

ICMJE Form for Disclosure of Potential Conflicts of Interest

Instructions

The purpose of this form is to provide readers of your manuscript with information about your other interests that could influence how they receive and understand your work. The form is designed to be completed electronically and stored electronically. It contains programming that allows appropriate data display. Each author should submit a separate form and is responsible for the accuracy and completeness of the submitted information. The form is in six parts.

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2. The work under consideration for publication.

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4. Intellectual Property.

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

5. Relationships not covered above.

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Section 1. Identifying Information

1. Given Name (First Name)
Robert

2. Surname (Last Name)
Pettitt

3. Date
14-May-2020

4. Are you the corresponding author? Yes No

5. Manuscript Title
Using wearable technology to monitor exercise intensity and predict VO2max

6. Manuscript Identifying Number (if you know it)
19-251

Section 2. The Work Under Consideration for Publication

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

Are there any relevant conflicts of interest? Yes No

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Section 4. Intellectual Property -- Patents & Copyrights

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Section 6. Disclosure Statement

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Dr. Pettitt has nothing to disclose.

Evaluation and Feedback

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name) Sarah	2. Surname (Last Name) Fretti	3. Date 20-April-2020
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Robert Pettitt
5. Manuscript Title Using wearable technology to monitor exercise intensity and predict VO2max		
6. Manuscript Identifying Number (if you know it) mHealth-19-251		

Section 2. The Work Under Consideration for Publication

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Are there any relevant conflicts of interest? Yes No

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Section 4. Intellectual Property -- Patents & Copyrights

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Dr. Fretti has nothing to disclose.

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Section 1. Identifying Information

1. Given Name (First Name)
Michael

2. Surname (Last Name)
Kantor

3. Date
18-April-2020

4. Are you the corresponding author?

Yes No

Corresponding Author's Name
Robert W. Pettitt

5. Manuscript Title
Using wearable technology to monitor exercise intensity and predict VO2 max

6. Manuscript Identifying Number (if you know it)
mHealth-19-251

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Section 1. Identifying Information

1. Given Name (First Name)
Coral

2. Surname (Last Name)
Gubler

3. Date
20-April-2020

4. Are you the corresponding author? Yes No

Corresponding Author's Name
Robert Pettit

5. Manuscript Title
"Invited editorial commentary on the article "Assessing the ability of the Fitbit Charge 2 to accurately predict vo2max"

6. Manuscript Identifying Number (if you know it)
mHealth-19-251

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