1. Given Name (First Name) Aref	Surname (Last Name)Al-Kali	3. Effective Date (07-August-2008 19-August-2011
4. Are you the corresponding author?	☐ Yes ✓ No	Corresponding Author's Name Gautam Borthakur
5. Manuscript Title Hypocellular acute myeloid leukemia	in adults: clinical outcom	e analysis of 134 patients

Section 2. The Work Under Consideration for Publication

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

Complete each row by checking "No" or providing the requested information. If you have more than one relationship click the "Add" button to add a row. Excess rows can be removed by clicking the "X" button.

The Work Under Consideration f	or Pub	lication				
Type	No	Money Paid to You	Money to Your Institution*	Name of Entity	Comments**	
1. Grant	√					× ADD
2. Consulting fee or honorarium	√					× ADD
3. Support for travel to meetings for the study or other purposes	✓					×
4. Fees for participation in review activities such as data monitoring boards, statistical analysis, end point committees, and the like	V					×
5. Payment for writing or reviewing the manuscript	V					× ADD
 Provision of writing assistance, medicines, equipment, or administrative support 	V					×

Al-Kali 2



The Work	Under Consi	ideration	for Pub	lication				
	Type		No	Money Paid to You	Money to Your Institution*	Name of Entity	Comments**	
			A01.074 = 1.13	The second second	11			ADD
7. Other			√					×
								ADD

Section 3. Po

Relevant financial activities outside the submitted work.

Place a check in the appropriate boxes in the table to indicate whether you have financial relationships (regardless of amount of compensation) with entities as described in the instructions. Use one line for each entity; add as many lines as you need by clicking the "Add +" box. You should report relationships that were present during the 36 months prior to submission.

Complete each row by checking "No" or providing the requested information. If you have more than one relationship click the "Add" button to add a row. Excess rows can be removed by clicking the "X" button.

		Money	Money to		Car Strain Contract
Type of Relationship (in alphabetical order)	No	Paid to You	Your Institution*	Entity	Comments
. Board membership	7				r La _c ontro
2. Consultancy	V				
3. Employment	V				
1. Expert testimony	√				
5. Grants/grants pending	√				
5. Payment for lectures including service on speakers bureaus	V				
7. Payment for manuscript preparation	V				

Al-Kali 3

^{*} This means money that your institution received for your efforts on this study.

^{**} Use this section to provide any needed explanation.



Relevant financial activities outs	ide the	e submit	ted work		200 大型以前600	
Type of Relationship (in alphabetical order)	No	Money Paid to You	Money to Your Institution*	Entity	Comments	
8. Patents (planned, pending or issued)	V					ADD ×
9. Royalties	✓					ADD ADD
Payment for development of educational presentations	V					×
11. Stock/stock options	√					ADD ×
12. Travel/accommodations/ meeting expenses unrelated to activities listed**	V					×
13. Other (err on the side of full disclosure)	V					ADD ×
* This means money that your institution ** For example, if you report a consultance				vel related to that consul	tancy on this line.	
Section 4. Other relations	nips			Walley Burney		
Are there other relationships or active potentially influencing, what you wro				have influenced, or th	at give the appearance of	f
✓ No other relationships/condition: Yes, the following relationships/c					est	

At the time of manuscript acceptance, journals will ask authors to confirm and, if necessary, update their disclosure statements.

Hide All Table Rows Checked 'No'

On occasion, journals may ask authors to disclose further information about reported relationships.

SAVE

Section 1. Identifying Infor	mation	
1. Given Name (First Name) Sergej	2. Surname (Last Name) Konoplev	3. Effective Date (07-August-2008) 19-August-2011
4. Are you the corresponding author?	Yes No	Corresponding Author's Name Gautam Borthakur
5. Manuscript Title Hypocellular acute myeloid leukemia	in adults: clinical outcome	e analysis of 134 patients
6. Manuscript Identifying Number (if you HAEMATOL/2011/046672	know it)	

Section 2. The Work Under Consideration for Publication

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

Complete each row by checking "No" or providing the requested information. If you have more than one relationship click the "Add" button to add a row. Excess rows can be removed by clicking the "X" button.

