manuscript. Disclosure represents a commitment to transparency and does not necessarily indicate a bias. If you are in doubt about whether to list a relationship/activity/interest, it is preferable that you do so.

The following questions apply to the author's relationships/activities/interests as they relate to the <u>current</u> <u>manuscript only</u>.

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		Name all entities with whom you have this relationship or indicate none (add rows as needed)	Specifications/Comments (e.g., if payments were made to you or to your institution)
		Time frame: Since the initial	planning of the work
1	All support for the present manuscript (e.g., funding, provision of study materials, medical writing, article processing charges, etc.) <b>No time limit for this item.</b>	None	
		Time frame: past	36 months
2	Grants or contracts from any entity (if not indicated in item #1 above).	None	
3	Royalties or licenses	None	
4	Consulting fees	None	

1		1	
-			
5	Payment or honoraria for	None	
	lectures, presentations,		
	speakers bureaus,		
	manuscript writing or		
	educational events	News	
6	Payment for expert	None	
	testimony		
7	Course and four and the	News	
7	Support for attending	None	
	meetings and/or travel		
8	Patents planned, issued or	None	
	pending		
9	Participation on a Data	None	
	Safety Monitoring Board or		
	Advisory Board		
10	Leadership or fiduciary role	None	
	in other board, society,		
	committee or advocacy		
	group, paid or unpaid		
11	Stock or stock options	None	
12			
12	Receipt of equipment,	None	
	materials, drugs, medical		
	writing, gifts or other services		
13	Services Other financial or non-	None	
13	financial interests		

X I certify that I have answered every question and have not altered the wording of any of the questions on this form.

Date:\_\_\_\_\_18/3/2021\_\_

Your Name:\_\_\_\_Taeko Becque\_\_

**Manuscript Title**: Antibiotics for lower Respiratory Tract Infection in Children presenting in Primary Care (ARTIC PC): a randomised placebo controlled trial with nested qualitative, observational and economic studies

### Manuscript number (if known):\_\_\_\_\_

In the interest of transparency, we ask you to disclose all relationships/activities/interests listed below that are related to the content of your manuscript. "Related" means any relation with for-profit or not-for-profit third parties whose interests may be affected by the content of the manuscript. Disclosure represents a commitment to transparency and does not necessarily indicate a bias. If you are in doubt about whether to list a relationship/activity/interest, it is preferable that you do so.

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		Name all entities with whom you have this relationship or indicate none (add rows as needed)	Specifications/Comments (e.g., if payments were made to you or to your institution)
		Time frame: Since the initial	planning of the work
1	All support for the present	None	
	manuscript (e.g., funding,		
	provision of study materials,		
	medical writing, article		
	processing charges, etc.)		
	No time limit for this item.		
		Time frame: past	36 months
2	Grants or contracts from	None	
	any entity (if not indicated		
	in item #1 above).		
3	Royalties or licenses	None	
4	Consulting fees	None	

5	Payment or honoraria for	None	
	lectures, presentations,		
	speakers bureaus,		
	manuscript writing or		
6	educational events Payment for expert	None	
0	testimony		
	testimony		
7	Support for attending	None	
	meetings and/or travel		
8	Patents planned, issued or	None	
	pending		
9	Participation on a Data	None	
	Safety Monitoring Board or Advisory Board		
10	Leadership or fiduciary role	None	
10	in other board, society,		
	committee or advocacy		
	group, paid or unpaid		
11	Stock or stock options	None	
12	Receipt of equipment,	None	
	materials, drugs, medical writing, gifts or other		
	services		
13	Other financial or non-	None	
	financial interests		

\_X\_\_ I certify that I have answered every question and have not altered the wording of any of the questions on this form.

Date:18/3/2021				
/our Name:Alastair Hay				
Manuscript Title:ARTIC-PC HTA report				
Manuscript number (if known):				

In the interest of transparency, we ask you to disclose all relationships/activities/interests listed below that are related to the content of your manuscript. "Related" means any relation with for-profit or not-for-profit third parties whose interests may be affected by the content of the manuscript. Disclosure represents a commitment to transparency and does not necessarily indicate a bias. If you are in doubt about whether to list a relationship/activity/interest, it is preferable that you do so.

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		Time frame: Since the initial	planning of the work
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		Time frame: past	36 months
2	Grants or contracts from any entity (if not indicated in item #1 above).	None	
3	Royalties or licenses	None	
4	Consulting fees	None	

lectures, presentations, speakers bureaus, manuscript writing or educational events	5	Payment or honoraria for	None	
manuscript writing or educational events      None         6       Payment for expert testimony      None         7       Support for attending meetings and/or travel      None         8       Patents planned, issued or pending      None         9       Patricipation on a Data Safety Monitoring Board or Advisory Board      None         10       Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid      None         11       Stock or stock options      None         12       Receipt of equipment, materials, drugs, medical      None		-		
educational events      None         6       Payment for expert testimony      None         7       Support for attending meetings and/or travel      None         7       Support for attending meetings and/or travel      None         8       Patents planned, issued or pending      None         9       Patticipation on a Data Safety Monitoring Board or Advisory Board      None         10       Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid      None         11       Stock or stock options      None         12       Receipt of equipment, materials, drugs, medical      None		speakers bureaus,		
6       Payment for expert testimony      None         7       Support for attending meetings and/or travel      None         8       Patents planned, issued or pending      None         9       Participation on a Data Safety Monitoring Board or Advisory Board      None         10       Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid      None         11       Stock or stock options      None         12       Receipt of equipment, materials, drugs, medical      None				
testimony				
7       Support for attending meetings and/or travel      None         8       Patents planned, issued or pending      None         9       Participation on a Data Safety Monitoring Board or Advisory Board      None         10       Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid      None         11       Stock or stock options      None         12       Receipt of equipment, materials, drugs, medical      None	6		None	
meetings and/or travel		testimony		
meetings and/or travel				
8       Patents planned, issued or pending      None         9       Participation on a Data Safety Monitoring Board or Advisory Board      None         10       Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid      None         11       Stock or stock options      None         12       Receipt of equipment, materials, drugs, medical      None	7		None	
pending		meetings and/or travel		
pending				
pending				
pending				
9       Participation on a Data Safety Monitoring Board or Advisory Board      None         10       Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid      None         11       Stock or stock options      None         12       Receipt of equipment, materials, drugs, medical      None	8	Patents planned, issued or	None	
Safety Monitoring Board or Advisory Board       Image: mathematical system in other board, society, committee or advocacy group, paid or unpaid       Image: mathematical system in other board, society, committee or advocacy group, paid or unpaid         11       Stock or stock options       Image: mathematical system in other board, society, committee or advocacy group, paid or unpaid         11       Stock or stock options       Image: mathematical system in other board, society, committee or advocacy group, paid or unpaid         11       Stock or stock options       Image: mathematical system in other board, society, committee or advocacy group, paid or unpaid         12       Receipt of equipment, materials, drugs, medical       Image: mathematical system in other board, society, committee or advocacy group, paid or unpaid		pending		
Safety Monitoring Board or Advisory Board       Image: mathematical system in other board, society, committee or advocacy group, paid or unpaid       Image: mathematical system in other board, society, committee or advocacy group, paid or unpaid         11       Stock or stock options       Image: mathematical system in other board, society, committee or advocacy group, paid or unpaid         11       Stock or stock options       Image: mathematical system in other board, society, committee or advocacy group, paid or unpaid         11       Stock or stock options       Image: mathematical system in other board, society, committee or advocacy group, paid or unpaid         12       Receipt of equipment, materials, drugs, medical       Image: mathematical system in other board, society, committee or advocacy group, paid or unpaid				
Advisory Board	9		None	
10       Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid      None         11       Stock or stock options      None         12       Receipt of equipment, materials, drugs, medical      None				
in other board, society, committee or advocacy group, paid or unpaid     Image: Committee or advocacy group, paid or unpaid       11     Stock or stock options    None       12     Receipt of equipment, materials, drugs, medical    None				
committee or advocacy group, paid or unpaid    None       11     Stock or stock options    None       12     Receipt of equipment, materials, drugs, medical    None	10		None	
group, paid or unpaid    None       11     Stock or stock options    None       12     Receipt of equipment, materials, drugs, medical    None		-		
11       Stock or stock options      None         12       Receipt of equipment, materials, drugs, medical      None				
12     Receipt of equipment, materials, drugs, medical    None	11		None	
materials, drugs, medical	11	SLOCK OF SLOCK OPTIONS		
materials, drugs, medical				
materials, drugs, medical	12	Receipt of equipment	None	
	12			
		writing, gifts or other		
services				
13 Other financial or non- None	13	Other financial or non-	None	
financial interests		financial interests		

