ICMJE DISCLOSURE FORM

Date: 1/6/2022

Your Name: Daniel Horner

Manuscript Title: An evidence synthesis and cost-effectiveness study of Venous ThromboEmbolism risk Assessment Models for hospital inpatients: the VTEAM project

Manuscript Number (if known): Click or tap here to enter text.

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 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.

In item #1 below, report all support for the work reported in this manuscript without time limit. For all other items, the time frame for disclosure is the past 36 months.

		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.**	☐ None	
		This project was funded by the NIHR Health Technology Assessment programme (project number NIHR127454). This report presents independent research commissioned by the National Institute for Health Research (NIHR). The views expressed are those of the authors and not necessarily those of the NHS, the NIHR or the Department of Health. The views and opinions expressed by the interviewees in this publication are those of the interviewees and do not necessarily reflect those of the authors, those of the NHS, the NIHR, NETSCC, the Health Technology Assessment programme or the Department of Health.	All funding was managed through the University of Sheffield, as the study sponsor.
			Click the tab key to add additional rows.
Time frame: past 36 months			
2	Grants or contracts from any entity (if not indicated in item #1 above).	☒ **None**	

		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)
3	Royalties or licenses	☒ **None**	
4	Consulting fees	☐ **None**	
		Dr Dan Horner has previously acted as a paid subject matter expert on venous thromboembolic disease for the Healthcare Safety Investigation Branch, NHS Improvement, UK	Single payment of one day standard clinical rate, yet to be received.
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**	
		I am currently acting as a DSMB member for the SARC feasibility trial, looking at salbutamol for renal colic.	Unfunded

		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)
		I am a TSC member for the Target Trial, involving the use of early CTCA evaluation for patients with atraumatic chest pain.	Unfunded
		I am TSC chair for the ADVENT study, a pilot project looking at the feasibility of hand held doppler assessment with AI support algorithm for rapid diagnosis of DVT	Unfunded
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**	

Please place an "X" next to the following statement to indicate your agreement:

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