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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)  
   Catherine

2. Surname (Last Name)  
   Breen

3. Date  
   03-May-2015

4. Are you the corresponding author?  
   ☑ No

   Corresponding Author’s Name  
   Frits Wijburg

5. Manuscript Title  
   The course of hip dysplasia in MPS I Hurler after successful hematopoietic stem cell transplantation

6. Manuscript Identifying Number (if you know it)

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Are there any relevant conflicts of interest?  
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Dr. Breen 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)  Matthijs
2. Surname (Last Name)  Den Os
3. Date  30-April-2015
4. Are you the corresponding author?  Yes  No  ✔

5. Manuscript Title
The course of hip dysplasia in MPS I Hurler after successful hematopoietic stem cell transplantation

6. Manuscript Identifying Number (if you know it)

Section 2. The Work Under Consideration for Publication

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Dr. Den Os 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) simon
2. Surname (Last Name) jones
3. Date 11-May-2015
4. Are you the corresponding author? ☑ No
5. Manuscript Title
The course of hip dysplasia in MPS I Hurler after successful hematopoietic stem cell transplantation
6. Manuscript Identifying Number (if you know it)

Corresponding Author’s Name
FA Wijburg

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.)?
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If yes, please fill out the appropriate information below.

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<th>Name of Entity</th>
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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. Jones reports grants, personal fees and non-financial support from Genzyme, 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) Paula
2. Surname (Last Name) Kelly
3. Date 20-August-2015
4. Are you the corresponding author? □ Yes  ✔ No
   Corresponding Author’s Name FA Wijburg
5. Manuscript Title
   The course of hip dysplasia in MPS I Hurler after successful hematopoietic stem cell transplantation
6. Manuscript Identifying Number (if you know it)

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Dr. Kelly has nothing to disclose.

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<td>Kennedy</td>
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Corresponding Author’s Name: F Wijburg

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Dr. Kennedy has nothing to disclose.

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- **Royalties:** Funds are coming in to you or your institution due to your patent
### Section 1. Identifying Information

1. **Given Name (First Name)**
   - Tyler

2. **Surname (Last Name)**
   - Ketterl

3. **Date**
   - 27-April-2015

4. **Are you the corresponding author?**
   - Yes ☑ No

   - **Corresponding Author’s Name**
     - FA Wijburg

5. **Manuscript Title**
   - The course of hip dysplasia in MPS I Hurler after successful hematopoietic stem cell transplantation

6. **Manuscript Identifying Number (if you know it)**

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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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- Yes ☑ No
ICMJE Form for Disclosure of Potential Conflicts of Interest

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Section 6. Disclosure Statement

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Dr. Ketterl 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)  
   Olga

2. Surname (Last Name)  
   Knaven

3. Date  
   28-April-2015

4. Are you the corresponding author?  
   ☑ No  
   Corresponding Author’s Name  
   Frits Wijburg

5. Manuscript Title  
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6. Manuscript Identifying Number (if you know it)

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☑ No

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Olga Knaven 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)  Eveline
2. Surname (Last Name)  Langereis
3. Date  11-May-2015
4. Are you the corresponding author?  Yes  ✔  No

5. Manuscript Title
The course of hip dysplasia in MPS I Hurler after successful hematopoietic stem cell transplantation

6. Manuscript Identifying Number (if you know it)

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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

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.

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Dr. Langereis reports grants from Genzyme/Biomarin Joint Venture, during the conduct of the study.

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**Section 1. Identifying Information**

1. Given Name (First Name)  
   Troy

2. Surname (Last Name)  
   Lund

3. Date  
   11-May-2015

4. Are you the corresponding author?  
   [ ] Yes  
   [x] No

   Corresponding Author’s Name  
   Frits Wijburg

5. Manuscript Title  
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Dr. Lund has nothing to disclose.

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<td>Jean</td>
<td>Mercer</td>
<td>08-May-2015</td>
</tr>
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</table>

4. Are you the corresponding author? [ ] Yes [x] No

Corresponding Author’s Name

FA Wijburg

5. Manuscript Title

The course of hip dysplasia in MPS I Hurler after successful hematopoietic stem cell transplantation

6. Manuscript Identifying Number (if you know it)

Unk

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Sister Jean Mercer has nothing to disclose.

