3333 Burnet Avenue, MLC-3021 Cincinnati, OH 45229-3039 [journal.pediatrics@cchmc.org](mailto:journal.pediatrics@cchmc.org) (513) 636-7140 513-636-7141 (fax)



[www.jpeds.com](http://www.jpeds.com/) <http://ees.elsevier.com/jpeds>

# AUTHORSHIP AGREEMENT AND CONTRIBUTION

Please submit one (1) form signed by ALL authors

All submissions to *The Journal of Pediatrics* must adhere to and provide information in accordance with the International Committee of Medical Journal Editors’ (ICMJE) [recommendations](http://www.icmje.org/icmje-recommendations.pdf) and [guidelines](http://www.icmje.org/recommendations/browse/roles-and-responsibilities/defining-the-role-of-authors-and-contributors.html) pertaining to authorship criteria. Only individuals who fulfill the ICMJE’s conditions for authorship should be included in the author list. Individuals who have contributed to the study, but do not meet the requirements for authorship, should be included in the Acknowledgments section.

By signing this authorship agreement and contribution form, authors agree that

* The manuscript represents original work and there are no prior publications or submissions with overlapping information, OR
* Any prior publications with overlapping information, including studies and patients have been disclosed and a copy of the work(s) uploaded with this submission;
* The manuscript has not been and will not be submitted to any other journal while it is under consideration by *The Journal of Pediatrics*; and
* All conflicts of interest, real and perceived, and funding sources have been reported

Article title: Click here to enter text.

Date submitted: Click here to enter text.

Corresponding author: Click here to enter text. Email: Click here to enter text.

I confirm that I am an author on the above mentioned manuscript, which is currently being submitted to *The Journal of Pediatrics*. My authorship contribution consisted of the following (note: authors must meet all four conditions):

|  |  |
| --- | --- |
| 1. Substantial contributions to the study, including (please mark all that are applicable): | |
| Conceptualization/design | Funding acquisition |
| Methodology | Data curation |
| Investigation | Formal analysis |
| Supervision/oversight | Resources |
|  |  |
| 1. Participation in the writing and/or revision, including: | |
| Writing – drafting the initial manuscript  Writing – review or editing of the manuscript | |
|  |  |
| 1. I gave final approval of the version to be published | |
| Yes  No | |
|  |  |
| 1. I agree to be accountable for all aspects of the work | |
| Yes  No | |

Click here to enter text. Click here to enter text.

Signature (sign or type name) Date

Author: Click here to enter text. Email: Click here to enter text.

I confirm that I am an author on the above mentioned manuscript, which is currently being submitted to *The Journal of Pediatrics*. My authorship contribution consisted of the following (note: authors must meet all four conditions):

|  |  |
| --- | --- |
| 1. Substantial contributions to the study, including (please mark all that are applicable): | |
| Conceptualization/design | Funding acquisition |
| Methodology | Data curation |
| Investigation | Formal analysis |
| Supervision/oversight | Resources |
|  |  |
| 1. Participation in the writing and/or revision, including: | |
| Writing – drafting the initial manuscript  Writing – review or editing of the manuscript | |
|  |  |
| 1. I gave final approval of the version to be published | |
| Yes  No | |
|  |  |
| 1. I agree to be accountable for all aspects of the work | |
| Yes  No | |

Click here to enter text. Click here to enter text.

Signature (sign or type name) Date

Author: Click here to enter text. Email: Click here to enter text.

I confirm that I am an author on the above mentioned manuscript, which is currently being submitted to *The Journal of Pediatrics*. My authorship contribution consisted of the following (note: authors must meet all four conditions):

|  |  |
| --- | --- |
| 1. Substantial contributions to the study, including (please mark all that are applicable): | |
| Conceptualization/design | Funding acquisition |
| Methodology | Data curation |
| Investigation | Formal analysis |
| Supervision/oversight | Resources |
|  |  |
| 1. Participation in the writing and/or revision, including: | |
| Writing – drafting the initial manuscript  Writing – review or editing of the manuscript | |
|  |  |
| 1. I gave final approval of the version to be published | |
| Yes  No | |
|  |  |
| 1. I agree to be accountable for all aspects of the work | |
| Yes  No | |

Click here to enter text. Click here to enter text.

Signature (sign or type name) Date

Author: Click here to enter text. Email: Click here to enter text.

I confirm that I am an author on the above mentioned manuscript, which is currently being submitted to *The Journal of Pediatrics*. My authorship contribution consisted of the following (note: authors must meet all four conditions):

|  |  |
| --- | --- |
| 1. Substantial contributions to the study, including (please mark all that are applicable): | |
| Conceptualization/design | Funding acquisition |
| Methodology | Data curation |
| Investigation | Formal analysis |
| Supervision/oversight | Resources |
|  |  |
| 1. Participation in the writing and/or revision, including: | |
| Writing – drafting the initial manuscript  Writing – review or editing of the manuscript | |
|  |  |
| 1. I gave final approval of the version to be published | |
| Yes  No | |
|  |  |
| 1. I agree to be accountable for all aspects of the work | |
| Yes  No | |

Click here to enter text. Click here to enter text.

