

Instructions

The purpose of this form is to provide readers of your manuscript with information about your other interests that could influence how they receive and understand your work. The form is designed to be completed electronically and stored electronically. It contains programming that allows appropriate data display. Each author should submit a separate form and is responsible for the accuracy and completeness of the submitted information. The form is in six parts.

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4. Intellectual Property.

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Royalties: Funds are coming in to you or your institution due to your patent

DeWolf 1



| Section 1. | Identifying Inform | nation | | |
|----------------------------------------------|----------------------------|--------------------------------------------------------------------------|---------------------------|------------------------------------------------------------------------------------------------|
| 1. Given Name (Fi Matthew | rst Name) | 2. Surname (Last Name) DeWolf | | 3. Date 11-August-2018 |
| 4. Are you the cor | responding author? | ✓ Yes No | | |
| 5. Manuscript Title Pigment Associa | | rosis From Compartment Syndr | ome: A Case Report | |
| 6. Manuscript Ider | ntifying Number (if you kr | now it) | | |
| | | | | |
| Section 2. | The Work Under C | onsideration for Publicatio | n | |
| any aspect of the s statistical analysis, | ubmitted work (including | but not limited to grants, data mo | | mmercial, private foundation, etc.) for sign, manuscript preparation, |
| Section 3. | | | | |
| Section 3. | Relevant financial | activities outside the subm | itted work. | |
| of compensation clicking the "Add | n) with entities as descri | bed in the instructions. Use one port relationships that were pre | e line for each entity; a | ationships (regardless of amount add as many lines as you need by nonths prior to publication. |
| Section 4. | latelle to I D | | | |
| | Intellectual Propei | ty Patents & Copyrights | | |
| Do you have any | patents, whether plan | ned, pending or issued, broadly | relevant to the work? | Yes 🗸 No |

DeWolf 2



| Section 5. Relationships not sovered above |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| 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. |
| Dr. DeWolf has nothing to disclose. |

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DeWolf 3



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Molloy 1



| Section 1. | Identifying Inform | nation | | |
|----------------------------------------------|----------------------------|-----------------------------------------------------------|--------------------------------------------------------------------|------------------------------------------------------------------------------------------------------|
| 1. Given Name (Fi | rst Name) | 2. Surname (Last Name) Molloy | | 3. Date 06-August-2018 |
| 4. Are you the cor | responding author? | Yes ✓ No | Corresponding Author's Nar | me |
| 5. Manuscript Title Pigment Associa | | rosis From Compartment | Syndrome: A Case Report | |
| 6. Manuscript Ider | ntifying Number (if you kr | now it) | | |
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| Section 2. | The Work Under Co | onsideration for Publi | cation | |
| any aspect of the s statistical analysis, | ubmitted work (including | g but not limited to grants, d | n a third party (government, cor ata monitoring board, study de | mmercial, private foundation, etc.) for sign, manuscript preparation, |
| Section 3. | Relevant financial | activities outside the | submitted work. | |
| of compensation clicking the "Add |) with entities as descri | ibed in the instructions. U port relationships that we | se one line for each entity; a | ationships (regardless of amount add as many lines as you need by nonths prior to publication. |
| Section 4. | Intellectual Proper | rty Patents & Copyri | ghts | |
| Do you have any | patents, whether plan | ned, pending or issued, b | roadly relevant to the work? | Yes 🗸 No |

Molloy 2



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Norman 1



| Section 1. Identifying Inform | nation | | |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|
| Given Name (First Name) Mackenzie | 2. Surname (Last Name) Norman | 3. Date 08-August-2018 | |
| 4. Are you the corresponding author? | ☐ Yes ✓ No | Corresponding Author's Name Matthew C. DeWolf, MD | |
| 5. Manuscript Title Pigment Associated Acute Tubular Nec | rosis From Compartment S | yndrome: A Case Report | |
| 6. Manuscript Identifying Number (if you k | now it) | | |
| | | | |
| Section 2. The Work Under C | onsideration for Public | ation | |
| 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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| of compensation) with entities as descr | ibed in the instructions. Us port relationships that wer | ether you have financial relationships (regardless of amount e one line for each entity; add as many lines as you need by e present during the 36 months prior to publication. | |
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| Section 4. Intellectual Prope | rty Patents & Copyrig | hts | |
| Do you have any patents, whether plan | ned, pending or issued, br | oadly relevant to the work? Yes V No | |

Norman 2



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Ramkumar 1



| Section 1. | Identifying Inform | nation | |
|-------------------------------------------------|----------------------------|------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| 1. Given Name (Fir Dipak B. | st Name) | 2. Surname (Last Name) Ramkumar | 3. Date 08-August-2018 |
| 4. Are you the corr | esponding author? | Yes ✓ No | Corresponding Author's Name Matthew C. Dewolf |
| 5. Manuscript Title Pigment Associat | | rosis From Compartment : | Syndrome: A Case Report |
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| any aspect of the su statistical analysis, o | ubmitted work (including | but not limited to grants, da | a third party (government, commercial, private foundation, etc.) for ita monitoring board, study design, manuscript preparation, |
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| Do you have any | patents, whether plan | ned, pending or issued, br | roadly relevant to the work? Yes V No |

Ramkumar 2



| Section 5. | |
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| Section 5. | Relationships not covered above |
| | relationships or activities that readers could perceive to have influenced, or that give the appearance of encing, what you wrote in the submitted work? |
| Yes, the follo | wing relationships/conditions/circumstances are present (explain below): |
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| Based on the abo | ove disclosures, this form will automatically generate a disclosure statement, which will appear in the box |
| Dr. Ramkumar h | as nothing to disclose. |

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Ramkumar 3



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Veerareddy 1



| Section 1. Identifying Inform | nation | |
|--------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| 1. Given Name (First Name) Rakesh | 2. Surname (Last Name) Veerareddy | 3. Date 09-August-2018 |
| 4. Are you the corresponding author? | ☐ Yes 🗸 No | Corresponding Author's Name Matthew C. DeWolf, MD |
| 5. Manuscript Title Pigment Associated Acute Tubular Nec | crosis From Compartment S | Syndrome: A Case Report |
| 6. Manuscript Identifying Number (if you k | now it) | |
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| | g but not limited to grants, da | a third party (government, commercial, private foundation, etc.) for ta monitoring board, study design, manuscript preparation, |
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| Place a check in the appropriate boxes of compensation) with entities as descr | in the table to indicate who ibed in the instructions. Us port relationships that wer | ether you have financial relationships (regardless of amount se one line for each entity; add as many lines as you need by se present during the 36 months prior to publication. |
| Section 4. Intellectual Prope | rty Patents & Copyrig | yhts |
| Do you have any patents, whether plan | | |

Veerareddy 2



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