\_\_\_\_ I certify that I have answered every question and have not altered the wording of any of the questions on this form. X

Date:\_\_19/3/2021\_\_\_\_\_\_ Your Name:\_\_Kay Wang\_\_\_\_\_ Manuscript Title: Antibiotics for lower Respiratory Tract Infection in Children presenting in Primary Care (ARTIC PC): a randomised placebo controlled trial with nested qualitative, observational and economic studies Manuscript number (if known):\_\_\_\_\_

In the interest of transparency, we ask you to disclose all relationships/activities/interests listed below that are related to the content of your manuscript. "Related" means any relation with for-profit or not-for-profit third parties whose interests may be affected by the content of the manuscript. Disclosure represents a commitment to transparency and does not necessarily indicate a bias. If you are in doubt about whether to list a relationship/activity/interest, it is preferable that you do so.

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		Name all entities with whom you have this relationship or indicate none (add rows as needed)	Specifications/Comments (e.g., if payments were made to you or to your institution)
	T	Time frame: Since the initial	planning of the work
1	All support for the present	None	
	manuscript (e.g., funding,		
	provision of study materials,		
	medical writing, article		
	processing charges, etc.)		
	No time limit for this item.		
		Time frame: past	36 months
2	Grants or contracts from	None	
	any entity (if not indicated		
	in item #1 above).		
3	Royalties or licenses	None	
4	Consulting fees	None	

5	Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or educational events	None	
6	Payment for expert testimony	None	
7	Support for attending meetings and/or travel	None	
8	Patents planned, issued or pending	None	
9	Participation on a Data Safety Monitoring Board or Advisory Board	None	
10	Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid	None	
11	Stock or stock options	None	
12	Receipt of equipment, materials, drugs, medical writing, gifts or other services	None	
13	Other financial or non- financial interests	None	

\_X\_ I certify that I have answered every question and have not altered the wording of any of the questions on this form.

#### Date: 1<sup>st</sup> December 2021 Your Name: Michael Sharland

**Manuscript Title:** Antibiotics for lower Respiratory Tract Infection in Children presenting in Primary Care (ARTIC PC): a randomised placebo controlled trial with nested qualitative, observational and economic studies

Manuscript number (if known):\_\_\_\_\_

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		Time frame: Since the initial	planning of the work
1	All support for the present	NIHR	Grant funding for this project
	manuscript (e.g., funding,		
	provision of study materials,		
	medical writing, article		
	processing charges, etc.)		
	No time limit for this item.		
		Time frame: past	36 months
2	Grants or contracts from	None	
	any entity (if not indicated		
	in item #1 above).		
3	Royalties or licenses	None	

4	Consulting fees	None
5	Payment or honoraria for	None
	lectures, presentations,	
	speakers bureaus, manuscript writing or	
	educational events	
6	Payment for expert	None
	testimony	
7	Support for attending meetings and/or travel	None
	-	
8	Patents planned, issued or	None
	pending	
0	Deuticiantica en e Dete	
9	Participation on a Data Safety Monitoring Board or	None
	Advisory Board	
10	Leadership or fiduciary role	NIHR
	in other board, society,	
	committee or advocacy	
	group, paid or unpaid	
11	Stock or stock options	None
12	Receipt of equipment,	None
	materials, drugs, medical	
	writing, gifts or other services	
13	Other financial or non-	None
	financial interests	

X I certify that I have answered every question and have not altered the wording of any of the questions on this form.

#### Date:\_\_19/3/2021\_

### Your Name: Anthony Harnden

Manuscript Title: Antibiotics for lower Respiratory Tract Infection in Children presenting in Primary Care (ARTIC PC): a randomised placebo controlled trial with nested qualitative, observational and economic studies Manuscript number (if known):\_\_\_\_\_\_

In the interest of transparency, we ask you to disclose all relationships/activities/interests listed below that are related to the content of your manuscript. "Related" means any relation with for-profit or not-for-profit third parties whose interests may be affected by the content of the manuscript. Disclosure represents a commitment to transparency and does not necessarily indicate a bias. If you are in doubt about whether to list a relationship/activity/interest, it is preferable that you do so.

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		Name all entities with whom you have this relationship or indicate none (add rows as needed)	Specifications/Comments (e.g., if payments were made to you or to your institution)
	• •	Time frame: Since the initial	planning of the work
1	All support for the present	None	
	manuscript (e.g., funding,		
	provision of study materials, medical writing, article		
	processing charges, etc.)		
	No time limit for this item.		
		Time frame: past	36 months
2	Grants or contracts from	None	
2	any entity (if not indicated		
	in item #1 above).		
3	Royalties or licenses	None	
4	Consulting fees	None	

5	Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or educational events	None	
6	Payment for expert testimony	None	
7	Support for attending meetings and/or travel	None	
8	Patents planned, issued or pending	None	
9	Participation on a Data Safety Monitoring Board or Advisory Board	None	
10	Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid	None	
11	Stock or stock options	None	
12	Receipt of equipment, materials, drugs, medical writing, gifts or other services	None	
13	Other financial or non- financial interests	None	

\_X\_ I certify that I have answered every question and have not altered the wording of any of the questions on this form.

Date:\_\_\_\_\_06/12/2021\_\_\_\_\_

Your Name:\_\_\_\_Guiqing Yao\_\_\_\_\_

Manuscript Title:\_ Antibiotics for lower Respiratory Tract Infection in Children presenting in Primary Care (ARTIC PC): a randomised placebo controlled trial with nested qualitative, observational and economic studies

Manuscript number (if known):\_\_\_\_\_

In the interest of transparency, we ask you to disclose all relationships/activities/interests listed below that are related to the content of your manuscript. "Related" means any relation with for-profit or not-for-profit third parties whose interests may be affected by the content of the manuscript. Disclosure represents a commitment to transparency and does not necessarily indicate a bias. If you are in doubt about whether to list a relationship/activity/interest, it is preferable that you do so.

The following questions apply to the author's relationships/activities/interests as they relate to the <u>current</u> <u>manuscript only</u>.

The author's relationships/activities/interests should be <u>defined broadly</u>. For example, if your manuscript pertains to the epidemiology of hypertension, you should declare all relationships with manufacturers of antihypertensive medication, even if that medication is not mentioned in the manuscript.