Signature (sign or type name) Date

Author: Click here to enter text. Email: Click here to enter text.

I confirm that I am an author on the above mentioned manuscript, which is currently being submitted to *The Journal of Pediatrics*. My authorship contribution consisted of the following (note: authors must meet all four conditions):

|  |  |
| --- | --- |
| 1. Substantial contributions to the study, including (please mark all that are applicable): | |
| Conceptualization/design | Funding acquisition |
| Methodology | Data curation |
| Investigation | Formal analysis |
| Supervision/oversight | Resources |
|  |  |
| 1. Participation in the writing and/or revision, including: | |
| Writing – drafting the initial manuscript  Writing – review or editing of the manuscript | |
|  |  |
| 1. I gave final approval of the version to be published | |
| Yes  No | |
|  |  |
| 1. I agree to be accountable for all aspects of the work | |
| Yes  No | |

Click here to enter text. Click here to enter text.

Signature (sign or type name) Date

Author: Click here to enter text. Email: Click here to enter text.

I confirm that I am an author on the above mentioned manuscript, which is currently being submitted to *The Journal of Pediatrics*. My authorship contribution consisted of the following (note: authors must meet all four conditions):

|  |  |
| --- | --- |
| 1. Substantial contributions to the study, including (please mark all that are applicable): | |
| Conceptualization/design | Funding acquisition |
| Methodology | Data curation |
| Investigation | Formal analysis |
| Supervision/oversight | Resources |
|  |  |
| 1. Participation in the writing and/or revision, including: | |
| Writing – drafting the initial manuscript  Writing – review or editing of the manuscript | |
|  |  |
| 1. I gave final approval of the version to be published | |
| Yes  No | |
|  |  |
| 1. I agree to be accountable for all aspects of the work | |
| Yes  No | |

Click here to enter text. Click here to enter text.

Signature (sign or type name) Date

Author: Click here to enter text. Email: Click here to enter text.

I confirm that I am an author on the above mentioned manuscript, which is currently being submitted to *The Journal of Pediatrics*. My authorship contribution consisted of the following (note: authors must meet all four conditions):

|  |  |
| --- | --- |
| 1. Substantial contributions to the study, including (please mark all that are applicable): | |
| Conceptualization/design | Funding acquisition |
| Methodology | Data curation |
| Investigation | Formal analysis |
| Supervision/oversight | Resources |
|  |  |
| 1. Participation in the writing and/or revision, including: | |
| Writing – drafting the initial manuscript  Writing – review or editing of the manuscript | |
|  |  |
| 1. I gave final approval of the version to be published | |
| Yes  No | |
|  |  |
| 1. I agree to be accountable for all aspects of the work | |
| Yes  No | |

Click here to enter text. Click here to enter text.

Signature (sign or type name) Date

Author: Click here to enter text. Email: Click here to enter text.

I confirm that I am an author on the above mentioned manuscript, which is currently being submitted to *The Journal of Pediatrics*. My authorship contribution consisted of the following (note: authors must meet all four conditions):

|  |  |
| --- | --- |
| 1. Substantial contributions to the study, including (please mark all that are applicable): | |
| Conceptualization/design | Funding acquisition |
| Methodology | Data curation |
| Investigation | Formal analysis |
| Supervision/oversight | Resources |
|  |  |
| 1. Participation in the writing and/or revision, including: | |
| Writing – drafting the initial manuscript  Writing – review or editing of the manuscript | |
|  |  |
| 1. I gave final approval of the version to be published | |
| Yes  No | |
|  |  |
| 1. I agree to be accountable for all aspects of the work | |
| Yes  No | |

Click here to enter text. Click here to enter text.

Signature (sign or type name) Date

Author: Click here to enter text. Email: Click here to enter text.

I confirm that I am an author on the above mentioned manuscript, which is currently being submitted to *The Journal of Pediatrics*. My authorship contribution consisted of the following (note: authors must meet all four conditions):

|  |  |
| --- | --- |
| 1. Substantial contributions to the study, including (please mark all that are applicable): | |
| Conceptualization/design | Funding acquisition |
| Methodology | Data curation |
| Investigation | Formal analysis |
| Supervision/oversight | Resources |
|  |  |
| 1. Participation in the writing and/or revision, including: | |
| Writing – drafting the initial manuscript  Writing – review or editing of the manuscript | |
|  |  |
| 1. I gave final approval of the version to be published | |
| Yes  No | |
|  |  |
| 1. I agree to be accountable for all aspects of the work | |
| Yes  No | |

Click here to enter text. Click here to enter text.

Signature (sign or type name) Date