

## ICMJE Form for Disclosure of Potential Conflicts of Interest

### Instructions

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#### 1. Identifying information.

#### 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.

Use this section to report 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.

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## ICMJE Form for Disclosure of Potential Conflicts of Interest

### Section 1. Identifying Information

1. Given Name (First Name) Shuichi	2. Surname (Last Name) Shirane	3. Date 07-October-2014
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Norio Komatsu
5. Manuscript Title JAK2, CALR and MPL mutation spectrum in Japanese myeloproliferative neoplasms patients		
6. Manuscript Identifying Number (if you know it) HAEMATOL/2014/115113		

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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

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Do you have any patents, whether planned, pending or issued, broadly relevant to the work?  Yes  No

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Dr. Shirane 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) Marito	2. Surname (Last Name) Araki	3. Date 07-October-2014
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Norio Komatsu
5. Manuscript Title JAK2, CALR and MPL mutation spectrum in Japanese myeloproliferative neoplasms patients		
6. Manuscript Identifying Number (if you know it) HAEMATOL/2014/115113		

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Dr. Araki has nothing to disclose.

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## ICMJE Form for Disclosure of Potential Conflicts of Interest

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1. Given Name (First Name) Soji	2. Surname (Last Name) Morishita	3. Date 07-October-2014
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Norio Komatsu
5. Manuscript Title JAK2, CALR and MPL mutation spectrum in Japanese myeloproliferative neoplasms patients		
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Dr. Morishita 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) Yoko	2. Surname (Last Name) Edahiro	3. Date 06-October-2014
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Norio Komatsu
5. Manuscript Title JAK2, CALR and MPL mutation spectrum in Japanese myeloproliferative neoplasms patients		
6. Manuscript Identifying Number (if you know it) HAEMATOL/2014/115113		

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Dr. Edahiro has nothing to disclose.

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1. Given Name (First Name) Hiraku	2. Surname (Last Name) Takei	3. Date 07-October-2014
4. Are you the corresponding author? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Corresponding Author's Name Norio Komatsu
5. Manuscript Title JAK2, CALR and MPL mutation spectrum in Japanese myeloproliferative neoplasms patients		
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Dr. Takei has nothing to disclose.

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**Licensed:** The patent has been licensed to an entity, whether earning royalties or not

**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) Yongjin	2. Surname (Last Name) Yoo	3. Date 07-October-2014
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Norio Komatsu
5. Manuscript Title JAK2, CALR and MPL mutation spectrum in Japanese myeloproliferative neoplasms patients		
6. Manuscript Identifying Number (if you know it) HAEMATOL/2014/115113		

### 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

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### Section 5. Relationships not covered above

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?

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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. Yoo 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) Murim	2. Surname (Last Name) Choi	3. Date 07-October-2014
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Norio Komatsu
5. Manuscript Title JAK2, CALR and MPL mutation spectrum in Japanese myeloproliferative neoplasms patients		
6. Manuscript Identifying Number (if you know it) HAEMATOL/2014/115113		

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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

## ICMJE Form for Disclosure of Potential Conflicts of Interest

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Dr. Choi 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) Yoshitaka	2. Surname (Last Name) Sunami	3. Date 07-October-2014
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Norio Komatsu
5. Manuscript Title JAK2, CALR and MPL mutation spectrum in Japanese myeloproliferative neoplasms patients		
6. Manuscript Identifying Number (if you know it) HAEMATOL/2014/115113		

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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

## 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. Sunami 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) Yumi	2. Surname (Last Name) Hironaka	3. Date 07-October-2014
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Norio komatsu
5. Manuscript Title JAK2, CALR and MPL mutation spectrum in Japanese myeloproliferative neoplasms patients		
6. Manuscript Identifying Number (if you know it) HAEMATOL/2014/115113		

### Section 2. The Work Under Consideration for Publication

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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

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### Section 5. Relationships not covered above

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### Section 6. Disclosure Statement

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Dr. Hironaka 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) masaaki	2. Surname (Last Name) noguchi	3. Date 07-October-2014
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Norio Komatsu
5. Manuscript Title JAK2, CALR and MPL mutation spectrum in Japanese myeloproliferative neoplasms patients		
6. Manuscript Identifying Number (if you know it) HAEMATOL/2014/115113		

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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

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## ICMJE Form for Disclosure of Potential Conflicts of Interest

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Dr. noguchi 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) Michiaki	2. Surname (Last Name) Koike	3. Date 07-October-2014
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Norio Komatsu
5. Manuscript Title JAK2, CALR and MPL mutation spectrum in Japanese myeloproliferative neoplasms patients		
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Are there any relevant conflicts of interest?  Yes  No

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Dr. Koike has nothing to disclose.

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#### 2. The work under consideration for publication.

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

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## ICMJE Form for Disclosure of Potential Conflicts of Interest

### Section 1. Identifying Information

1. Given Name (First Name) Naohiro	2. Surname (Last Name) Noda	3. Date 07-October-2014
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Norio Komatsu
5. Manuscript Title JAK2, CALR and MPL mutation spectrum in Japanese myeloproliferative neoplasms patients		
6. Manuscript Identifying Number (if you know it) HAEMATOL/2014/115113		

### 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

## ICMJE Form for Disclosure of Potential Conflicts of Interest

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### Section 1. Identifying Information

1. Given Name (First Name) Akimichi	2. Surname (Last Name) Ohsaka	3. Date 07-October-2014
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Norio Komatsu
5. Manuscript Title JAK2, CALR and MPL mutation spectrum in Japanese myeloproliferative neoplasms patients		
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Are there any relevant conflicts of interest?  Yes  No

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## ICMJE Form for Disclosure of Potential Conflicts of Interest

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## ICMJE Form for Disclosure of Potential Conflicts of Interest

### Section 1. Identifying Information

1. Given Name (First Name)  
Norio

2. Surname (Last Name)  
Komatsu

3. Date  
07-October-2014

4. Are you the corresponding author?  Yes  No

5. Manuscript Title  
JAK2, CALR and MPL mutation spectrum in Japanese myeloproliferative neoplasms patients

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