The Work Under Consideration f	or Pub	lication				
Type	No	Money Paid to You	Money to Your Institution*	Name of Entity	Comments**	
1. Grant	\checkmark					× ADD
2. Consulting fee or honorarium	√					×
Support for travel to meetings for the study or other purposes	V					×
4. Fees for participation in review activities such as data monitoring boards, statistical analysis, end point committees, and the like	V					×
5. Payment for writing or reviewing the manuscript	V					×
Provision of writing assistance, medicines, equipment, or administrative support	/					ADD ×

Konoplev 2

The Work Under	Consideration for	Publ	lication				
Тур	e	No	Money Paid to You	Money to Your Institution*	Name of Entity	Comments**	
							ADD
7. Other		√					×
							ADD

Section 3. Relevant financial activities outside the submitted work.

Place a check in the appropriate boxes in the table to indicate whether you have financial relationships (regardless of amount of compensation) with entities as described in the instructions. Use one line for each entity; add as many lines as you need by clicking the "Add +" box. You should report relationships that were present during the 36 months prior to submission.

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Type of Relationship (in alphabetical order)	No	Money Paid to You	Money to Your Institution*	Entity	- Comments
Board membership	V				2
Consultancy	V				
Employment	\checkmark				
. Expert testimony	✓				
5. Grants/grants pending	V				
6. Payment for lectures including service on speakers bureaus	✓				
7. Payment for manuscript preparation	V				

Konoplev 3

^{*} This means money that your institution received for your efforts on this study.

^{**} Use this section to provide any needed explanation.



Relevant financial activities outs	ide the	submitt	ed work			可被
Type of Relationship (in alphabetical order)	No	Money Paid to You	Money to Your Institution*	Entity	Comments	
		d Residentessessional	No.			ADD
Patents (planned, pending or issued)	√					×
9. Royalties	V					ÄDD
5. Royalties	V					ADD
Payment for development of educational presentations	✓					×
11. Stock/stock options	V					ADD ×
11. Stock stock options	V					ADD
12. Travel/accommodations/ meeting expenses unrelated to activities listed**	V					×
13. Other (err on the side of full disclosure)	V					ADD ×
* This means money that your institution ** For example, if you report a consultance Section 4.				vel related to that consul	tancy on this line.	ÁDD

Section 4. Other relationships

Are there other relationships or activities that readers could perceive to have influenced, or that give the appearance of potentially influencing, what you wrote in the submitted work?

√	No other relationships/conditions/circumstances that present a potential conflict of inte	rest
_		

Yes, the following relationships/conditions/circumstances are present (explain below):

At the time of manuscript acceptance, journals will ask authors to confirm and, if necessary, update their disclosure statements. On occasion, journals may ask authors to disclose further information about reported relationships.

Hide All Table Rows Checked 'No'

SAVE

Konoplev 4

1. Given Name (First Name) E	2. Surname (Last Name) Lin	3. Effective Date (07-August-200 19-August-2011
4. Are you the corresponding author?	Yes ✓ No	Corresponding Author's Name Gautam Borthakur
5. Manuscript Title Hypocellular acute myeloid leukemia	in adults: clinical outcom	e analysis of 134 patients

Section 2. The Work Under Consideration for Publication

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

Complete each row by checking "No" or providing the requested information. If you have more than one relationship click the "Add" button to add a row. Excess rows can be removed by clicking the "X" button.

The Work Under Consideration f	or Pub	lication				
Туре	No	Money Paid to You	Money to Your Institution*	Name of Entity	Comments**	
1. Grant	V		REAL PROPERTY OF THE PARTY OF T			× ADD
2. Consulting fee or honorarium	√					× ADD
3. Support for travel to meetings for the study or other purposes	✓					×
4. Fees for participation in review activities such as data monitoring boards, statistical analysis, end point committees, and the like	V					×
5. Payment for writing or reviewing the manuscript	V					×
 Provision of writing assistance, medicines, equipment, or administrative support 	V					×

Lin

The Worl	k Under Conside	ration for Pub	lication				
	Туре	No	Money Paid to You	Money to Your Institution*	Name of Entity	Comments**	
	D.						ADD
7. Other		✓					×
							ADD:

Section 3. Relevant financial activities outside the submitted work.

Place a check in the appropriate boxes in the table to indicate whether you have financial relationships (regardless of amount of compensation) with entities as described in the instructions. Use one line for each entity; add as many lines as you need by clicking the "Add +" box. You should report relationships that were present during the 36 months prior to submission.

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Relevant financial activities out	side the	submitt	ted work			
Type of Relationship (in alphabetical order)	No	Money Paid to You	Money to Your Institution*	Entity	Comments	
1. Board membership	V				2. Chapters to be consistenced, and the chapters to be consistent to a chapter to be	×
2. Consultancy	✓					ADD X
3. Employment	✓					×
4. Expert testimony	✓					ADD X
5. Grants/grants pending	√					×
Payment for lectures including service on speakers bureaus	✓					ADD ×
7. Payment for manuscript preparation	V					ADD ×

Lin 3

^{*} This means money that your institution received for your efforts on this study.

