

ICMJE Form for Disclosure of Potential Conflicts of Interest

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.

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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Other: Anything not covered under the previous three boxes

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

ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)

Woojin

2. Surname (Last Name)

Ahn

3. Date

15-August-2017

4. Are you the corresponding author?

☐ Yes

☒ No

Corresponding Author's Name

Ali G. Gharavi

5. Manuscript Title

Whole Exome Sequencing Uncovers Genetic Diagnoses and Informs Clinical Management in Adult Chronic Kidney Disease

6. Manuscript Identifying Number (if you know it)

M17-1319

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

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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. Ahn 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) Corinne	2. Surname (Last Name) ANTIGNAC	3. Date 29-November-2017
4. Are you the corresponding author? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Corresponding Author's Name Ali GHARAVI
5. Manuscript Title Whole Exome Sequencing in Adults with Chronic Kidney Disease: A Pilot Study		
6. Manuscript Identifying Number (if you know it) M17-1319		

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

If yes, please fill out the appropriate information below. If you have more than one entity press the "ADD" button to add a row. Excess rows can be removed by pressing the "X" button.

Patent?	Pending?	Issued?	Licensed?	Royalties?	Licensee?	Comments
Identification of the NPHS2 gene encoding podocin	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>		

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Dr. ANTIGNAC reports In addition, Dr. ANTIGNAC has a patent Identification of the NPHS2 gene encoding podocin with royalties paid.

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name) Gerald	2. Surname (Last Name) Appel	3. Date 10-October-2017
4. Are you the corresponding author? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Corresponding Author's Name Ali Gharavi
5. Manuscript Title Whole Exome Sequencing in Adults		
6. Manuscript Identifying Number (if you know it) M17 1319		

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

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Dr. Appel 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) Andrew	2. Surname (Last Name) Bomback	3. Date 16-August-2017
4. Are you the corresponding author? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Corresponding Author's Name _____		
5. Manuscript Title Whole Exome Sequencing Uncovers Genetic Diagnoses and Informs Clinical Management in Adult Chronic Kidney Disease		
6. Manuscript Identifying Number (if you know it) M17-1319		

Section 2. The Work Under Consideration for Publication

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

If yes, please fill out the appropriate information below. If you have more than one entity press the "ADD" button to add a row. Excess rows can be removed by pressing the "X" button.

Name of Institution/Company	Grant?	Personal Fees?	Non-Financial Support?	Other?	Comments
National Institutes of Health/National Institute on Minority Health and Health Disparities (R01MD009223)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

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

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Dr. Bomback reports grants from National Institutes of Health/National Institute on Minority Health and Health Disparities (R01MD009223), during the conduct of the study; .

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Section 1. Identifying Information

1. Given Name (First Name) Pietro	2. Surname (Last Name) Canetta	3. Date 11-October-2017
4. Are you the corresponding author? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Corresponding Author's Name Ali Gharavi
5. Manuscript Title Whole Exome Sequencing in Adults with Chronic Kidney Disease: A Pilot Study		
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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)
Gianluca

2. Surname (Last Name)
Caridi

3. Date
25-October-2017

4. Are you the corresponding author?

☐ Yes ☒ No

Corresponding Author's Name
Ali Gharavi

5. Manuscript Title
Whole Exome Sequencing in Adults with Chronic Kidney Disease: A Pilot Study

6. Manuscript Identifying Number (if you know it)
Annals of Internal Medicine M17-1319

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

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Dr. Caridi 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)
Vivette

2. Surname (Last Name)
D'Agati

3. Date
16-August-2017

4. Are you the corresponding author?

☐ Yes

☒ No

Corresponding Author's Name
Ali Gharavi

5. Manuscript Title
Whole exome sequencing uncovers genetic diagnoses in adult chronic kidney disease

6. Manuscript Identifying Number (if you know it)
M17-1319

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

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Dr. D'Agati 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)
David

2. Surname (Last Name)
Fasel

3. Date
16-August-2017

4. Are you the corresponding author?

☐ Yes

☒ No

Corresponding Author's Name
Ali Gharavi

5. Manuscript Title
Whole Exome Sequencing Uncovers Genetic Diagnoses and Informs Clinical Management in Adult Chronic Kidney Disease

6. Manuscript Identifying Number (if you know it)
M17-1319

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

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Dr. Fasel 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) Christine	2. Surname (Last Name) Garcia	3. Date 01-September-2017
4. Are you the corresponding author? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Corresponding Author's Name Gharavi, Ali
5. Manuscript Title Whole Exome Sequencing Uncovers Genetic Diagnoses and Informs Clinical Management in Adult Chronic Kidney Disease		
6. Manuscript Identifying Number (if you know it) M17-1319		

