ICMJE Form for Disclosure of Potential Conflicts of Interest

**Instructions**

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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)**
   Charlotte M

2. **Surname (Last Name)**
   Niemeyer

3. **Date**
   23-July-2014

4. **Are you the corresponding author?**
   - Yes ☑
   - No

5. **Manuscript Title**
   Criteria for evaluating response and outcome in clinical trials for children with juvenile myelomonocytic leukemia

6. **Manuscript Identifying Number (if you know it)**
   HAEMATOL/2014/109892

### 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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- Yes  
- No ☑

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Dr. Niemeyer has nothing to disclose.

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Section 1. Identifying Information

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2. Surname (Last Name)  
Loh

3. Date  
23-July-2014

4. Are you the corresponding author?  
☐ Yes  ✔ No  

Corresponding Author’s Name
Charlotte M Niemeyer

5. Manuscript Title  
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HAEMATOL/2014/109892

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Section 1. Identifying Information

1. Given Name (First Name)  
   Annamaria

2. Surname (Last Name)  
   M Cseh

3. Date  
   23-July-2014

4. Are you the corresponding author?  
   ☐ Yes  ✔ No  
   Corresponding Author’s Name  
   Charlotte M Niemeyer

5. Manuscript Title  
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6. Manuscript Identifying Number (if you know it)  
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Dr. Cseh has nothing to disclose.

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Cooper
ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)  
   Todd

2. Surname (Last Name)  
   Cooper

3. Date  
   23-July-2014

4. Are you the corresponding author?  
   ☐ Yes  ☑ No  
   Corresponding Author's Name  
   Charlotte Niemeyer

5. Manuscript Title  
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6. Manuscript Identifying Number (if you know it)  
   HAEMATOLOGY/2014/109892

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Dr. Cooper has nothing to disclose.

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<table>
<thead>
<tr>
<th>Given Name (First Name)</th>
<th>Surname (Last Name)</th>
<th>Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>Christopher</td>
<td>C Dvorak</td>
<td>22-July-2014</td>
</tr>
</tbody>
</table>

4. Are you the corresponding author? □ Yes ☑ No

5. Manuscript Title
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6. Manuscript Identifying Number (if you know it)
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Dr. Dvorak has nothing to disclose.

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)  Rebecca
2. Surname (Last Name)  Chan
3. Date  22-July-2014
4. Are you the corresponding author?  Yes  No  ✔
   Corresponding Author's Name  Charlotte M Niemeyer
5. Manuscript Title
   Criteria for evaluating response and outcome in clinical trials for children with juvenile myelomonocytic leukemia
6. Manuscript Identifying Number (if you know it)
   HAEMATOL/2014/109892

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Are there any relevant conflicts of interest?  Yes  No  ✔

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Dr. Chan has nothing to disclose.

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)  
   Blanca

2. Surname (Last Name)  
   Xicoy

3. Date  
   22-July-2014

4. Are you the corresponding author?  
   Yes [ ]  No [x]

   Corresponding Author’s Name  
   Charlotte M Niemeyer

5. Manuscript Title  
   Criteria for evaluating response and outcome in clinical trials for children with juvenile myelomonocytic leukemia

6. Manuscript Identifying Number (if you know it)  
   HAEMATOL/2014/109892

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Dr. Xicoy has nothing to disclose.

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# ICMJE Form for Disclosure of Potential Conflicts of Interest

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<thead>
<tr>
<th>1. Given Name (First Name)</th>
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<tr>
<td>Urlich</td>
<td>Germing</td>
<td>24-July-2014</td>
</tr>
</tbody>
</table>

4. Are you the corresponding author? [ ] Yes [ ] No

Corresponding Author’s Name

Charlotte Niemeyer

5. Manuscript Title
Criteria for evaluating response and outcome in clinical trials for children with juvenile myelomonocytic leukemia

6. Manuscript Identifying Number (if you know it)
HAEMATOL/2014/109892

## 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.)?

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Dr. Germing has nothing to disclose.

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ICMJE Form for Disclosure of Potential Conflicts of Interest

**Section 1. Identifying Information**

1. Given Name (First Name)  
   Seiji  
2. Surname (Last Name)  
   Kojima  
3. Date  
   24-July-2014  
4. Are you the corresponding author?  
   ☑ No  
   Corresponding Author’s Name  
   Charlotte Niemeyer  

5. Manuscript Title  
   Criteria for evaluating response and outcome in clinical trials for children with juvenile myelomonocytic leukemia

6. Manuscript Identifying Number (if you know it)  
   HAEMATOL/2014/109892

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Dr. Kojima has nothing to disclose.

