

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.

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name) chadi	2. Surname (Last Name) Zeinati	3. Date 18-January-2017
4. Are you the corresponding author? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Corresponding Author's Name Minnelly Luu, MD
5. Manuscript Title Neurologic deficits and a cold upper extremity in a two-year-old boy: Primary kaposiform hemangioendothelioma of the bone and brachial plexus		
6. Manuscript Identifying Number (if you know it) 		

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

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Dr. Zeinati 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)

Minnelly

2. Surname (Last Name)

Luu

3. Date

16-January-2017

4. Are you the corresponding author?

☒

Yes

☐

No

5. Manuscript Title

Neurologic deficits and a cold upper extremity in a two-year-old boy: Primary kaposiform hemangioendothelioma of the bone and brachial plexus

6. Manuscript Identifying Number (if you know it)

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Dr. Luu has nothing to disclose.

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Section 1. Identifying Information

1. Given Name (First Name)
NICK

2. Surname (Last Name)
SHILLINGFORD

3. Date
12-January-2017

4. Are you the corresponding author?

☐ Yes ☒ No

Corresponding Author's Name
Minnelly Luu, MD

5. Manuscript Title

Neurologic deficits and a cold upper extremity in a two-year-old boy: Primary kaposiform hemangioendothelioma of the bone and brachial plexus

6. Manuscript Identifying Number (if you know it)

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Dr. SHILLINGFORD has nothing to disclose.

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Section 1. Identifying Information

1. Given Name (First Name)

Sonia

2. Surname (Last Name)

Kamath

3. Date

12-January-2017

4. Are you the corresponding author?

☐ Yes ☒ No

Corresponding Author's Name

Minnelly Luu, MD

5. Manuscript Title

Neurologic deficits and a cold upper extremity in a two-year-old boy: Primary kaposiform hemangioendothelioma of the bone and brachial plexus

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Dr. Kamath has nothing to disclose.

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Section 1. Identifying Information

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Sachi

2. Surname (Last Name)
Patel

3. Date
14-January-2016

4. Are you the corresponding author?

☐ Yes

☒ No

Corresponding Author's Name
Minnelly Luu, MD

5. Manuscript Title
Neurologic deficits and a cold upper extremity in a two-year-old boy: Primary kaposiform hemangioendothelioma of the bone and brachial plexus

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Ms. Patel has nothing to disclose.

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Definitions.

Entity: government agency, foundation, commercial sponsor, academic institution, etc.

Grant: A grant from an entity, generally [but not always] paid to your organization

Personal Fees: Monies paid to you for services rendered, generally honoraria, royalties, or fees for consulting, lectures, speakers bureaus, expert testimony, employment, or other affiliations

Non-Financial Support: Examples include drugs/equipment supplied by the entity, travel paid by the entity, writing assistance, administrative support, etc.

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Pending: The patent has been filed but not issued

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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

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Section 1. Identifying Information

1. Given Name (First Name)
Vernon

2. Surname (Last Name)
Tolo

3. Date
16-January-2017

4. Are you the corresponding author?

☐ Yes ☒ No

Corresponding Author's Name
Minnelly Luu, MD

5. Manuscript Title
Neurologic deficits and a cold upper extremity in a two-year-old boy: Primary kaposiform hemangioendothelioma of the bone and brachial plexus

6. Manuscript Identifying Number (if you 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 (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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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**.

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

Dr. Tolo has nothing to disclose.

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