

## 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.

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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)  
Paneez

2. Surname (Last Name)  
Khoury

3. Date  
04-August-2014

4. Are you the corresponding author?  Yes  No

5. Manuscript Title  
Episodic angioedema with eosinophilia (Gleich's syndrome) is a multilineage cell cycling disorder

6. Manuscript Identifying Number (if you know it)  
HAEMATOL/2013/091264

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

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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. Khoury 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) Jacqueline	2. Surname (Last Name) Herold	3. Date 05-August-2014
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Paneez Khoury
5. Manuscript Title Episodic angioedema with eosinophilia (Gleich's syndrome) is a multilineage cell cycling disorder		
6. Manuscript Identifying Number (if you know it) HAEMATOL/2013/091264		

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

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Ms. Herold 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) Alexandra	2. Surname (Last Name) Alpaugh	3. Date 05-August-2014
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Paneez Khoury
5. Manuscript Title Episodic angioedema with eosinophilia (Gleich's syndrome) is a multilineage cell cycling disorder		
6. Manuscript Identifying Number (if you know it) HAEMATOL/2013/091264		

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Ms. Alpaugh 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) Ellen	2. Surname (Last Name) Dinerman	3. Date 07-August-2014
4. Are you the corresponding author? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Corresponding Author's Name Paneez Khoury
5. Manuscript Title Episodic angioedema with eosinophilia (Gleich's syndrome) is a multilineage cell cycling disorder		
6. Manuscript Identifying Number (if you know it) HAEMATOL/2013/091264		

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Are there any relevant conflicts of interest?  Yes  No

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Dr. Dinerman has nothing to disclose.

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1. Given Name (First Name) Nicole	2. Surname (Last Name) Holland-Thomas	3. Date 07-August-2014
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Paneez Khoury
5. Manuscript Title Episodic angioedema with eosinophilia (Gleich's syndrome) is a multilineage cell cycling disorder		
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Ms. Holland-Thomas has nothing to disclose.

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**Other:** Anything not covered under the previous three boxes

**Pending:** The patent has been filed but not issued

**Issued:** The patent has been issued by the agency

**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) Jennifer	2. Surname (Last Name) Stoddard	3. Date 05-August-2014
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Paneez Khoury, MD
5. Manuscript Title Episodic angioedema with eosinophilia (Gleich's syndrome) is a multilineage cell cycling disorder		
6. Manuscript Identifying Number (if you know it) HAEMATOL/2013/091264		

### 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.

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 publication**.

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

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

Dr. Stoddard 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)  
SHAKUNTALA

2. Surname (Last Name)  
GURPRASAD

3. Date  
05-August-2014

4. Are you the corresponding author?

Yes  No

Corresponding Author's Name  
Paneez Khoury

5. Manuscript Title

Episodic angioedema with eosinophilia (Gleich's syndrome) is a multilineage cell cycling disorder

6. Manuscript Identifying Number (if you know it)

HAEMATOL/2013/091264

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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 5. Relationships not covered above

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### Section 6. Disclosure Statement

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Ms. GURPRASAD 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) Irina	2. Surname (Last Name) Maric	3. Date 06-August-2014
4. Are you the corresponding author? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Corresponding Author's Name Paneez Khoury
5. Manuscript Title Episodic angioedema with eosinophilia (Gleich's syndrome) is a multilineage cell cycling disorder		
6. Manuscript Identifying Number (if you know it) HAEMATOL/2013/091264		

### 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 6. Disclosure Statement

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

Dr. Maric 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)

Olga

2. Surname (Last Name)

Simakova

3. Date

05-August-2014

4. Are you the corresponding author?

Yes  No

Corresponding Author's Name

Paneez Khoury

5. Manuscript Title

Episodic angioedema with eosinophilia (Gleich's syndrome) is a multilineage cell cycling disorder

6. Manuscript Identifying Number (if you know it)

HAEMATOL/2013/091264

### 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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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. Simakova 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) Lawrence	2. Surname (Last Name) Schwartz	3. Date 06-August-2014
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Paneez Khoury
5. Manuscript Title Episodic angioedema with eosinophilia (Gleich's syndrome) is a multilineage cell cycling disorder		
6. Manuscript Identifying Number (if you know it) HAEMATOL/2013/091264		

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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

If yes, please fill out the appropriate information below.

Name of Entity	Grant?	Personal Fees?	Non-Financial Support?	Other?	Comments
ThermoFisher	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	VCU receives royalties from tryptase assay sales, and shares those with the inventor (LBS)

### 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. Schwartz reports other from ThermoFisher, outside 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) Juelia	2. Surname (Last Name) Fong	3. Date 08-August-2014
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Paneez Khoury
5. Manuscript Title Episodic angioedema with eosinophilia (Gleich's syndrome) is a multilineage cell cycling disorder		
6. Manuscript Identifying Number (if you know it) HAEMATOL/2013/091264		

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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

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?

- Yes, the following relationships/conditions/circumstances are present (explain below):
- No other relationships/conditions/circumstances that present a potential conflict 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.

Ms. Fong has nothing to disclose.

### Evaluation and Feedback

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## ICMJE Form for Disclosure of Potential Conflicts of Interest

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#### 4. Intellectual Property.

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)  
CHYI-CHIA

2. Surname (Last Name)  
LEE

3. Date  
08-August-2014

4. Are you the corresponding author?

Yes  No

Corresponding Author's Name  
PANEZ KHOURY

5. Manuscript Title

EPISODIC ANGIOEDEMA WITH EOSINOPHILIA (GLICHN'S SYNDROME) IS A MULTILINEASE CELL CYLING DISORDER

6. Manuscript Identifying Number (if you know it)  
HAEMATOL/2013/091264

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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. LEE has nothing to disclose.

*C. R. Lee*      *8/08/2014*

### Evaluation and Feedback

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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) Liqiang	2. Surname (Last Name) Xi	3. Date 08-August-2014
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Paneez Khoury
5. Manuscript Title Episodic angioedema with eosinophilia (Gleich's syndrome) is a multilineage cell cycling disorder		
6. Manuscript Identifying Number (if you know it) HAEMATOL/2013/091264		

### 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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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. Xi has nothing to disclose.

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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) Zengfeng	2. Surname (Last Name) Wang	3. Date 05-August-2014
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Khoury, Paneez
5. Manuscript Title Episodic angioedema with eosinophilia (Gleich's syndrome) is a multilineage cell cycling disorder		
6. Manuscript Identifying Number (if you know it) HAEMATOL/2013/091264		

### 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 6. Disclosure Statement

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Dr. Wang 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)  
Mark

2. Surname (Last Name)  
Raffeld

3. Date  
07-August-2014

4. Are you the corresponding author?

Yes  No

Corresponding Author's Name  
Dr. Paneez Khoury

5. Manuscript Title

Episodic angioedema with eosinophilia (Gleich's syndrome) is a multilineage cell cycling disorder

6. Manuscript Identifying Number (if you know it)

HAEMATOL/2013/091264

### 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

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Dr. Raffeld 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)

Amy

2. Surname (Last Name)

Klion

3. Date

04-August-2014

4. Are you the corresponding author?

Yes  No

Corresponding Author's Name

Paneez Khoury

5. Manuscript Title

Episodic angioedema with eosinophilia (Gleich's syndrome) is a multilineage cell cycling disorder

6. Manuscript Identifying Number (if you know it)

HAEMATOL/2013/091264

### 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

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## ICMJE Form for Disclosure of Potential Conflicts of Interest

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Dr. Klion has nothing to disclose.

### Evaluation and Feedback

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