		Name all entities with whom you have this relationship or indicate none (add rows as needed)	Specifications/Comments (e.g., if payments were made to you or to your institution)
		Time frame: Since the initial	planning of the work
1	All support for the present	NIHR	Grant funding for this project
	manuscript (e.g., funding,		
	provision of study materials,		
	medical writing, article		
	processing charges, etc.)		
	No time limit for this item.		
		Time frame: past	36 months
2	Grants or contracts from	None	
	any entity (if not indicated		
	in item #1 above).		
3	Royalties or licenses	None	

4	Consulting fees	None	
-	Deverant er beneverie fer	Neze	
5	Payment or honoraria for lectures, presentations,	None	
	speakers bureaus,		
	manuscript writing or		
	educational events		
6	Payment for expert	None	
	testimony		
7	Support for attending	None	
'	meetings and/or travel		
8	Patents planned, issued or	None	
	pending		
0	Douticipation on a Data	Nega	
9	Participation on a Data Safety Monitoring Board or	None	
	Advisory Board		
10	Leadership or fiduciary role	NIHR	
	in other board, society,		
	committee or advocacy		
11	group, paid or unpaid	Nono	
11	Stock or stock options	None	
12	Receipt of equipment,	None	
	materials, drugs, medical		
	writing, gifts or other services		
13	Other financial or non-	None	
	financial interests		

\_\_X\_ I certify that I have answered every question and have not altered the wording of any of the questions on this form.

Date:\_\_\_\_8/12/21\_\_\_

Your Name: \_\_\_\_James Raftery\_\_\_

Manuscript Title:\_ Antibiotics for lower Respiratory Tract Infection in Children presenting in Primary Care (ARTIC PC): a randomised placebo controlled trial with nested qualitative, observational and economic studies

Manuscript number (if known):\_\_\_\_\_

In the interest of transparency, we ask you to disclose all relationships/activities/interests listed below that are related to the content of your manuscript. "Related" means any relation with for-profit or not-for-profit third parties whose interests may be affected by the content of the manuscript. Disclosure represents a commitment to transparency and does not necessarily indicate a bias. If you are in doubt about whether to list a relationship/activity/interest, it is preferable that you do so.

The following questions apply to the author's relationships/activities/interests as they relate to the <u>current</u> <u>manuscript only</u>.

The author's relationships/activities/interests should be <u>defined broadly</u>. For example, if your manuscript pertains to the epidemiology of hypertension, you should declare all relationships with manufacturers of antihypertensive medication, even if that medication is not mentioned in the manuscript.

		Name all entities with whom you have this relationship or indicate none (add rows as needed)	Specifications/Comments (e.g., if payments were made to you or to your institution)
		Time frame: Since the initial	planning of the work
1	All support for the present	NIHR	Grant funding for this project
	manuscript (e.g., funding,		
	provision of study materials,		
	medical writing, article		
	processing charges, etc.)		
	No time limit for this item.		
		Time frame: past	36 months
2	Grants or contracts from	None	
	any entity (if not indicated		
	in item #1 above).		
3	Royalties or licenses	None	

4	Consulting fees	None	
5	Payment or honoraria for	None	
	lectures, presentations,		
	speakers bureaus, manuscript writing or		
	educational events		
6	Payment for expert	None	
	testimony		
7	Support for attending meetings and/or travel	None	
8	Patents planned, issued or	None	
	pending		
9	Participation on a Data	None	
	Safety Monitoring Board or Advisory Board		
10	Leadership or fiduciary role	NIHR	
10	in other board, society,		
	committee or advocacy		
	group, paid or unpaid		
11	Stock or stock options	None	
12	Receipt of equipment,	None	
	materials, drugs, medical writing, gifts or other		
	services		
13	Other financial or non-		Member if the NIHR HTA & EME Editorial Board (0.2 wte)
	financial interests		paid role.

\_\_X\_ I certify that I have answered every question and have not altered the wording of any of the questions on this form.

Date:\_\_\_\_03/01/2022\_\_\_\_

Your Name:\_\_\_Shihua Zhu\_\_\_

**Manuscript Title:**\_Antibiotics for lower Respiratory Tract Infection in Children presenting in Primary Care (ARTIC PC): a randomised placebo controlled trial with nested qualitative, observational and economic studies

Manuscript number (if known):\_\_\_\_\_

In the interest of transparency, we ask you to disclose all relationships/activities/interests listed below that are related to the content of your manuscript. "Related" means any relation with for-profit or not-for-profit third parties whose interests may be affected by the content of the manuscript. Disclosure represents a commitment to transparency and does not necessarily indicate a bias. If you are in doubt about whether to list a relationship/activity/interest, it is preferable that you do so.

The following questions apply to the author's relationships/activities/interests as they relate to the <u>current</u> <u>manuscript only</u>.

The author's relationships/activities/interests should be <u>defined broadly</u>. For example, if your manuscript pertains to the epidemiology of hypertension, you should declare all relationships with manufacturers of antihypertensive medication, even if that medication is not mentioned in the manuscript.

		Name all entities with	Specifications/Comments
		whom you have this	(e.g., if payments were made to you or to your
		relationship or indicate	institution)
		none (add rows as	
		needed)	
			nlanning of the work
		Time frame: Since the initial	planning of the work
1	All support for the present	NIHR	Grant funding for this project
	manuscript (e.g., funding,		
	provision of study materials,		
	medical writing, article		
	processing charges, etc.)		
	No time limit for this item.		
		Time frame: past	36 months
2	Grants or contracts from	None	
	any entity (if not indicated		
	in item #1 above).		
3	Royalties or licenses	None	

4	Consulting fees	None	
-	Deverant er beneverie fer	Neze	
5	Payment or honoraria for lectures, presentations,	None	
	speakers bureaus,		
	manuscript writing or		
	educational events		
6	Payment for expert	None	
	testimony		
7	Support for attending	None	
'	meetings and/or travel		
8	Patents planned, issued or	None	
	pending		
0	Douticipation on a Data	Nega	
9	Participation on a Data Safety Monitoring Board or	None	
	Advisory Board		
10	Leadership or fiduciary role	NIHR	
	in other board, society,		
	committee or advocacy		
11	group, paid or unpaid	Nono	
11	Stock or stock options	None	
12	Receipt of equipment,	None	
	materials, drugs, medical		
	writing, gifts or other services		
13	Other financial or non-	None	
	financial interests		

\_\_X\_ I certify that I have answered every question and have not altered the wording of any of the questions on this form.

### Date: 11/01/2022

### Your Name: \_\_\_\_Joseph Little

**Manuscript Title:**\_Antibiotics for lower Respiratory Tract Infection in Children presenting in Primary Care (ARTIC PC): a randomised placebo controlled trial with nested qualitative, observational and economic studies

### Manuscript number (if known):\_\_\_\_\_

In the interest of transparency, we ask you to disclose all relationships/activities/interests listed below that are related to the content of your manuscript. "Related" means any relation with for-profit or not-for-profit third parties whose interests may be affected by the content of the manuscript. Disclosure represents a commitment to transparency and does not necessarily indicate a bias. If you are in doubt about whether to list a relationship/activity/interest, it is preferable that you do so.

The following questions apply to the author's relationships/activities/interests as they relate to the <u>current</u> <u>manuscript only</u>.

The author's relationships/activities/interests should be <u>defined broadly</u>. For example, if your manuscript pertains to the epidemiology of hypertension, you should declare all relationships with manufacturers of antihypertensive medication, even if that medication is not mentioned in the manuscript.

		Name all entities with	Specifications/Comments
		whom you have this	(e.g., if payments were made to you or to your
		relationship or indicate	institution)
		none (add rows as	
		needed)	
			nlanning of the work
		Time frame: Since the initial	planning of the work
1	All support for the present	NIHR	Grant funding for this project
	manuscript (e.g., funding,		
	provision of study materials,		
	medical writing, article		
	processing charges, etc.)		
	No time limit for this item.		
		Time frame: past	36 months
2	Grants or contracts from	None	
	any entity (if not indicated		
	in item #1 above).		
3	Royalties or licenses	None	

4	Consulting fees	None	
-	Deursent en henenerie fen	Neze	
5	Payment or honoraria for lectures, presentations,	None	
	speakers bureaus,		
	manuscript writing or		
	educational events		
6	Payment for expert	None	
	testimony		
7	Support for attending	None	
'	meetings and/or travel		
8	Patents planned, issued or	None	
	pending		
0	Douticipation on a Data	Nega	
9	Participation on a Data Safety Monitoring Board or	None	
	Advisory Board		
10	Leadership or fiduciary role	NIHR	
	in other board, society,		
	committee or advocacy		
11	group, paid or unpaid	Nono	
11	Stock or stock options	None	
12	Receipt of equipment,	None	
	materials, drugs, medical		
	writing, gifts or other services		
13	Other financial or non-	None	
	financial interests		

<u>X</u> I certify that I have answered every question and have not altered the wording of any of the questions on this form.