^{**} Use this section to provide any needed explanation.



Relevant financial activities out:	side the	submit	ted work			
Type of Relationship (in alphabetical order)	No	Money Paid to You	Money to Your Institution*	Entity	Comments	
8. Patents (planned, pending or issued)	V					ADD ×
9. Royalties	√					ADD ×
Payment for development of educational presentations	V					ADD X
11. Stock/stock options	V					ADD ×
12. Travel/accommodations/ meeting expenses unrelated to activities listed**	✓					ADD ×
13. Other (err on the side of full disclosure)	V					ADD ×
* This means money that your institution ** For example, if you report a consultance Section 4. Other relations	ty above			avel related to that consul	tancy on this line.	ADD
Are there other relationships or activ	ities tha			o have influenced, or th	at give the appearance o	of
potentially influencing, what you wro	ote in th	e submitte	ed work?			

No other relationships/conditions/circumstances that present a potential conflict of interest

Yes, the following relationships/conditions/circumstances are present (explain below):

At the time of manuscript acceptance, journals will ask authors to confirm and, if necessary, update their disclosure statements. On occasion, journals may ask authors to disclose further information about reported relationships.

Hide All Table Rows Checked 'No'

1. Given Name (First Name) Tapan	Surname (Last Name)Kadia	3. Effective Date (07-August-20 19-August-2011
4. Are you the corresponding author?	☐ Yes ✓ No	Corresponding Author's Name Gautam Borthakur
5. Manuscript Title Hypocellular acute myeloid leukemia	in adults: clinical outcom	e analysis of 134 patients

Section 2. The Work Under Consideration for Publication

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

Complete each row by checking "No" or providing the requested information. If you have more than one relationship click the "Add" button to add a row. Excess rows can be removed by clicking the "X" button.

The Work Under Consideration f	or Pub	lication				
Туре	No	Money Paid to You	Money to Your Institution*	Name of Entity	Comments**	
1. Grant	✓					×
2. Consulting fee or honorarium	/					× ADD
3. Support for travel to meetings for the study or other purposes	√					×
4. Fees for participation in review activities such as data monitoring boards, statistical analysis, end point committees, and the like	V					×
5. Payment for writing or reviewing the manuscript	✓					×
Provision of writing assistance, medicines, equipment, or administrative support	✓					×

Kadia

The Work Under Consider	ration for Pub	lication			表现在上面电影	
Туре	No	Money Paid to You	Money to Your Institution*	Name of Entity	Comments**	
						ADD"
7. Other	\checkmark					×
						ADD.

Section 3. Relevant financial activities outside the submitted work.

Place a check in the appropriate boxes in the table to indicate whether you have financial relationships (regardless of amount of compensation) with entities as described in the instructions. Use one line for each entity; add as many lines as you need by clicking the "Add +" box. You should report relationships that were present during the 36 months prior to submission.

Complete each row by checking "No" or providing the requested information. If you have more than one relationship click the "Add" button to add a row. Excess rows can be removed by clicking the "X" button.

		Money	Money to		FIRST ALEXANDER	
Type of Relationship (in alphabetical order)	No	Paid to You	Your Institution*	Entity	Comments	
1. Board membership	V				1	>
2. Consultancy	V					AC
3. Employment	✓					AC
4. Expert testimony	✓				B	AC
5. Grants/grants pending	V					>
Payment for lectures including service on speakers bureaus	V					AL
7. Payment for manuscript preparation	✓					Al

Kadia 3

^{*} This means money that your institution received for your efforts on this study.

^{**} Use this section to provide any needed explanation.

Type of Relationship (in alphabetical order)	No	Money Paid to You	Money to Your Institution*	Entity	Comments
3. Patents (planned, pending or issued)	√				
9. Royalties	✓				
Payment for development of educational presentations	✓				
1. Stock/stock options	√				
Travel/accommodations/ meeting expenses unrelated to activities listed**	✓				
 Other (err on the side of full disclosure) 	V				
* This means money that your institution ** For example, if you report a consultanc				l related to that consul	Itancy on this line.
Section 4. Other relationsh	nips	AND COLUMN TO SERVICE			

No other relationships/conditions/circumstances that present a potential conflict of interest

Yes, the following relationships/conditions/circumstances are present (explain below):

At the time of manuscript acceptance, journals will ask authors to confirm and, if necessary, update their disclosure statements. On occasion, journals may ask authors to disclose further information about reported relationships.

