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| ICMJE DISCLOSURE FORM | |
| **Date:** | 10/24/2021 |
| **Your Name:** | Dr Anton van Dellen |
| **Manuscript Title:** | What the psychiatrist needs to know about the coroner’s court in England and Wales. |
| **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. | |

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| **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** |  |  |  | | --- | --- | |  |  | |  |  | |  | Click the tab key to add additional rows. | | |
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| **2** | | Grants or contracts from any entity (if not indicated in item #1 above). | |  |  | | --- | --- | |  | **None** |  |  |  | | --- | --- | | London Borough of Hammersmith and Fulham | Payments for work as an Assistant Coroner | |  |  | |  |  | | |
| **3** | | Royalties or licenses | |  |  | | --- | --- | |  | **None** |  |  |  | | --- | --- | |  |  | |  |  | |  |  | | |
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| **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** |  |  |  | | --- | --- | | Inner Temple | Non-paid | | Bar Council | Non-paid | |  |  | | |
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| **12** | | Receipt of equipment, materials, drugs, medical writing, gifts or other services | |  |  | | --- | --- | |  | **None** |  |  |  | | --- | --- | |  |  | |  |  | |  |  | | |
| **13** | | Other financial or non-financial interests | |  |  | | --- | --- | |  | **None** |  |  |  | | --- | --- | | Fraser Chambers | Payment for work as a barrister | |  |  | |  |  | | |
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