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Section 1. Identifying Information

1. Given Name (First Name)  
   Weston

2. Surname (Last Name)  
   Miller

3. Date  
   11-May-2015

4. Are you the corresponding author?  
   [ ] Yes  [x] No

   Corresponding Author’s Name  
   Frits Wijburg

5. Manuscript Title  
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   [ ] Yes  [x] No

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Are there any relevant conflicts of interest?  
   [ ] Yes  [x] No

Section 4. Intellectual Property -- Patents & Copyrights

Do you have any patents, whether planned, pending or issued, broadly relevant to the work?  
   [ ] Yes  [x] No
ICMJE Form for Disclosure of Potential Conflicts of Interest

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?

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Section 6. Disclosure Statement

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Dr. Miller has nothing to disclose.

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)  Anne
2. Surname (Last Name)  O'Meara
3. Date  27-April-2015
4. Are you the corresponding author?  ☑ No
   Corresponding Author's Name  F.A. Wijburg
5. Manuscript Title  The course of hip dysplasia in MPS I Hurler after successful hematopoietic stem cell transplantation
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?  ☑ No

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Dr. O'Meara 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)  Paul
2. Surname (Last Name)  Orchard
3. Date  14-May-2015
4. Are you the corresponding author?  Yes  No
   Corresponding Author’s Name  Frits Wijburg
5. Manuscript Title  The course of hip dysplasia in MPS I Hurler after successful hematopoietic
6. Manuscript Identifying Number (if you know it)

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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ICMJE Form for Disclosure of Potential Conflicts of Interest

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Dr. Orchard 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)  Ralph
2. Surname (Last Name)  Sakkers
3. Date  30-April-2015
4. Are you the corresponding author?  Yes  ✔  No
   Corresponding Author’s Name  Frits Wijburg
5. Manuscript Title  The course of hip dysplasia in MPS I Hurler after successful hematopoietic stem cell transplantation
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.)?  ✔ Yes  No

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.

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<tr>
<td>Genzyme/Sanofi</td>
<td>☐</td>
<td>✔</td>
<td>☐</td>
<td>☐</td>
<td>Occasional consultancy fee</td>
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Section 4. Intellectual Property -- Patents & Copyrights

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Dr. Sakkers reports personal fees from Genzyme/Sanofi, 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)  
   Rick

2. Surname (Last Name)  
   van Rijn

3. Date  
   27-April-2015

4. Are you the corresponding author?  
   [ ] Yes  ✔ No

Corresponding Author’s Name  
   Frits Wijburg

5. Manuscript Title  
   The course of hip dysplasia in MPS I Hurler after successful hematopoietic stem cell transplantation

6. Manuscript Identifying Number (if you know it)

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Dr. van Rijn reports other from Springer, other from Thieme, outside the submitted work.

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Section 1. Identifying Information

1. Given Name (First Name)  
Frits

2. Surname (Last Name)  
Wijburg

3. Date  
28-May-2015

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

5. Manuscript Title  
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Dr. Wijburg reports grants and personal fees from Genzyme Sanofi, during the conduct of the study; .

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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.

   Report all sources of revenue paid (or promised to be paid) directly to you or your institution on your behalf over the 36 months prior to submission of the work. This should include all monies from sources with relevance to the submitted work, not just monies from the entity that sponsored the research. Please note that your interactions with the work’s sponsor that are outside the submitted work should also be listed here. If there is any question, it is usually better to disclose a relationship than not to do so.

   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.


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

5. 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
ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)  
Klane

2. Surname (Last Name)  
White

3. Date  
01-May-2015

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

5. Manuscript Title  
The course of hip dysplasia in MPS I Hurler after successful hematopoietic stem cell transplantation

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

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.

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<td>☐</td>
<td>☑</td>
<td>Speaker honoraria and associated travel</td>
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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

If yes, please fill out the appropriate information below.

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<th>Name of Entity</th>
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<th>Personal Fees?</th>
<th>Non-Financial Support?</th>
<th>Other?</th>
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<td>grant funding, speaker honoraria and associated travel, consultant fees</td>
</tr>
</tbody>
</table>
ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 4. Intellectual Property -- Patents & Copyrights

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

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

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. White reports other from Genzyme, during the conduct of the study; other from UptoDate.com, grants and other from Biomarin, outside the submitted work.

Evaluation and Feedback

Please visit http://www.icmje.org/cgi-bin/feedback to provide feedback on your experience with completing this form.