Hide All Table Rows Checked 'No'

SAVE

Kadia 4

Given Name (First Name) Stefan	Surname (Last Name)	3. Effective Date (07-August-2008 19-August-2011
4. Are you the corresponding author?	Yes V No	Corresponding Author's Name Gautam Borthakur
5. Manuscript Title Hypocellular acute myeloid leukemia	in adults: clinical outcom	e analysis of 134 patients

Section 2. The Work Under Consideration for Publication

Did you or your institution at any time receive payment or services from a third party 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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The Work Under Consideration f	or Pub	lication				
Туре	No	Money Paid to You	Money to Your Institution*	Name of Entity	Comments**	
1. Grant	✓					× ADD
2. Consulting fee or honorarium	✓					× ADD
3. Support for travel to meetings for the study or other purposes	✓					×
4. Fees for participation in review activities such as data monitoring boards, statistical analysis, end point committees, and the like	V					×
5. Payment for writing or reviewing the manuscript	✓					X
Provision of writing assistance, medicines, equipment, or administrative support	V					×

Faderl 2

The Work Under Consi	ideratio	n for Pub	lication		A WARREN		
Туре		No	Money Paid to You	Money to Your Institution*	Name of Entity	Comments**	
							ADD
7. Other		✓					×
							ADD

Section 3. Relevant financial activities outside the submitted work.

Place a check in the appropriate boxes in the table to indicate whether you have financial relationships (regardless of amount of compensation) with entities as described in the instructions. Use one line for each entity; add as many lines as you need by clicking the "Add +" box. You should report relationships that were present during the 36 months prior to submission.

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		Money	Money to			
Type of Relationship (in alphabetical order)	No	Paid to You	Your Institution*	Entity	Comments	
. Board membership	V					
2. Consultancy	✓					A
3. Employment	✓					A
3. Expert testimony	V					A
5. Grants/grants pending	V					Α
6. Payment for lectures including service on speakers bureaus	V					Α
7. Payment for manuscript preparation	V					A

Faderl 3

^{*} This means money that your institution received for your efforts on this study.

^{**} Use this section to provide any needed explanation.



Relevant financial activities out	side the	submit				
Type of Relationship (in alphabetical order)	No	Money Paid to You	Money to Your Institution*	Entity	Comments	
	Paris of the same					ADD
Patents (planned, pending or issued)	✓					×
9. Royalties	V					ADD ×
						ADD
10. Payment for development of educational presentations	V					×
						ADD
11. Stock/stock options	√					×
12. Travel/accommodations/ meeting expenses unrelated to activities listed**	V					× ADD
13. Other (err on the side of full disclosure)	V					×
* This means money that your institution ** For example, if you report a consultance Section 4.				ivel related to that consult	ancy on this line.	ADD

Are there other relationships or activities that readers could perceive to have influenced, or that give the appearance of potentially influencing, what you wrote in the submitted work?

$\label{eq:conditions}$ No other relationships/conditions/circumstances that present a potential conflict of interest of the conflict of the	erest
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Yes, the following relationships/conditions/circumstances are present (explain below):

At the time of manuscript acceptance, journals will ask authors to confirm and, if necessary, update their disclosure statements. On occasion, journals may ask authors to disclose further information about reported relationships.

Hide All Table Rows Checked 'No'

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Faderl 4

1. Given Name (First Name) Farhad	Surname (Last Name)Ravandi	3. Effective Date (07-August-200 19-August-2011
4. Are you the corresponding author?	☐ Yes ✓ No	Corresponding Author's Name Gautam Borthakur
5. Manuscript Title Hypocellular acute myeloid leukemia	in adults: clinical outcome	analysis of 134 patients

Section 2. The Work Under Consideration for Publication

Did you or your institution at any time receive payment or services from a third party 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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The Work Under Consideration for Publication									
Type	No	Money Paid to You	Money to Your . Institution*	Name of Entity	Comments**				
1. Grant	V		Control of the state of the sta			× ADD			
2. Consulting fee or honorarium	√					×			
Support for travel to meetings for the study or other purposes	V					×			
4. Fees for participation in review activities such as data monitoring boards, statistical analysis, end point committees, and the like	V					ADD X			
5. Payment for writing or reviewing the manuscript	√					×			
 Provision of writing assistance, medicines, equipment, or administrative support 	V					ADD:			

Ravandi 2

The Work Under Consideration for Publication									
	Туре	No	Money Paid to You	Money to Your Institution*	Name of Entity	Comments**			
						131 187	ADD		
7. Other		✓					×		
							ADD		

Section 3. Relevant financial activities outside the submitted work.