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

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)
Ali

2. Surname (Last Name)
Gharavi

3. Date
17-August-2017

4. Are you the corresponding author? ☒ Yes ☐ No

5. Manuscript Title
Whole Exome Sequencing Uncovers Genetic Diagnoses and Informs Clinical Management in Adult Chronic Kidney Disease

6. Manuscript Identifying Number (if you know it)
M17-1319

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)
Emily

2. Surname (Last Name)
Groopman

3. Date
15-August-2017

4. Are you the corresponding author?

☐ Yes

☒ No

Corresponding Author's Name
Ali Gharavi

5. Manuscript Title

Whole Exome Sequencing Uncovers Genetic Diagnoses and Informs Clinical Management in Adult Chronic Kidney Disease

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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

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Section 6. Disclosure Statement

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Dr. Groopman 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)

Vaidehi

2. Surname (Last Name)

Jobanputra

3. Date

20-August-2017

4. Are you the corresponding author?

☐ Yes☒ No

Corresponding Author's Name

5. Manuscript Title

"Whole Exome Sequencing Uncovers Genetic Diagnoses and Informs Clinical Management in Adult Chronic Kidney Disease"

6. Manuscript Identifying Number (if you know it)

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Are there any relevant conflicts of interest?

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Dr. Jobanputra has nothing to disclose.

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Section 1. Identifying Information

1. Given Name (First Name)

Krzysztof

2. Surname (Last Name)

Kiryluk

3. Date

15-August-2017

4. Are you the corresponding author?

☐ Yes

☒ No

Corresponding Author's Name

5. Manuscript Title

Whole Exome Sequencing Uncovers Genetic Diagnoses and Informs Clinical Management in Adult Chronic Kidney Disease

6. Manuscript Identifying Number (if you know it)

M17-1319

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Section 1. Identifying Information

1. Given Name (First Name)
YIFU

2. Surname (Last Name)
LI

3. Date
15-August-2017

4. Are you the corresponding author?

☐ Yes ☒ No

Corresponding Author's Name
Ali Gharavi

5. Manuscript Title
Whole Exome Sequencing Uncovers Genetic Diagnoses and Informs Clinical Management in Adult Chronic Kidney Disease

6. Manuscript Identifying Number (if you know it)
M17-1319

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name) Francesca	2. Surname (Last Name) Lugani	3. Date 16-August-2017
4. Are you the corresponding author? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Corresponding Author's Name Ali Gharavi
5. Manuscript Title Whole Exome Sequencing Uncovers Genetic Diagnoses and Informs Clinical Management in Adult Chronic Kidney Disease		
6. Manuscript Identifying Number (if you know it) M17-1319		

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name) Maddalena	2. Surname (Last Name) Marasa	3. Date 11-October-2017
4. Are you the corresponding author? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Corresponding Author's Name Ali Gharavi
5. Manuscript Title Whole Exome Sequencing in Adults with Chronic Kidney Disease: A Pilot Study		
6. Manuscript Identifying Number (if you know it) M17-1319		

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)
glen

2. Surname (Last Name)
markowitz

3. Date
30-October-2017

4. Are you the corresponding author?

☐ Yes ☒ No

Corresponding Author's Name

5. Manuscript Title
Whole Exome Sequencing in Adults with Chronic Kidney Disease: A Pilot Study

6. Manuscript Identifying Number (if you know it)
M17-1319

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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Dr. markowitz 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) Anna	2. Surname (Last Name) Materna-Kiryluk	3. Date 26-October-2017
4. Are you the corresponding author? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Corresponding Author's Name Ali G. Gharavi
5. Manuscript Title "Whole Exome Sequencing in Adults with Chronic Kidney Disease: A Pilot Study"		
6. Manuscript Identifying Number (if you know it) M17-1319		

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)
Aditya

2. Surname (Last Name)
Mattoo

3. Date
17-August-2017

4. Are you the corresponding author? ☐ Yes ☐ No

5. Manuscript Title
Whole Exome Sequencing Uncovers Genetic Diagnoses and Informs Clinical Management in Adult Chronic Kidney Disease

6. Manuscript Identifying Number (if you know it)
M17-1319

Section 2. The Work Under Consideration for Publication

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Dr. Mattoo 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)

Hila

2. Surname (Last Name)

Milo Rasouly

3. Date

15-August-2017

4. Are you the corresponding author?

☐ Yes

☒ No

Corresponding Author's Name

Ali Gharavi

5. Manuscript Title

Whole Exome Sequencing Uncovers Genetic Diagnoses and Informs Clinical Management in Adult Chronic Kidney Disease

6. Manuscript Identifying Number (if you know it)

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Dr. Milo Rasouly has nothing to disclose.

