



## POTENTIAL CONFLICT OF INTEREST AND FINANCIAL DISCLOSURE FORM

It is the policy of STEM CELLS® Journal to ensure balance, independence, objectivity, and scientific rigor in all of its educational activities through the disclosure of financial interests and other relationships.

**POLICY:** In accordance with Journal policy, all persons who affect the content of an article regarding the products or services of a commercial interest must disclose any financial relationships with that commercial interest occurring within the last 12 months. STEM CELLS® abides by a policy of anonymous peer review: any potential conflicts of interest are reviewed by the Editorial Board with the ad hoc assistance of external reviewers and are resolved prior to publication.

**DEFINING A CONFLICT OF INTEREST:** A conflict of interest exists when an individual has both a **financial relationship** with a commercial interest and **the opportunity to affect the content of an article** about the product or services of that commercial interest. STEM CELLS® has faith in the integrity of the individuals who present educational activities. However, to avoid the appearance of any conflict of interest, this form has been adopted to identify and resolve any potential conflicts of interest.

**CRITERIA FOR FINANCIAL DISCLOSURE:** A *commercial interest* is defined as any entity producing, marketing, re-selling, or distributing health care goods or services consumed by, or used on, patients. Relationships with governmental agencies (e.g., the National Institutes of Health) do not have to be disclosed. Principal investigators must report research funding relationships under "Research" even if those funds were disbursed to an institution. In addition to your own disclosure, you must disclose financial relationships your spouse or life partner has with applicable commercial interests. A spouse or life partner's disclosure information should be included with your disclosure information in the table below (and marked accordingly).

**Manuscript Title:** Tear Secreting Lacrispheres from Human Lacrimal Gland

**Name of Discloser:**

I am a: ☒ Co-Author ☐ Corresponding Author

**Do you have any financial relationships to report?**

☐ Yes ☒ No

If yes, please provide relevant information in table below.

**Types of financial relationships and the companies with whom we (I and/or my spouse/life partner) have relationships are as follows:**

Check boxes	Type of financial relationship WITHIN THE PAST 12 MONTHS ONLY	Indicate applicable commercial interest(s) WITHIN THE PAST 12 MONTHS ONLY	Compensated ✓	Uncompensated ✓
<input type="checkbox"/>	Employment/leadership position		<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	Intellectual property rights/Inventor or patent holder		<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	Consultant/Advisory role		<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	Honoraria received directly from commercial interest or their agents (e.g., speakers' bureaus)		<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	Research funding/Contracted research (including funds paid to your institution)		<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	Ownership interest (stocks, stock options, or other ownership interest excluding diversified mutual funds)		<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	Expert testimony		<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	Other		<input type="checkbox"/>	<input type="checkbox"/>

If you reported relationships in the chart above, will you nonetheless be able to provide an unbiased article? ☐ Yes ☐ No

By signing below, I represent that the foregoing information is complete and truthful. I will notify the editorial office if there are any changes in my financial relationships prior to the publication of this article.

Signature of Reporting Individual

16th Nov, 2015

Date of Submission

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