Place a check in the appropriate boxes in the table to indicate whether you have financial relationships (regardless of amount of compensation) with entities as described in the instructions. Use one line for each entity; add as many lines as you need by clicking the "Add +" box. You should report relationships that were present during the 36 months prior to submission.

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Relevant financial activities outside the submitted work									
Type of Relationship (in alphabetical order)	No	Money Paid to You	Money to Your Institution*	Entity	Comments				
1. Board membership	V					× ADD			
2. Consultancy	V					×			
3. Employment	✓					ADD ×			
4. Expert testimony	✓					ADD ×			
5. Grants/grants pending	✓					ADD ×			
Payment for lectures including service on speakers bureaus	✓					ADD ×			
7. Payment for manuscript preparation	V					ADD X			

Ravandi 3

^{*} This means money that your institution received for your efforts on this study.

^{**} Use this section to provide any needed explanation.



Relevant financial activities outs	ide the	submit	ted work			
Type of Relationship (in alphabetical order)	No	Money Paid to You	Money to Your Institution*	Entity	Comments	
8. Patents (planned, pending or issued)	✓					ADD ×
9. Royalties	V					ADD X
Payment for development of educational presentations	V					× ×
11. Stock/stock options	V					ADD ×
12. Travel/accommodations/ meeting expenses unrelated to activities listed**	V					×
13. Other (err on the side of full disclosure)	V					×
* This means money that your institution ** For example, if you report a consultance				avel related to that consult	ancy on this line.	ADD
Section 4. Other relationsh	ips					
Are there other relationships or activity potentially influencing, what you wro				o have influenced, or the	at give the appearance	e of

Yes, the following relationships/conditions/circumstances are present (explain below):

At the time of manuscript acceptance, journals will ask authors to confirm and, if necessary, update their disclosure statements. On occasion, journals may ask authors to disclose further information about reported relationships.

Hide All Table Rows Checked 'No'

SAVE

Section 1. Identifying Infor	mation	
Given Name (First Name) Mohamad	2. Surname (Last Name) Ayoubi	3. Effective Date (07-August-2008 19-August-2011
4. Are you the corresponding author?	☐ Yes ✓ No	Corresponding Author's Name Gautam Borthakur
5. Manuscript Title Hypocellular acute myeloid leukemia	in adults: clinical outcom	e analysis of 134 patients
6. Manuscript Identifying Number (if you HAEMATOL/2011/046672	know it)	

Section 2. The Work Under Consideration for Publication

Did you or your institution at any time receive payment or services from a third party 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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The Work Under Consideration for Publication									
Туре	No	Money Paid to You	Money to Your Institution*	Name of Entity	Comments**				
1. Grant	√					X ADD			
2. Consulting fee or honorarium	√					×			
Support for travel to meetings for the study or other purposes	✓					×			
4. Fees for participation in review activities such as data monitoring boards, statistical analysis, end point committees, and the like	V					×			
5. Payment for writing or reviewing the manuscript	√					ADD ×			
 Provision of writing assistance, medicines, equipment, or administrative support 	√					×			

Ayoubi

The Work Under Consideration for Publication									
	Туре	No	Money Paid to You	Money to Your Institution*	Name of Entity	Comments**			
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7. Other		V					° ×		
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Section 3. Relevant financial activities outside the submitted work.

Place a check in the appropriate boxes in the table to indicate whether you have financial relationships (regardless of amount of compensation) with entities as described in the instructions. Use one line for each entity; add as many lines as you need by clicking the "Add +" box. You should report relationships that were present during the 36 months prior to submission.

Complete each row by checking "No" or providing the requested information. If you have more than one relationship click the "Add" button to add a row. Excess rows can be removed by clicking the "X" button.

T (0.1-1) (1	I HE WAY	Money	Money to		
Type of Relationship (in alphabetical order)	No	Paid to You	Your Institution*	Entity	Comments
1. Board membership	V				
2. Consultancy	/				
3. Employment	✓				
4. Expert testimony	V				
5. Grants/grants pending	✓		R		
 Payment for lectures including service on speakers bureaus 	V				
7. Payment for manuscript preparation	V				

Ayoubi 3

^{*} This means money that your institution received for your efforts on this study.

^{**} Use this section to provide any needed explanation.



