

#### **Instructions**

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Björkholm 1



Section 1. Identifying Inform	nation			
1. Given Name (First Name) Magnus	2. Surname (Last Name) Björkholm	3. Date 03-October-2017		
4. Are you the corresponding author?	Yes ✓ No	Corresponding Author's Name Malin Hultcrantz		
5. Manuscript Title Increased Risk of Arterial and Venous T	hrombosis in 9,429 Patient	s with Myeloproliferative Neoplasms in Sweden"		
6. Manuscript Identifying Number (if you kn M17-0028	now it)			
Section 2. The Work Under C	onsideration for Public	cation		
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Intellectual Proper	rty Patents & Copyric	ints —		
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Björkholm 2



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Dr. Björkholm has nothing to disclose.

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Kristinsson 1



Section 1. Ide	entifying Informat	tion		
1. Given Name (First Na Sigurdur		2. Surname (Last Name) Kristinsson		3. Date 04-October-2017
4. Are you the correspo	onding author?	Yes 🗸 No	Corresponding Author's Nar	me
5. Manuscript Title "Increased Risk of Art	erial and Venous Thro	ombosis in 9,429 Patie	nts with Myeloproliferative N	Neoplasms in Sweden"
6. Manuscript Identifyi	ng Number (if you know	v it)		
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Section 2. Th	a Wark Under Can	cideration for Bubli	cation	
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1

Derolf



Section 1. Identifying Inform	nation			
1. Given Name (First Name) Åsa	Surname (Last Name)  Derolf	3. Date 13-November-2017		
4. Are you the corresponding author?	Yes ✓ No	Corresponding Author's Name  Malin Hultcrantz		
5. Manuscript Title Increased Risk of Arterial and Venous T	hrombosis in 9,429 Patient	s with Myeloproliferative Neoplasms in Sweden		
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Derolf 2



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Landgren 1



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4. Are you the cor	responding author?	Yes ✓ No	Corresponding Author's Name  Malin Hultcrantz
5. Manuscript Title Increased Risk of		nrombosis in 9,429 Patient	s with Myeloproliferative Neoplasms in Sweden
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Landgren 2



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Hultcrantz 1



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Hultcrantz 2



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For grants you have received for work outside the submitted work, you should disclose support ONLY from entities that could be perceived to be affected financially by the published work, such as drug companies, or foundations supported by entities that could be perceived to have a financial stake in the outcome. Public funding sources, such as government agencies, charitable foundations or academic institutions, need not be disclosed. For example, if a government agency sponsored a study in which you have been involved and drugs were provided by a pharmaceutical company, you need only list the pharmaceutical company.

# Intellectual Property.

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

# 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.

#### 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.

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

Andersson 1



Section 1.	Identifying Inform	nation	
1. Given Name (Fi	rst Name)	2. Surname (Last Name) Andersson	3. Date 02-November-2017
4. Are you the cor	responding author?	Yes ✓ No	Corresponding Author's Name  Malin Hultcrantz
5. Manuscript Title Increased Risk of		nrombosis in 9,429 Patient	s with Myeloproliferative Neoplasms in Sweden.
6. Manuscript Ider M17-0028	ntifying Number (if you kr	now it)	
Section 2.	The Work Under Co	onsideration for Public	cation
any aspect of the s statistical analysis,	ubmitted work (including	but not limited to grants, da	a third party (government, commercial, private foundation, etc.) for ta monitoring board, study design, manuscript preparation,
Section 3.	Relevant financial	activities outside the s	ubmitted 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 <b>present during the 36 months prior to publication</b> .  Are there any relevant conflicts of interest? Yes Vo			
Section 4.	Intellectual Proper	rty Patents & Copyric	yhts
Do you have any	patents, whether plan	ned, pending or issued, br	oadly relevant to the work? ☐ Yes ✓ No

Andersson 2



Section 5. Polationships not sovered above				
Relationships not covered above				
Are there other relationships or activities that readers could perceive to have influenced, or that give the approximation potentially influencing, what you wrote in the submitted work?	pearance of			
Yes, the following relationships/conditions/circumstances are present (explain below):				
✓ No other relationships/conditions/circumstances that present a potential conflict of interest				
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.				
Section 6. Disclosure Statement				
Based on the above disclosures, this form will automatically generate a disclosure statement, which will apprebelow.	ear in the box			
Dr. Andersson has nothing to disclose.				

## **Evaluation and Feedback**

Please visit <a href="http://www.icmje.org/cgi-bin/feedback">http://www.icmje.org/cgi-bin/feedback</a> to provide feedback on your experience with completing this form.

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#### **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.

# Identifying information.

# 2. The work under consideration for publication.

This section asks for information about the work that you have submitted for publication. The time frame for this reporting is that of the work itself, from the initial conception and planning to the present. The requested information is about resources that you received, either directly or indirectly (via your institution), to enable you to complete the work. Checking "No" means that you did the work without receiving any financial support from any third party -- that is, the work was supported by funds from the same institution that pays your salary and that institution did not receive third-party funds with which to pay you. If you or your institution received funds from a third party to support the work, such as a government granting agency, charitable foundation or commercial sponsor, check "Yes".

### 3. Relevant financial activities outside the submitted work.

This section asks about your financial relationships with entities in the bio-medical arena that could be perceived to influence, or that give the appearance of potentially influencing, what you wrote in the submitted work. You should disclose interactions with ANY entity that could be considered broadly relevant to the work. For example, if your article is about testing an epidermal growth factor receptor (EGFR) antagonist in lung cancer, you should report all associations with entities pursuing diagnostic or therapeutic strategies in cancer in general, not just in the area of EGFR or lung cancer.

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

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Dickman



Section 1.	Identifying Information		
1. Given Name (First Name) Paul		2. Surname (Last Name) Dickman	3. Date 04-November-2017
4. Are you the corresponding author?		Yes ✓ No	Corresponding Author's Name Malin Hultcranz
5. Manuscript Title Increased Risk of Arterial and Venous Thrombosis in 9,429 Patients w		hrombosis in 9,429 Patient	s with Myeloproliferative Neoplasms in Sweden
6. Manuscript Identifying Number (if you know it) M17-0028			
Section 2. The Work Under Consideration for Publication			
Did you or your institution <b>at any time</b> 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 s	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 <b>present during the 36 months prior to publication</b> .  Are there any relevant conflicts of interest? Yes Vo			
Section 4.	Intellectual Prope	rty Patents & Copyric	ghts
Do you have any patents, whether planned, pending or issued, broadly relevant to the work? Yes Vo			

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Section 5. Polationships not sovered above			
Relationships not covered above			
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Yes, the following relationships/conditions/circumstances are present (explain below):			
✓ No other relationships/conditions/circumstances that present a potential conflict of interest			
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.			
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. Dickman has nothing to disclose.			

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