Date:	23/03/2021
Your I	Name:Charlotte Hookham
	Manuscript Title: Antibiotics for lower Respiratory Tract Infection in Children
	presenting in Primary Care (ARTIC PC): a randomised placebo controlled trial with
	nested qualitative, observational and economic studies
Manu	script number (if known):

In the interest of transparency, we ask you to disclose all relationships/activities/interests listed below that are related to the content of your manuscript. "Related" means any relation with for-profit or not-for-profit third parties whose interests may be affected by the content of the manuscript. Disclosure represents a commitment to transparency and does not necessarily indicate a bias. If you are in doubt about whether to list a relationship/activity/interest, it is preferable that you do so.

The following questions apply to the author's relationships/activities/interests as they relate to the <u>current</u> <u>manuscript only</u>.

The author's relationships/activities/interests should be <u>defined broadly</u>. For example, if your manuscript pertains to the epidemiology of hypertension, you should declare all relationships with manufacturers of antihypertensive medication, even if that medication is not mentioned in the manuscript.

		Name all entities with whom you have this relationship or indicate none (add rows as needed)	Specifications/Comments (e.g., if payments were made to you or to your institution)
		Time frame: Since the initial	planning of the work
1	All support for the present manuscript (e.g., funding, provision of study materials, medical writing, article processing charges, etc.) <b>No time limit for this item.</b>	None	
		Time frame: past	36 months
2	Grants or contracts from any entity (if not indicated in item #1 above).	None	
3	Royalties or licenses	None	

4	Consulting fees	None	
5	Payment or honoraria for	None	
	lectures, presentations,		
	speakers bureaus,		
	manuscript writing or		
	educational events		
6	Payment for expert	None	
	testimony		
7	Support for attending	None	
	meetings and/or travel		
8	Patents planned, issued or	None	
	pending		
9	Participation on a Data	None	
	Safety Monitoring Board or		
	Advisory Board		
10	Leadership or fiduciary role	None	
	in other board, society,		
	committee or advocacy		
	group, paid or unpaid		
11	Stock or stock options	None	
12	Dessint of any instant	Nene	
12	Receipt of equipment,	None	
	materials, drugs, medical writing, gifts or other		
	services		
13	Other financial or non-	None	
15	financial interests		

\_\_X\_ I certify that I have answered every question and have not altered the wording of any of the questions on this form.

Date:\_\_\_\_24/3/21\_\_

Your Name:\_Katie Rowley\_

Manuscript Title:\_\_\_ Antibiotics for lower Respiratory Tract Infection in Children presenting in Primary Care (ARTIC PC): a randomised placebo controlled trial with nested qualitative, observational and economic studies\_\_\_\_\_\_ Manuscript number (if known):\_\_\_\_\_\_

In the interest of transparency, we ask you to disclose all relationships/activities/interests listed below that are related to the content of your manuscript. "Related" means any relation with for-profit or not-for-profit third parties whose interests may be affected by the content of the manuscript. Disclosure represents a commitment to transparency and does not necessarily indicate a bias. If you are in doubt about whether to list a relationship/activity/interest, it is preferable that you do so.

The following questions apply to the author's relationships/activities/interests as they relate to the <u>current</u> <u>manuscript only</u>.

The author's relationships/activities/interests should be <u>defined broadly</u>. For example, if your manuscript pertains to the epidemiology of hypertension, you should declare all relationships with manufacturers of antihypertensive medication, even if that medication is not mentioned in the manuscript.

		Name all entities with whom you have this relationship or indicate none (add rows as needed)	Specifications/Comments (e.g., if payments were made to you or to your institution)
		Time frame: Since the initial	planning of the work
1	All support for the present manuscript (e.g., funding, provision of study materials, medical writing, article processing charges, etc.) <b>No time limit for this item.</b>	None	
		Time frame: past	36 months
2	Grants or contracts from any entity (if not indicated in item #1 above).	None	
3	Royalties or licenses	None	
4	Consulting fees	None	

5	Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or educational events	None	
Ь	Payment for expert testimony	None	
7	Support for attending meetings and/or travel	None	
8	Patents planned, issued or pending	None	
9	Participation on a Data Safety Monitoring Board or Advisory Board	None	
10	Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid	None	
11	Stock or stock options	None	
12	Receipt of equipment, materials, drugs, medical writing, gifts or other services	None	
13	Other financial or non- financial interests	None	

\_\_X\_ I certify that I have answered every question and have not altered the wording of any of the questions on this form.

Date:\_\_\_\_\_19/3/2021\_\_

Your Name: \_\_\_\_Joanne Euden\_\_\_

**Manuscript Title**: Antibiotics for lower Respiratory Tract Infection in Children presenting in Primary Care (ARTIC PC): a randomised placebo controlled trial with nested qualitative, observational and economic studies

### Manuscript number (if known):\_\_\_\_\_

In the interest of transparency, we ask you to disclose all relationships/activities/interests listed below that are related to the content of your manuscript. "Related" means any relation with for-profit or not-for-profit third parties whose interests may be affected by the content of the manuscript. Disclosure represents a commitment to transparency and does not necessarily indicate a bias. If you are in doubt about whether to list a relationship/activity/interest, it is preferable that you do so.

The following questions apply to the author's relationships/activities/interests as they relate to the <u>current</u> <u>manuscript only</u>.

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		Name all entities with whom you have this relationship or indicate none (add rows as needed)	Specifications/Comments (e.g., if payments were made to you or to your institution)
		Time frame: Since the initial	planning of the work
1	All support for the present	None	
	manuscript (e.g., funding,		
	provision of study materials,		
	medical writing, article		
	processing charges, etc.)		
	No time limit for this item.		
		Time frame: past	36 months
2	Grants or contracts from	None	
	any entity (if not indicated		
	in item #1 above).		
3	Royalties or licenses	None	
4	Consulting fees	None	

_			
5	Payment or honoraria for	None	
	lectures, presentations,		
	speakers bureaus,		
	manuscript writing or educational events		
6		Nees	
6	Payment for expert	None	
	testimony		
7	Support for attending	Nono	
/	Support for attending meetings and/or travel	None	
8	Patents planned, issued or	None	
	pending		
-			
9	Participation on a Data	None	
	Safety Monitoring Board or		
10	Advisory Board		
10	Leadership or fiduciary role	None	
	in other board, society, committee or advocacy		
	group, paid or unpaid		
11	Stock or stock options	None	
11			
12	Receipt of equipment, materials, drugs, medical	None	
	writing, gifts or other		
	services		
13	Other financial or non- financial interests	None	

\_X\_\_ I certify that I have answered every question and have not altered the wording of any of the questions on this form.

Date:	17 <sup>th</sup> March 2021	
Your Name:	Kim Harman	
• •	Antibiotics for lower Respiratory Tract Infection in Children presenting in Primary Care (ARTIC PC): to controlled trial with nested qualitative, observational and economic	а
Manuscript numb	 er (if known):	

In the interest of transparency, we ask you to disclose all relationships/activities/interests listed below that are related to the content of your manuscript. "Related" means any relation with for-profit or not-for-profit third parties whose interests may be affected by the content of the manuscript. Disclosure represents a commitment to transparency and does not necessarily indicate a bias. If you are in doubt about whether to list a relationship/activity/interest, it is preferable that you do so.