Relevant financial activities out:	side the	e submit	ted work			
Type of Relationship (in alphabetical order)	No	Money Paid to You	Money to Your Institution*	Entity	Comments	
8. Patents (planned, pending or issued)	V					ADD ×
9. Royalties	V					ADD X
Payment for development of educational presentations	V					×
11. Stock/stock options	✓					ADD X
12. Travel/accommodations/ meeting expenses unrelated to activities listed**	V					×
13. Other (err on the side of full disclosure)	✓					×
* This means money that your institution ** For example, if you report a consultance				avel related to that consul	tancy on this line.	
Section 4. Other relations	nips			2000年1月15日		
Are there other relationships or activ			•	o have influenced, or th	at give the appearance	of

potentially influencing, what you wrote in the submitted work?

\checkmark	No other relationships/conditions/circumstances that present a potential conf	lict of interes	st

Yes, the following relationships/conditions/circumstances are present (explain below):

At the time of manuscript acceptance, journals will ask authors to confirm and, if necessary, update their disclosure statements. On occasion, journals may ask authors to disclose further information about reported relationships.

Hide All Table Rows Checked 'No'

SAVE

1. Given Name (First Name) Mark	Surname (Last Name) Brandt	3. Effective Date (07-August-2008 19-August-2011
4. Are you the corresponding author?	☐ Yes ✓ No	Corresponding Author's Name Gautam Borthakur
5. Manuscript Title Hypocellular acute myeloid leukemia	in adults: clinical outcom	e analysis of 134 patients

Section 2. The Work Under Consideration for Publication

Did you or your institution at any time receive payment or services from a third party 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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The Work Under Consideration for Publication									
Туре	No	Money Paid to You	Money to Your Institution*	Name of Entity	Comments**				
1. Grant	V					×			
2. Consulting fee or honorarium	√					ADD X			
3. Support for travel to meetings for the study or other purposes	✓					×			
4. Fees for participation in review activities such as data monitoring boards, statistical analysis, end point committees, and the like	✓					ADD ×			
5. Payment for writing or reviewing the manuscript	V	# 12 <u>F</u>	III III III III III III III III III II			×			
Provision of writing assistance, medicines, equipment, or administrative support	7					ADD ×			

Brandt

The Work Und	er Consideratio	n for Pub	lication			医中国人员	
Ty	ype	No	Money Paid to You	Money to Your Institution*	Name of Entity	Comments**	
English Street, Street		and length and the second		-			ADD
7. Other		\checkmark					×
							ADD

Section 3. Relevant financial activities outside the submitted work.

Place a check in the appropriate boxes in the table to indicate whether you have financial relationships (regardless of amount of compensation) with entities as described in the instructions. Use one line for each entity; add as many lines as you need by clicking the "Add +" box. You should report relationships that were present during the 36 months prior to submission.

Complete each row by checking "No" or providing the requested information. If you have more than one relationship click the "Add" button to add a row. Excess rows can be removed by clicking the "X" button.

		Money	Money to	The state of the s	17 (17 (17 (17 (17 (17 (17 (17 (17 (17 (
Type of Relationship (in alphabetical order)	No	Paid to	Your Institution*	Entity	Comments
1. Board membership	7				
2. Consultancy	V				
3. Employment	✓				
4. Expert testimony	✓				
5. Grants/grants pending	✓				
6. Payment for lectures including service on speakers bureaus	✓			5	
7. Payment for manuscript preparation	V				

Brandt 3

^{*} This means money that your institution received for your efforts on this study.

^{**} Use this section to provide any needed explanation.



Relevant financial activities outs	ide the	submit	ted work			
Type of Relationship (in alphabetical order)	No	Money Paid to You	Money to Your Institution*	Entity	Comments	
8. Patents (planned, pending or issued)	√					ADD
9. Royalties	✓					ADD ×
Payment for development of educational presentations	V					×
11. Stock/stock options	V					ADD ×
12. Travel/accommodations/ meeting expenses unrelated to activities listed**	✓					×
13. Other (err on the side of full disclosure)	V					×
* This means money that your institution ** For example, if you report a consultance				avel related to that consul	tancy on this line.	
Section 4. Other relations	nips					
Are there other relationships or active potentially influencing, what you wro				o have influenced, or th	nat give the appearance of	:
✓ No other relationships/conditions	s/circum	istances th	nat present a po	tential conflict of intere	est	

At the time of manuscript acceptance, journals will ask authors to confirm and, if necessary, update their disclosure statements. On occasion, journals may ask authors to disclose further information about reported relationships.