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<tr>
<td>Atsushi</td>
<td>Manabe</td>
<td>23-July-2014</td>
</tr>
</tbody>
</table>

4. Are you the corresponding author?  
   ✔ No

---

5. Manuscript Title  
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6. Manuscript Identifying Number (if you know it)  
   HAEMATOL/2014/109892

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Dr. Manabe has nothing to disclose.

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1. Given Name (First Name) Michael
2. Surname (Last Name) Dworzak
3. Date 22-July-2014
4. Are you the corresponding author? ☐ Yes ☑ No
Corresponding Author’s Name Charlotte M Niemeyer

5. Manuscript Title
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6. Manuscript Identifying Number (if you know it)
HAEMATOL/2014/109892

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Are there any relevant conflicts of interest? ☐ Yes ☑ No

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Are there any relevant conflicts of interest? ☐ Yes ☑ No

Section 4. Intellectual Property -- Patents & Copyrights

Do you have any patents, whether planned, pending or issued, broadly relevant to the work? ☐ Yes ☑ No
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Section 5. Relationships not covered above

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Dr. Dworzak has nothing to disclose.

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Section 1. Identifying Information

1. Given Name (First Name)  |  2. Surname (Last Name)  |  3. Date
Barbara  |  De Moerloose  |  22-July-2014

4. Are you the corresponding author?  |  ✔ No

5. Manuscript Title
Criteria for evaluating response and outcome in clinical trials for children with juvenile myelomonocytic leukemia

6. Manuscript Identifying Number (if you know it)
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4. Are you the corresponding author? [ ] Yes [x] No

Corresponding Author's Name
Charlotte M Niemeyer

5. Manuscript Title
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6. Manuscript Identifying Number (if you know it)
HAEMATOL/2014/109892

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Section 1. Identifying Information

1. Given Name (First Name)  Owen
2. Surname (Last Name) Smith
3. Date 23-July-2014

4. Are you the corresponding author?  Yes  No

Corresponding Author’s Name
Charlotte Niemeyer

5. Manuscript Title
Criteria for evaluating response and outcome in clinical trials for children with juvenile myelomonocytic leukemia

6. Manuscript Identifying Number (if you know it)
HAEMATOL/2014/109892

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Section 1. Identifying Information

1. Given Name (First Name) Riccardo
2. Surname (Last Name) Masetti
3. Date 22-July-2014
4. Are you the corresponding author? ☑ No

Corresponding Author’s Name
Charlotte Niemeyer

5. Manuscript Title
Criteria for evaluating response and outcome in clinical trials for children with juvenile myelomonocytic leukemia

6. Manuscript Identifying Number (if you know it)
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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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- **Royalties:** Funds are coming in to you or your institution due to your patent
ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)  Eva
2. Surname (Last Name) Bergstraesser
3. Date 23-July-2014
4. Are you the corresponding author? ☑ No
5. Manuscript Title
Criteria for evaluating response and outcome in clinical trials for children with juvenile myelomonocytic leukemia
6. Manuscript Identifying Number (if you know it)
HAEMATOL/2014/109892

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? ☑ No

Section 3. Relevant financial activities outside the submitted work.

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Are there any relevant conflicts of interest? ☑ No

Section 4. Intellectual Property -- Patents & Copyrights

Do you have any patents, whether planned, pending or issued, broadly relevant to the work? ☑ No
ICMJE Form for Disclosure of Potential Conflicts of Interest

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Section 6. Disclosure Statement

Based on the above disclosures, this form will automatically generate a disclosure statement, which will appear in the box below.

Dr. Bergstraesser 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) Marek
2. Surname (Last Name) Ussowicz
3. Date 24-July-2014
4. Are you the corresponding author? Yes No ✔
5. Manuscript Title
Criteria for evaluating response and outcome in clinical trials for children with juvenile myelomonocytic leukemia
6. Manuscript Identifying Number (if you know it)
HAEMATOL/2014/109892

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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Are there any relevant conflicts of interest? Yes No ✔

Section 4. Intellectual Property -- Patents & Copyrights

Do you have any patents, whether planned, pending or issued, broadly relevant to the work? Yes No ✔
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Dr. Ussowicz has nothing to disclose.

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ICMJE Form for Disclosure of Potential Conflicts of Interest

### Section 1. Identifying Information

1. **Given Name (First Name)**
   - Oakana

2. **Surname (Last Name)**
   - Fabri

3. **Date**
   - 24-July-2014

4. **Are you the corresponding author?**
   - [ ] Yes  ☑ No

   **Corresponding Author’s Name**
   - Charlotte Niemeyer

5. **Manuscript Title**
   - Criteria for evaluating response and outcome in clinical trials for children with juvenile myelomonocytic leukemia

6. **Manuscript Identifying Number (if you know it)**
   - HAEMATOL/2014/109892

### 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

### Section 3. Relevant financial activities outside the submitted work.

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Are there any relevant conflicts of interest?  [ ] Yes  ☑ No

### Section 4. Intellectual Property -- Patents & Copyrights

Do you have any patents, whether planned, pending or issued, broadly relevant to the work?  [ ] Yes  ☑ No
ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 5. Relationships not covered above

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Section 6. Disclosure Statement

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Dr. Fabri has nothing to disclose.