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		Name all entities with whom you have this relationship or indicate none (add rows as needed)	Specifications/Comments (e.g., if payments were made to you or to your institution)			
	Time frame: Since the initial planning of the work					
1	All support for the present manuscript (e.g., funding, provision of study materials, medical writing, article processing charges, etc.)	None				
	No time limit for this item.					
		Time frame: past	36 months			
2	Grants or contracts from any entity (if not indicated in item #1 above).	None				
3	Royalties or licenses	None				
4	Consulting fees	None				

5	Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or educational events	None	
6	Payment for expert testimony	None	
7	Support for attending meetings and/or travel	None	
8	Patents planned, issued or pending	None	
9	Participation on a Data Safety Monitoring Board or Advisory Board	None	
10	Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid	None	
11	Stock or stock options	None	
12	Receipt of equipment, materials, drugs, medical writing, gifts or other services	None	
13	Other financial or non- financial interests	None	

\_\_X\_ I certify that I have answered every question and have not altered the wording of any of the questions on this form.

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		Name all entities with whom you have this relationship or indicate none (add rows as needed)	Specifications/Comments (e.g., if payments were made to you or to your institution)
		Time frame: Since the initial	planning of the work
1	All support for the present manuscript (e.g., funding, provision of study materials, medical writing, article processing charges, etc.) <b>No time limit for this item.</b>	None	
		Time frame: past	36 months
2	Grants or contracts from any entity (if not indicated in item #1 above).	None	
3	Royalties or licenses	None	
4	Consulting fees	None	

5	Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or educational events	None	
6	Payment for expert testimony	None	
7	Support for attending meetings and/or travel	None	
8	Patents planned, issued or pending	None	
9	Participation on a Data Safety Monitoring Board or Advisory Board	None	
10	Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid	None	
11	Stock or stock options	None	
12	Receipt of equipment, materials, drugs, medical writing, gifts or other services	None	
13	Other financial or non- financial interests	None	

#### Date: 08/12/2021 Your Name:\_\_Professor Robert C Read

Manuscript Title:\_ Antibiotics for lower Respiratory Tract Infection in Children presenting in Primary Care (ARTIC PC): a randomised placebo controlled trial with nested qualitative, observational and economic studies

Manuscript number (if known):\_\_\_\_\_

In the interest of transparency, we ask you to disclose all relationships/activities/interests listed below that are related to the content of your manuscript. "Related" means any relation with for-profit or not-for-profit third parties whose interests may be affected by the content of the manuscript. Disclosure represents a commitment to transparency and does not necessarily indicate a bias. If you are in doubt about whether to list a relationship/activity/interest, it is preferable that you do so.

The following questions apply to the author's relationships/activities/interests as they relate to the <u>current</u> <u>manuscript only</u>.

The author's relationships/activities/interests should be <u>defined broadly</u>. For example, if your manuscript pertains to the epidemiology of hypertension, you should declare all relationships with manufacturers of antihypertensive medication, even if that medication is not mentioned in the manuscript.

		Name all entities with whom you have this relationship or indicate none (add rows as needed)	Specifications/Comments (e.g., if payments were made to you or to your institution)
	• • •	Time frame: Since the initial	
1	All support for the present	NIHR	Grant funding for this project
	manuscript (e.g., funding,		
	provision of study materials,		
	medical writing, article		
	processing charges, etc.)		
	No time limit for this item.		
		Time frame: past	36 months
2	Grants or contracts from	None	
	any entity (if not indicated		
	in item #1 above).		
3	Royalties or licenses	None	
4	Consulting fees	None	

_			
5	Payment or honoraria for lectures, presentations,	None	
	speakers bureaus, manuscript writing or educational events		
6	Payment for expert testimony	None	
7	Support for attending meetings and/or travel	None	
8	Patents planned, issued or pending	None	
9	Participation on a Data Safety Monitoring Board or Advisory Board	None	
10	Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid	NIHR	NIHR BRC Director and Editor in Chief, Journal of Infection
11	Stock or stock options	None	
12	Receipt of equipment, materials, drugs, medical writing, gifts or other services	None	
13	Other financial or non- financial interests	None	

Date:\_\_01/04/2021

Your Name:\_\_Catherine J. Woods

Manuscript Title: \_\_\_\_\_\_ Antibiotics for lower Respiratory Tract Infection in Children presenting in Primary Care (ARTIC PC): a randomised placebo controlled trial with nested qualitative, observational and economic studies

Manuscript number (if known):\_ N/A ( but the grant reference is 13/34/64)\_\_\_\_\_\_

In the interest of transparency, we ask you to disclose all relationships/activities/interests listed below that are related to the content of your manuscript. "Related" means any relation with for-profit or not-for-profit third parties whose interests may be affected by the content of the manuscript. Disclosure represents a commitment to transparency and does not necessarily indicate a bias. If you are in doubt about whether to list a relationship/activity/interest, it is preferable that you do so.

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		Name all entities with whom you have this relationship or indicate none (add rows as needed)	Specifications/Comments (e.g., if payments were made to you or to your institution)
		Time frame: Since the initial	planning of the work
1	All support for the present manuscript (e.g., funding, provision of study materials, medical writing, article processing charges, etc.) <b>No time limit for this item.</b>	NIHR HTA grant	Funds provided to the institution
2	Grants or contracts from	None	
	any entity (if not indicated in item #1 above).		

3	Royalties or licenses	None	
4	Consulting fees	None	
5	Payment or honoraria for	Nana	
Э	lectures, presentations,	None	
	speakers bureaus,		
	manuscript writing or		
	educational events		
6	Payment for expert	None	
	testimony		
7	Support for attending	None	
	meetings and/or travel		
8	Patents planned, issued or pending	None	
	pending		
9	Participation on a Data	None	
5	Safety Monitoring Board or		
	Advisory Board		
10	Leadership or fiduciary role	None	
	in other board, society,		
	committee or advocacy		
	group, paid or unpaid		
11	Stock or stock options	None	
12	Receipt of equipment,	None	
12	materials, drugs, medical		
	writing, gifts or other		
	services		
13	Other financial or non-	None	
	financial interests		

Date:\_December 1, 2021\_\_\_\_\_\_ Your Name:\_Christopher C Butler \_\_\_\_\_\_ Manuscript Title:\_ Antibiotics for lower Respiratory Tract Infection in Children presenting in Primary Care (ARTIC PC): a randomised placebo controlled trial with nested qualitative, observational and economic studies

Manuscript number (if known):\_\_\_\_\_

In the interest of transparency, we ask you to disclose all relationships/activities/interests listed below that are related to the content of your manuscript. "Related" means any relation with for-profit or not-for-profit third parties whose interests may be affected by the content of the manuscript. Disclosure represents a commitment to transparency and does not necessarily indicate a bias. If you are in doubt about whether to list a relationship/activity/interest, it is preferable that you do so.