Hide All Table Rows Checked 'No'

Yes, the following relationships/conditions/circumstances are present (explain below):

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1. Given Name (First Name) Jorge	Surname (Last Nar Cortes	ne) 3. Effective Date (07-August-2008) 19-August-2011
4. Are you the corresponding author?	Yes V No	Corresponding Author's Name Gautam Borthakur
5. Manuscript Title Hypocellular acute myeloid leukemia	in adults: clinical outco	me analysis of 134 patients

Section 2. The Work Under Consideration for Publication

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

Complete each row by checking "No" or providing the requested information. If you have more than one relationship click the "Add" button to add a row. Excess rows can be removed by clicking the "X" button.

The Work Under Consideration for	or Pub	lication				
Type	No	Money Paid to You	Money to Your Institution*	Name of Entity	Comments**	
1. Grant	V					×
2. Consulting fee or honorarium	✓					ADD ×
Support for travel to meetings for the study or other purposes	✓					×
 Fees for participation in review activities such as data monitoring boards, statistical analysis, end point committees, and the like 	✓					×
5. Payment for writing or reviewing the manuscript	V					ADD ×
 Provision of writing assistance, medicines, equipment, or administrative support 	/					×

Cortes



The Work Ur	der Consideration	for Pub	lication				
	Туре	No	Money Paid to You	Money to Your Institution*	Name of Entity	Comments**	
							ADD
7. Other		✓					×
							ADD

Section 3. Relevant financial activities outside the submitted work.

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Relevant financial activities outs	ide the	e submitt	ed work		基本的	
Type of Relationship (in alphabetical order)	No	Money Paid to You	Money to Your Institution*	Entity	Comments	
1. Board membership	V				. Доменто доворо образова сторов ден на развителения по посторова об образования до сторова образования до сто	× ADD
2. Consultancy	✓					×
3. Employment	✓					×
4. Expert testimony	√					×
5. Grants/grants pending	V					ADD X
Payment for lectures including service on speakers bureaus	V					ADD ×
7. Payment for manuscript preparation	✓					ADD ×

Cortes 3

^{*} This means money that your institution received for your efforts on this study.

^{**} Use this section to provide any needed explanation.



Relevant financial activities out	side th	e submit	ted work			
Type of Relationship (in alphabetical order)	No :	Money Paid to You	Money to Your .Institution*	Entity	Comments	
8. Patents (planned, pending or issued)	✓					ADD
9. Royalties	V					ADD X
10. Payment for development of educational presentations	V					ADD ×
11. Stock/stock options	V					ADD
12. Travel/accommodations/ meeting expenses unrelated to activities listed**	V					ADD ×
13. Other (err on the side of full disclosure)	V					ADD ×
* This means money that your institution ** For example, if you report a consultance				vel related to that consu	Itancy on this line.	ADD
Section 4. Other relations	nips					
Are there other relationships or activity potentially influencing, what you wro				have influenced, or th	nat give the appearance o	of
No other relationships/conditions	s/circun	nstances th	nat present a pot	tential conflict of inter	est	
Yes, the following relationships/c	onditio	ns/circums	stances are prese	ent (explain below):		

On occasion, journals may ask authors to disclose further information about reported relationships.

Hide All Table Rows Checked 'No'

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1. Given Name (First Name) Hagop	Surname (Last Name)Kantarjian	3. Effective Date (07-August-200 19-August-2011
4. Are you the corresponding author?	Yes No	Corresponding Author's Name Gautam Borthakur
5. Manuscript Title Hypocellular acute myeloid leukemia	in adults: clinical outcome	e analysis of 134 patients

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Complete each row by checking "No" or providing the requested information. If you have more than one relationship click the "Add" button to add a row. Excess rows can be removed by clicking the "X" button.

The Work Under Consideration f	or Publ	lication				RESERVE AND ADDRESS OF THE PARTY OF THE PART
Туре	No	Money Paid to You	Money to Your Institution*	Name of Entity	Comments**	
1. Grant	V					× ADD
2. Consulting fee or honorarium	√					×
Support for travel to meetings for the study or other purposes	V					×
4. Fees for participation in review activities such as data monitoring boards, statistical analysis, end point committees, and the like	7					ADD ×
5. Payment for writing or reviewing the manuscript	V		1 8			×
 Provision of writing assistance, medicines, equipment, or administrative support 	✓					ADD ×

Kantarjian

The Work Under Con	sideration for Pub	lication		Per service and the service of the s		
Туре	No	Money Paid to You	Money to Your Institution*	Name of Entity	Comments**	
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7. Other	\checkmark					×
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Relevant financial activities outside the submitted work.