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Adele

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Mitrotti

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15-August-2017

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Corresponding Author's Name
Ali Gharavi

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name) Jordan	2. Surname (Last Name) Nestor	3. Date 18-October-2017
4. Are you the corresponding author? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Corresponding Author's Name Dr. Ali Gharavi
5. Manuscript Title "Whole Exome Sequencing in Adults with Chronic Kidney Disease: A Pilot Study"		
6. Manuscript Identifying Number (if you know it) M17-1319		

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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Section 4. Intellectual Property -- Patents & Copyrights

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

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Section 6. Disclosure Statement

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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) Chad	2. Surname (Last Name) Newton	3. Date 11-October-2017
4. Are you the corresponding author? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
Corresponding Author's Name _____		
5. Manuscript Title Whole Exome Sequencing in Adults with Chronic Kidney Disease: A Pilot Study		
6. Manuscript Identifying Number (if you know it) _____		

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

If yes, please fill out the appropriate information below. If you have more than one entity press the "ADD" button to add a row. Excess rows can be removed by pressing the "X" button.

Name of Institution/Company	Grant?	Personal Fees?	Non-Financial Support?	Other?	Comments
National institutes of Health	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

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Dr. Newton reports grants from National institutes of Health, during the conduct of the study; .

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)
JAI

2. Surname (Last Name)
RADHAKRISHNAN

3. Date
15-August-2017

4. Are you the corresponding author?

☐ Yes

☒ No

Corresponding Author's Name

5. Manuscript Title

Whole Exome Sequencing Uncovers Genetic Diagnoses and Informs Clinical Management in Adult Chronic Kidney Disease

6. Manuscript Identifying Number (if you know it)

M17-1319

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Dr. RADHAKRISHNAN 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)

Luca

2. Surname (Last Name)

Rampoldi

3. Date

25-August-2017

4. Are you the corresponding author?

☐ Yes ☒ No

Corresponding Author's Name

Ali G. Gharavi

5. Manuscript Title

Whole exome sequencing informs clinical management and identifies novel genetic diagnosis in adult CKD

6. Manuscript Identifying Number (if you know it)

M17-1319

Section 2. The Work Under Consideration for Publication

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Dr. Rampoldi has nothing to disclose.

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Maya

2. Surname (Last Name)

Rao

3. Date

15-August-2017

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☐ Yes

☒ No

Corresponding Author's Name

Ali Gharavi

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)
Simone

2. Surname (Last Name)
Sanna-Cherchi

3. Date
30-October-2017

4. Are you the corresponding author?

☐ Yes ☒ No

Corresponding Author's Name
Ali Gharavi

5. Manuscript Title
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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

ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name) Lindsey	2. Surname (Last Name) Slater	3. Date 27-November-2017
4. Are you the corresponding author? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Corresponding Author's Name Ali Gharavi
5. Manuscript Title Whole Exome Sequencing in Adults with Chronic Kidney Disease: A Pilot Study		
6. Manuscript Identifying Number (if you know it) M17-1319		

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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Section 6. Disclosure Statement

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Dr. Slater 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) Miguel	2. Surname (Last Name) Verbitsky	3. Date 15-August-2017
4. Are you the corresponding author? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Corresponding Author's Name Ali Gharavi
5. Manuscript Title Whole Exome Sequencing Uncovers Genetic Diagnoses and Informs Clinical Management in Adult Chronic Kidney Disease		
6. Manuscript Identifying Number (if you know it) M17-1319		

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

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Dr. Verbitsky has nothing to disclose.

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Section 1. Identifying Information

1. Given Name (First Name) Rik	2. Surname (Last Name) Westland	3. Date 16-August-2017
4. Are you the corresponding author? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Corresponding Author's Name A. Gharavi
5. Manuscript Title Whole Exome Sequencing Uncovers Genetic Diagnoses and Informs Clinical Management in Adult Chronic Kidney Disease		
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. Westland 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) Marcin	2. Surname (Last Name) Zaniew	3. Date 12-October-2017
4. Are you the corresponding author? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Corresponding Author's Name Ali Gharavi
5. Manuscript Title Whole Exome Sequencing in Adults with Chronic Kidney Disease: A Pilot Study		
6. Manuscript Identifying Number (if you know it) 		

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