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		Name all entities with whom you have this relationship or indicate none (add rows as needed)	Specifications/Comments (e.g., if payments were made to you or to your institution)
		Time frame: Since the initial	planning of the work
1	All support for the present manuscript (e.g., funding,	NIHR	Grant funding for this project
	provision of study materials,		
	medical writing, article		
	processing charges, etc.)		
	No time limit for this item.		
		Time frame: past	36 months
2	Grants or contracts from	None	
	any entity (if not indicated		
	in item #1 above).		
3	Royalties or licenses	None	

4	Consulting fees	None	
-	Deverant er beneverie fer	Neze	
5	Payment or honoraria for lectures, presentations,	None	
	speakers bureaus,		
	manuscript writing or		
	educational events		
6	Payment for expert	None	
	testimony		
7	Support for attending	None	
'	meetings and/or travel		
8	Patents planned, issued or	None	
	pending		
0	Douticipation on a Data	Nega	
9	Participation on a Data Safety Monitoring Board or	None	
	Advisory Board		
10	Leadership or fiduciary role	NIHR	
	in other board, society,		
	committee or advocacy		
11	group, paid or unpaid	Nono	
11	Stock or stock options	None	
12	Receipt of equipment,	None	
	materials, drugs, medical		
	writing, gifts or other services		
13	Other financial or non-	None	
	financial interests		

In the interest of transparency, we ask you to disclose all relationships/activities/interests listed below that are related to the content of your manuscript. "Related" means any relation with for-profit or not-for-profit third parties whose interests may be affected by the content of the manuscript. Disclosure represents a commitment to transparency and does not necessarily indicate a bias. If you are in doubt about whether to list a relationship/activity/interest, it is preferable that you do so.

The following questions apply to the author's relationships/activities/interests as they relate to the <u>current</u> <u>manuscript only</u>.

The author's relationships/activities/interests should be <u>defined broadly</u>. For example, if your manuscript pertains to the epidemiology of hypertension, you should declare all relationships with manufacturers of antihypertensive medication, even if that medication is not mentioned in the manuscript.

		Name all entities with whom you have this relationship or indicate none (add rows as needed)	Specifications/Comments (e.g., if payments were made to you or to your institution)
		Time frame: Since the initial	planning of the work
1	All support for the present manuscript (e.g., funding, provision of study materials, medical writing, article processing charges, etc.) <b>No time limit for this item.</b>	NIHR HTA	Payments to the institution
		Time frame: past	36 months
2	Grants or contracts from any entity (if not indicated in item #1 above).	Pfizer (investigator led pneuomococcal carriage) Clinical trial investigator – multiple contract commercial trials	Payments to the institution Payments to the Institution (no personal payments of any kind)
3	Royalties or licenses	None	

4	Consulting fees	Advisory board participation - paediatric	All payments to institution – no personal payments of any kind
		vaccines Pfizer, AstraZeneca, Medimmune, Sanofi, Seqirus, Merck	
-			
5	Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or educational events	Pfizer (meningococcal and pneumococcal vaccines)	All payments to institution – no personal payments of any kind
6	Payment for expert	None	
0	testimony		
7	Support for attending meetings and/or travel	None	None beyond meetings above
8	Patents planned, issued or pending	None	
9	Participation on a Data Safety Monitoring Board or Advisory Board	Member of RECOVERY Trial Steering Committee	No payments
10	Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid	Member of HTA commissioning board and other NIHR national groups	unpaid
11	Stock or stock options	None	
12	Receipt of equipment,	None	
	materials, drugs, medical writing, gifts or other services		
13	Other financial or non-	None	
	financial interests		

Date:\_\_19.03.21\_\_

Your Name Geraldine M. Leydon:\_\_

Manuscript Title:\_ Antibiotics for lower Respiratory Tract Infection in Children presenting in Primary Care (ARTIC PC): a randomised placebo controlled trial with nested qualitative, observational and economic studies

Manuscript number (if known):\_\_\_\_\_not known\_\_\_\_\_

In the interest of transparency, we ask you to disclose all relationships/activities/interests listed below that are related to the content of your manuscript. "Related" means any relation with for-profit or not-for-profit third parties whose interests may be affected by the content of the manuscript. Disclosure represents a commitment to transparency and does not necessarily indicate a bias. If you are in doubt about whether to list a relationship/activity/interest, it is preferable that you do so.

The following questions apply to the author's relationships/activities/interests as they relate to the <u>current</u> <u>manuscript only</u>.

The author's relationships/activities/interests should be <u>defined broadly</u>. For example, if your manuscript pertains to the epidemiology of hypertension, you should declare all relationships with manufacturers of antihypertensive medication, even if that medication is not mentioned in the manuscript.

		Name all entities with whom you have this relationship or indicate none (add rows as needed)	Specifications/Comments (e.g., if payments were made to you or to your institution)
	T	Time frame: Since the initial	planning of the work
1	All support for the present	None	
	manuscript (e.g., funding,		
	provision of study materials,		
	medical writing, article		
	processing charges, etc.)		
	No time limit for this item.		
		Time frame: past	36 months
2	Grants or contracts from	None	
	any entity (if not indicated		
	in item #1 above).		
3	Royalties or licenses	None	
4	Consulting fees	None	

F	Doumont or here are the far	Nana	
5	Payment or honoraria for	None	
	lectures, presentations,		
	speakers bureaus,		
	manuscript writing or		
6	educational events	N.	
6	Payment for expert	None	
	testimony		
7	Support for attending	None	
	meetings and/or travel		
8	Patents planned, issued or	None	
	pending		
9	Participation on a Data	None	
	Safety Monitoring Board or		
	Advisory Board		
10	Leadership or fiduciary role	None	
	in other board, society,		
	committee or advocacy		
	group, paid or unpaid		
11	Stock or stock options	None	
12	Receipt of equipment,	None	
1	materials, drugs, medical		
1	writing, gifts or other		
1	services		
13	Other financial or non-	None	
	financial interests		

Date:\_\_\_\_\_19/3/2021\_\_\_

Your Name: \_\_\_\_Mandy Wan\_\_\_

**Manuscript Title**: Antibiotics for lower Respiratory Tract Infection in Children presenting in Primary Care (ARTIC PC): a randomised placebo controlled trial with nested qualitative, observational and economic studies

#### Manuscript number (if known):\_\_\_\_\_

In the interest of transparency, we ask you to disclose all relationships/activities/interests listed below that are related to the content of your manuscript. "Related" means any relation with for-profit or not-for-profit third parties whose interests may be affected by the content of the manuscript. Disclosure represents a commitment to transparency and does not necessarily indicate a bias. If you are in doubt about whether to list a relationship/activity/interest, it is preferable that you do so.

The following questions apply to the author's relationships/activities/interests as they relate to the <u>current</u> <u>manuscript only</u>.

The author's relationships/activities/interests should be <u>defined broadly</u>. For example, if your manuscript pertains to the epidemiology of hypertension, you should declare all relationships with manufacturers of antihypertensive medication, even if that medication is not mentioned in the manuscript.

		Name all entities with whom you have this relationship or indicate none (add rows as needed)	Specifications/Comments (e.g., if payments were made to you or to your institution)
		Time frame: Since the initial	
1	All support for the present	NIHR	Grant funding for this project
	manuscript (e.g., funding,		
	provision of study materials,		
	medical writing, article		
	processing charges, etc.)		
	No time limit for this item.		
		Time frame: past	36 months
2	Grants or contracts from	None	(NB an NIHR doctoral fellowship – but that is not a coi)
	any entity (if not indicated		
	in item #1 above).		
3	Royalties or licenses	None	
4	Consulting fees	None	

		T	
_			
5	Payment or honoraria for lectures, presentations,	None	
	speakers bureaus,		
	manuscript writing or		
6	educational events	News	
6	Payment for expert	None	
	testimony		
7		News	
/	Support for attending	None	
	meetings and/or travel		
8	Patents planned, issued or	None	
	pending		
9	Participation on a Data	None	
	Safety Monitoring Board or		
	Advisory Board		
10	Leadership or fiduciary role	None	
	in other board, society,		
	committee or advocacy		
11	group, paid or unpaid Stock or stock options	None	
11			
12	Receipt of equipment,	None	
12	materials, drugs, medical		
	writing, gifts or other		
	services		
13	Other financial or non-	None	
	financial interests		

Date:\_\_\_19<sup>th</sup> March 2021\_\_\_\_\_ Your Name:\_\_\_Kerenza Hood\_\_\_\_\_ Manuscript Title:\_ Antibiotics for lower Respiratory Tract Infection in Children presenting in Primary Care (ARTIC PC): a randomised placebo controlled trial with nested qualitative, observational and economic studies

Manuscript number (if known):\_\_\_\_\_

In the interest of transparency, we ask you to disclose all relationships/activities/interests listed below that are related to the content of your manuscript. "Related" means any relation with for-profit or not-for-profit third parties whose interests may be affected by the content of the manuscript. Disclosure represents a commitment to transparency and does not necessarily indicate a bias. If you are in doubt about whether to list a relationship/activity/interest, it is preferable that you do so.