Place a check in the appropriate boxes in the table to indicate whether you have financial relationships (regardless of amount of compensation) with entities as described in the instructions. Use one line for each entity; add as many lines as you need by clicking the "Add +" box. You should report relationships that were present during the 36 months prior to submission.

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Relevant financial activities out	side the	e submit	ted work			
Type of Relationship (in alphabetical order)	No	Money Paid to You	Money to Your Institution*	Entity	Comments	
1. Board membership	√					×
2. Consultancy	√					ADD X
3. Employment	\checkmark					ADD ×
4. Expert testimony	/					X ADD
5. Grants/grants pending	√					ADD ×
Payment for lectures including service on speakers bureaus	V					ADD ×
7. Payment for manuscript preparation	V					ADD ×

Kantarjian 3

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Relevant financial activities outs	ide the	submitt	ted work		
Type of Relationship (in alphabetical order)	No	Money Paid to You	Money to Your Institution*	Entity	Comments
Patents (planned, pending or issued)	✓				ADD ×
9. Royalties	√				ADD ADD
Payment for development of educational presentations	V				×
11. Stock/stock options	√				ADD X
12. Travel/accommodations/ meeting expenses unrelated to activities listed**	✓				ADD ADD
13. Other (err on the side of full disclosure)	✓		/2 mm 1		×
* This means money that your institution ** For example, if you report a consultance				avel related to that consult	Bulliogossaci
Section 4. Other relationsh	ips				
Are there other relationships or activi potentially influencing, what you wro	ties that te in the	readers co submitte	ould perceive to ed work?	have influenced, or th	at give the appearance of
✓ No other relationships/conditions	/circum	stances th	at present a po	tential conflict of intere	st
Yes, the following relationships/co	ondition	s/circums	tances are pres	ent (explain below):	
At the time of manuscript acceptance On occasion, journals may ask author					
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Kantarjian

1. Given Name (First Name) Gautam	2. Surname (Last Name) Borthakur	3. Effective Date (07-August-2008 19-August-2011
4. Are you the corresponding author?	✓ Yes No	
5. Manuscript Title Hypocellular acute myeloid leukemia	in adults: clinical outcome analysis of 134	patients

Section 2.

The Work Under Consideration for Publication

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The Work Under Consideration f	or Pub	lication			10-17	
Туре	No	Money Paid to You	Money to Your Institution*	Name of Entity	Comments**	
1. Grant	√					× ADD
2. Consulting fee or honorarium	√					×
3. Support for travel to meetings for the study or other purposes	✓					×
 Fees for participation in review activities such as data monitoring boards, statistical analysis, end point committees, and the like 	V					ADD ×
5. Payment for writing or reviewing the manuscript	V					×
Provision of writing assistance, medicines, equipment, or administrative support	7					ADD ×

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	Туре	No	Money Paid to You	Money to Your Institution*	Name of Entity	Comments**	
							ADD
7. Other		✓					×
							ADD

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Relevant financial activities out	side the	e submitt	ted work			
Type of Relationship (in alphabetical order)	No	Money Paid to You	Money to Your Institution*	Entity	Comments	
1. Board membership	7					× ADD
2. Consultancy	✓					× ADD
3. Employment	✓					× ADD
4. Expert testimony	✓		3			× ADD
5. Grants/grants pending	√	##				× ADD
Payment for lectures including service on speakers bureaus	V		3 🔲 😸			×
7. Payment for manuscript preparation	V					ADD ×

Borthakur

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Relevant financial activities out	side the	e submitt	ted work			
Type of Relationship (in alphabetical order)	No	Money Paid to You	Money to Your Institution*	Entity	Comments	
8. Patents (planned, pending or issued)	✓					ADE
9. Royalties	✓					×
Payment for development of educational presentations	V					ADE ×
11. Stock/stock options	V					ADE ADE
 Travel/accommodations/ meeting expenses unrelated to activities listed** 	V					×
13. Other (err on the side of full disclosure)	V					ADE ADE
* This means money that your institution ** For example, if you report a consultance				avel related to that consul	ltancy on this line.	
Section 4. Other relationsl	nips		t a sociality			
Are there other relationships or activity potentially influencing, what you wro	ities that ote in the	readers c e submitte	ould perceive t d work?	o have influenced, or th	nat give the appearance	of
No other relationships/conditions Yes, the following relationships/c					est	
At the time of manuscript acceptance On occasion, journals may ask author						atement
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