Evaluation and Feedback

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Baruchel
ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)  
   André

2. Surname (Last Name)  
   Baruchel

3. Date  
   24-July-2014

4. Are you the corresponding author?  
   ☐ Yes  ✔ No

   Corresponding Author’s Name
   Charlotte Niemeyer

5. Manuscript Title  
   Criteria for evaluating response and outcome in clinical trials for children with juvenile myelomonocytic leukemia

6. Manuscript Identifying Number (if you know it)  
   HAEMATOL/2014/109892

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Are there any relevant conflicts of interest?  
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Are there any relevant conflicts of interest?  
   ☐ Yes  ✔ No

Section 4. Intellectual Property -- Patents & Copyrights

Do you have any patents, whether planned, pending or issued, broadly relevant to the work?  
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Dr. Baruchel has nothing to disclose.

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)  
Hélène

2. Surname (Last Name)  
Cavé

3. Date  
22-July-2014

4. Are you the corresponding author?  
No

Corresponding Author’s Name  
Charlotte Niemeyer

5. Manuscript Title  
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6. Manuscript Identifying Number (if you know it)  
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Are there any relevant conflicts of interest?  
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Dr. Cavé has nothing to disclose.

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name) Christian Michel
2. Surname (Last Name) Zwaan
3. Date 23-July-2014
4. Are you the corresponding author? Yes ☐ No ☑
   Corresponding Author’s Name Charlotte Niemeyer
5. Manuscript Title Criteria for evaluating response and outcome in clinical trials for children with juvenile myelomonocytic leukemia
6. Manuscript Identifying Number (if you know it) HAEMATOL/2014/109892

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.)?
A Are there any relevant conflicts of interest? Yes ☐ No ☑

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A Are there any relevant conflicts of interest? Yes ☑ No ☐
If yes, please fill out the appropriate information below.

<table>
<thead>
<tr>
<th>Name of Entity</th>
<th>Grant?</th>
<th>Personal Fees?</th>
<th>Non-Financial Support?</th>
<th>Other?</th>
<th>Comments</th>
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</thead>
<tbody>
<tr>
<td>Celgene</td>
<td>☐</td>
<td>☐</td>
<td>☑</td>
<td>☑</td>
<td>Clinical trial including JMML patients</td>
</tr>
</tbody>
</table>

Section 4. Intellectual Property -- Patents & Copyrights

 Do you have any patents, whether planned, pending or issued, broadly relevant to the work? Yes ☐ No ☑
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Section 6. Disclosure Statement

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Dr. Zwaan reports non-financial support and other from Celgene, outside the submitted work.

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**Royalties:** Funds are coming in to you or your institution due to your patent
ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)  
Franco

2. Surname (Last Name)  
Locatelli

3. Date  
22-July-2014

4. Are you the corresponding author?  
☑ Yes  ☐ No

5. Manuscript Title  
Criteria for evaluating response and outcome in clinical trials for children with juvenile myelomonocytic leukemia

6. Manuscript Identifying Number (if you know it)  
HAEMATOL/2014/109892

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☑ Yes  ☐ No

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Nothing to disclose

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name) Henrik
2. Surname (Last Name) Hasle
3. Date 22-July-2014
4. Are you the corresponding author? Yes [ ] No [X]

Corresponding Author’s Name
Charlotte Niemeyer

5. Manuscript Title
Criteria for evaluating response and outcome in clinical trials for children with juvenile myelomonocytic leukemia

6. Manuscript Identifying Number (if you know it)
HAEMATOL/2014/109892

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1. Given Name (First Name)  
   Mary

2. Surname (Last Name)  
   van den Heuvel-Ghink

3. Date  
   23-07-2011

4. Are you the corresponding author?  
   [ ] Yes  [x] No  
   Corresponding Author's Name  
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</thead>
<tbody>
<tr>
<td>Christian</td>
<td>Flotho</td>
<td>22-July-2014</td>
</tr>
</tbody>
</table>

4. Are you the corresponding author? [ Yes ] [ No ]

- Corresponding Author’s Name
  - Charlotte Niemeyer

5. Manuscript Title
   - Criteria for evaluating response and outcome in clinical trials for children with juvenile myelomonocytic leukemia

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---

Yoshimi
ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)  Ayami
2. Surname (Last Name)  Yoshimi
3. Date  22-July-2014
4. Are you the corresponding author?  Yes  No
5. Manuscript Title
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