The following questions apply to the author's relationships/activities/interests as they relate to the <u>current</u> <u>manuscript only</u>.

The author's relationships/activities/interests should be <u>defined broadly</u>. For example, if your manuscript pertains to the epidemiology of hypertension, you should declare all relationships with manufacturers of antihypertensive medication, even if that medication is not mentioned in the manuscript.

		Name all entities with whom you have this relationship or indicate none (add rows as needed)	Specifications/Comments (e.g., if payments were made to you or to your institution)
		Time frame: Since the initial	planning of the work
1	All support for the present	NIHR	Grant funding for this project
	manuscript (e.g., funding,		
	provision of study materials,		
	medical writing, article		
	processing charges, etc.)		
	No time limit for this item.		
		Time frame: past	36 months
2	Grants or contracts from	None	
	any entity (if not indicated		
	in item #1 above).		
3	Royalties or licenses	None	

4	Consulting fees	None	
5	Payment or honoraria for lectures, presentations, speakers bureaus,	None	
	manuscript writing or educational events		
6	Payment for expert testimony	None	
7	Support for attending meetings and/or travel	None	
8	Patents planned, issued or	None	
	pending		
9	Participation on a Data	None	
	Safety Monitoring Board or		
	Advisory Board		
10	Leadership or fiduciary role in other board, society,	NIHR	Member of the HTA General Committee and the HTA Funding Strategy Group
	committee or advocacy		
	group, paid or unpaid		
11	Stock or stock options	None	
12	Receipt of equipment,	None	
	materials, drugs, medical		
	writing, gifts or other services		
13	Other financial or non-	None	
	financial interests		

#### Date:\_\_08/12/2021\_

Your Name:\_\_Jane Whitehurst\_

**Manuscript Title:** Antibiotics for lower Respiratory Tract Infection in Children presenting in Primary Care (ARTIC PC): a randomised placebo controlled trial with nested qualitative, observational and economic studies

Manuscript number (if known):\_\_\_\_\_

In the interest of transparency, we ask you to disclose all relationships/activities/interests listed below that are related to the content of your manuscript. "Related" means any relation with for-profit or not-for-profit third parties whose interests may be affected by the content of the manuscript. Disclosure represents a commitment to transparency and does not necessarily indicate a bias. If you are in doubt about whether to list a relationship/activity/interest, it is preferable that you do so.

The following questions apply to the author's relationships/activities/interests as they relate to the <u>current</u> <u>manuscript only</u>.

The author's relationships/activities/interests should be <u>defined broadly</u>. For example, if your manuscript pertains to the epidemiology of hypertension, you should declare all relationships with manufacturers of antihypertensive medication, even if that medication is not mentioned in the manuscript.

		Name all entities with whom you have this relationship or indicate none (add rows as needed)	Specifications/Comments (e.g., if payments were made to you or to your institution)
		Time frame: Since the initial	planning of the work
1	All support for the present		
	manuscript (e.g., funding,		
	provision of study materials,		
	medical writing, article		
	processing charges, etc.)		
	No time limit for this item.		
		Time frame: past	36 months
2	Grants or contracts from	None	
	any entity (if not indicated		
	in item #1 above).		
3	Royalties or licenses	None	

4	Consulting fees	None	
5	Payment or honoraria for	University of	Public and Patient Involvement honoraria
	lectures, presentations, speakers bureaus, manuscript writing or educational events	Southampton	
6	Payment for expert testimony	None	
7	Support for attending meetings and/or travel	University of Southampton	Public and Patient Involvement travel expenses
8	Patents planned, issued or pending	None	
9	Participation on a Data Safety Monitoring Board or Advisory Board	None	
10	Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid	None	
11	Stock or stock options	None	
12	Receipt of equipment, materials, drugs, medical writing, gifts or other services	None	
13	Other financial or non- financial interests	None	

Date: 23/12/21 Your Name: Vamantha RicHARDS-HALL

Manuscript Title:\_ Antibiotics for lower Respiratory Tract Infection in Children presenting in Primary Care (ARTIC PC): a randomised placebo controlled trial with nested qualitative, observational and economic studies

Manuscript number (if known):\_

In the interest of transparency, we ask you to disclose all relationships/activities/interests listed below that are related to the content of your manuscript. "Related" means any relation with for-profit or not-for-profit third parties whose interests may be affected by the content of the manuscript. Disclosure represents a commitment to transparency and does not necessarily indicate a bias. If you are in doubt about whether to list a relationship/activity/interest, it is preferable that you do so.

The following questions apply to the author's relationships/activities/interests as they relate to the current manuscript only.

The author's relationships/activities/interests should be defined broadly. For example, if your manuscript pertains to the epidemiology of hypertension, you should declare all relationships with manufacturers of antihypertensive medication, even if that medication is not mentioned in the manuscript.

	Name all entities with whom you have this relationship or indicate none (add rows as needed)	Specifications/Comments (e.g., if payments were made to you or to your institution)
<ol> <li>All support for the present manuscript (e.g., funding, provision of study materials, medical writing, article processing charges, etc.)</li> <li>No time limit for this item.</li> </ol>	,	Grant funding for this project
	Time frame: no	

2	Grants or contracts from any entity (if not indicated in item #1 above).	X_None
3	Royalties or licenses	X_None
4	Consulting fees	⊀ None

5 Payment or honoraria for lectures, presentations,	_X_None
speakers bureaus, manuscript writing or educational events	
6 Payment for expert	X None
testimony	
7 Support for attending meetings and/or travel	None
8 Patents planned, issued or pending	
9 Participation on a Data Safety Monitoring Board or Advisory Board	<u>None</u>
10 Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid	NIHR
11 Stock or stock options	None
12 Receipt of equipment, materials, drugs, medical writing, gifts or other services	None
13 Other financial or non- financial interests	None

Date:\_\_01/04/2021\_

Your Name:\_\_Peter W. F. Smith\_

Manuscript Title:\_\_Antibiotics for lower Respiratory Tract Infection in Children presenting in Primary Care (ARTIC PC): a randomised placebo controlled trial with nested qualitative, observational and economic studies

Manuscript number (if known):\_\_N/A ( but the grant reference is 13/34/64)\_

In the interest of transparency, we ask you to disclose all relationships/activities/interests listed below that are related to the content of your manuscript. "Related" means any relation with for-profit or not-for-profit third parties whose interests may be affected by the content of the manuscript. Disclosure represents a commitment to transparency and does not necessarily indicate a bias. If you are in doubt about whether to list a relationship/activity/interest, it is preferable that you do so.

The following questions apply to the author's relationships/activities/interests as they relate to the <u>current</u> <u>manuscript only</u>.

The author's relationships/activities/interests should be <u>defined broadly</u>. For example, if your manuscript pertains to the epidemiology of hypertension, you should declare all relationships with manufacturers of antihypertensive medication, even if that medication is not mentioned in the manuscript.

		Name all entities with whom you have this relationship or indicate none (add rows as needed)	Specifications/Comments (e.g., if payments were made to you or to your institution)
		Time frame: Since the initial	planning of the work
1	All support for the present	NIHR HTA grant	Funds provided to the institution
	manuscript (e.g., funding,		
	provision of study materials,		
	medical writing, article		
	processing charges, etc.)		
	No time limit for this item.		
		Time frame: past	36 months
2	Grants or contracts from	None	
	any entity (if not indicated		
	in item #1 above).		
3	Royalties or licenses	None	
4	Consulting fees	None	

5	Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or educational events	None	
6	Payment for expert testimony	None	
7	Support for attending meetings and/or travel	None	
8	Patents planned, issued or pending	None	
9	Participation on a Data Safety Monitoring Board or Advisory Board	None	
10	Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid	None	
11	Stock or stock options	None	
12	Receipt of equipment, materials, drugs, medical writing, gifts or other services	None	
13	Other financial or non- financial interests	None	

Date:\_\_\_8.12.2021\_\_

Your Name:\_\_\_Mike Thomas\_\_

**Manuscript Title:**\_Antibiotics for lower Respiratory Tract Infection in Children presenting in Primary Care (ARTIC PC): a randomised placebo controlled trial with nested qualitative, observational and economic studies

Manuscript number (if known):\_\_\_\_\_

In the interest of transparency, we ask you to disclose all relationships/activities/interests listed below that are related to the content of your manuscript. "Related" means any relation with for-profit or not-for-profit third parties whose interests may be affected by the content of the manuscript. Disclosure represents a commitment to transparency and does not necessarily indicate a bias. If you are in doubt about whether to list a relationship/activity/interest, it is preferable that you do so.

The following questions apply to the author's relationships/activities/interests as they relate to the <u>current</u> <u>manuscript only</u>.

The author's relationships/activities/interests should be <u>defined broadly</u>. For example, if your manuscript pertains to the epidemiology of hypertension, you should declare all relationships with manufacturers of antihypertensive medication, even if that medication is not mentioned in the manuscript.

		Name all entities with whom you have this relationship or indicate none (add rows as needed)	Specifications/Comments (e.g., if payments were made to you or to your institution)
		Time frame: Since the initial	planning of the work
1	All support for the present	NIHR	Grant funding for this project
	manuscript (e.g., funding,		
	provision of study materials,		
	medical writing, article		
	processing charges, etc.)		
	No time limit for this item.		
		Time frame: past	36 months
2	Grants or contracts from	None	
	any entity (if not indicated		
	in item #1 above).		
3	Royalties or licenses	None	

4	Conculting food	None	
4	Consulting fees		
5	Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or	None	
	educational events		
6	Payment for expert testimony	None	
7	Support for attending	None	
	meetings and/or travel		
8	Patents planned, issued or pending	None	
9	Participation on a Data Safety Monitoring Board or Advisory Board	None	
10	Leadership or fiduciary role in other board, society, committee or advocacy	NIHR	
	group, paid or unpaid		
11	Stock or stock options	None	
	·		
12	Receipt of equipment, materials, drugs, medical	None	
	writing, gifts or other	<u> </u>	
	services		
13	Other financial or non-	None	
15	financial interests		

Date:\_\_\_\_\_3/Feb/2022\_\_\_\_\_

Your Name: \_\_\_\_\_ Michael Moore \_\_\_\_

Manuscript Title:\_ Antibiotics for lower Respiratory Tract Infection in Children presenting in Primary Care (ARTIC PC): a randomised placebo controlled trial with nested qualitative, observational and economic studies

Manuscript number (if known):\_\_\_\_\_ HTA 13/34/64 Final Report \_\_\_\_\_\_

In the interest of transparency, we ask you to disclose all relationships/activities/interests listed below that are related to the content of your manuscript. "Related" means any relation with for-profit or not-for-profit third parties whose interests may be affected by the content of the manuscript. Disclosure represents a commitment to transparency and does not necessarily indicate a bias. If you are in doubt about whether to list a relationship/activity/interest, it is preferable that you do so.

The following questions apply to the author's relationships/activities/interests as they relate to the <u>current</u> <u>manuscript only</u>.

The author's relationships/activities/interests should be <u>defined broadly</u>. For example, if your manuscript pertains to the epidemiology of hypertension, you should declare all relationships with manufacturers of antihypertensive medication, even if that medication is not mentioned in the manuscript.

		Name all entities with whom you have this relationship or indicate none (add rows as needed)	Specifications/Comments (e.g., if payments were made to you or to your institution)
		Time frame: Since the initial	planning of the work
1	All support for the present	NIHR	Grant funding for this project
	manuscript (e.g., funding, provision of study materials,		
	medical writing, article		
	processing charges, etc.)		
	No time limit for this item.		
		Time frame: past	36 months
2	Grants or contracts from	None	
	any entity (if not indicated		
	in item #1 above).		
3	Royalties or licenses	None	

4	Consulting fees	None	
5	Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or educational events	None	
6	Payment for expert testimony	None	
7	Support for attending meetings and/or travel	None	
8	Patents planned, issued or pending	None	
9	Participation on a Data Safety Monitoring Board or Advisory Board	None involving primary conflict	
10	Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid	None involving primary conflict	
11	Stock or stock options	None	
12	Receipt of equipment, materials, drugs, medical writing, gifts or other services	None	
13	Other financial or non- financial interests	None	

Date:\_\_\_\_07-12-2021\_\_\_

Your Name: \_\_\_\_ Theo Verheij \_\_\_\_

**Manuscript Title:\_** Antibiotics for lower Respiratory Tract Infection in Children presenting in Primary Care (ARTIC PC): a randomised placebo controlled trial with nested qualitative, observational and economic studies

Manuscript number (if known):\_\_\_\_\_

In the interest of transparency, we ask you to disclose all relationships/activities/interests listed below that are related to the content of your manuscript. "Related" means any relation with for-profit or not-for-profit third parties whose interests may be affected by the content of the manuscript. Disclosure represents a commitment to transparency and does not necessarily indicate a bias. If you are in doubt about whether to list a relationship/activity/interest, it is preferable that you do so.

The following questions apply to the author's relationships/activities/interests as they relate to the <u>current</u> <u>manuscript only</u>.

The author's relationships/activities/interests should be <u>defined broadly</u>. For example, if your manuscript pertains to the epidemiology of hypertension, you should declare all relationships with manufacturers of antihypertensive medication, even if that medication is not mentioned in the manuscript.

		Name all entities with whom you have this relationship or indicate none (add rows as needed)	Specifications/Comments (e.g., if payments were made to you or to your institution)
		Time frame: Since the initial	planning of the work
1	All support for the present	NIHR	Grant funding for this project
	manuscript (e.g., funding,		
	provision of study materials,		
	medical writing, article		
	processing charges, etc.)		
	No time limit for this item.		
		Time frame: past	36 months
2	Grants or contracts from any entity (if not indicated	Other grants	Grants from EU and The Netherlands Organization of Health Research and Development, during the conduct
	in item #1 above).		of the study; grants from Abbott, Becton Dickinson and Bio-Merieux, grants from Janssen Pharmaceuticals, outside the submitted work

3	Royalties or licenses	None	
4	Consulting fees	None	
5	Payment or honoraria for	None	
	lectures, presentations,		
	speakers bureaus,		
	manuscript writing or		
6	educational events	Nere	
6	Payment for expert testimony	None	
	testimony		
7	Support for attending	None	
'	meetings and/or travel		
	meetings unity of traver		
8	Patents planned, issued or	None	
	pending		
9	Participation on a Data	None	
	Safety Monitoring Board or		
	Advisory Board		
10	Leadership or fiduciary role	NIHR	
	in other board, society,		
	committee or advocacy		
11	group, paid or unpaid Stock or stock options	Nono	
11	Stock of Stock options	None	
12	Receipt of equipment,	None	
	materials, drugs, medical		
	writing, gifts or other		
	services		
13		None	