

Section 1. Identifying Inform	nation	
Given Name (First Name) Anne-Marie	2. Surname (Last Name) Gerdes	3. Date 22-January-2018
4. Are you the corresponding author?	✓ Yes No	
5. Manuscript Title Familie med nedarvet DICER1-mutatio	n	
6. Manuscript Identifying Number (if you k	now it)	
Section 2. The Work Under C	onsideration for Publication	
	eive payment or services from a third party (government, or g but not limited to grants, data monitoring board, study of est?	
Section 3. Relevant financial	activities outside the submitted work.	
of compensation) with entities as descri	in the table to indicate whether you have financial relibed in the instructions. Use one line for each entity; port relationships that were present during the 36 est? Yes No	add as many lines as you need by
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Do you have any patents, whether plan	ned, pending or issued, broadly relevant to the wor	k? ☐ Yes ✓ No



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Section 6.	Disclosure Statement
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Dr. Gerdes has n	othing to disclose.

Evaluation and Feedback



Section 1. Identifying Inform	ation		
Given Name (First Name) Mays	2. Surnar Altaraihi	me (Last Nam	3. Date 12-October-1995
4. Are you the corresponding author?	Yes	✓ No	Corresponding Author's Name Anne-Marie Gerdes
5. Manuscript Title A family with germline DICER1 mutation	n		
6. Manuscript Identifying Number (if you kn UFL-08-17-0604	ow it)		
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Did you or your institution at any time recei any aspect of the submitted work (including statistical analysis, etc.)? Are there any relevant conflicts of intere	but not lim	nited to grant	rom a third party (government, commercial, private foundation, etc.) for s, data monitoring board, study design, manuscript preparation,
If yes, please fill out the appropriate info Excess rows can be removed by pressing			have more than one entity press the "ADD" button to add a row.
Name of Institution/Company	Grant?	SUP BEIN	Non-Financial Other? Comments
The Danish Cancer Society		V	A scholarship from the Danish Cancer Society
Section 3. Polyant financial			
Relevant financial	activities	outside tl	ne submitted work.
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	elationships or activities that readers could perceive to have influenced, or that give the appearance of encing, what you wrote in the submitted work?
V-03-01-0-0	wing relationships/conditions/circumstances are present (explain below): tionships/conditions/circumstances that present a potential conflict of interest
At the time of ma On occasion, jou	anuscript acceptance, journals will ask authors to confirm and, if necessary, update their disclosure statements. rnals may ask authors to disclose further information about reported relationships.
Section 6.	Disclosure Statement
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Dr. Altaraihi repo	orts personal fees from null, during the conduct of the study; .

Evaluation and Feedback



Section 1. Identifying Inform	nation	
Given Name (First Name) Jens	2. Surname (Last Name) Pedersen	3. Date 19-January-2018
4. Are you the corresponding author?	Yes ✓ No	Corresponding Author's Name
5. Manuscript Title		
En familie med nedarvet DICER1 mutat 6. Manuscript Identifying Number (if you k		
Section 2. The Work Under C	Consideration for Publi	cation
Did you or your institution at any time reco any aspect of the submitted work (includin statistical analysis, etc.)? Are there any relevant conflicts of inter	g but not limited to grants, da	a a third party (government, commercial, private foundation, etc.) for ata monitoring board, study design, manuscript preparation,
Section 3. Relevant financia	l activities outside the	submitted work.
of compensation) with entities as desc	ribed in the instructions. U eport relationships that we	nether you have financial relationships (regardless of amount se one line for each entity; add as many lines as you need by re present during the 36 months prior to publication.
Section 4. Intellectual Prope	erty Patents & Copyri	ghts
Do you have any patents, whether pla	nned, pending or issued, b	roadly relevant to the work? Yes No



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Section 6.	Disclosure Statement
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Dr. Pedersen has	nothing to disclose.

Evaluation and Feedback



Section 1. Identifying Inform	nation	
Given Name (First Name) Maria	2. Surname (Last Name) Rossing	3. Date
4. Are you the corresponding author?	☐ Yes ✓ No	Corresponding Author's Name Anne-Marie Gerdes,
5. Manuscript Title		
6. Manuscript Identifying Number (if you kn	now it)	
Section 2. The Work Under Co	onsideration for Public	cation
Did you or your institution at any time recei any aspect of the submitted work (including statistical analysis, etc.)? Are there any relevant conflicts of intere	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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Section 3. Relevant financial	activities outside the s	submitted work.
of compensation) with entities as descri	bed 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.
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Section 4. Intellectual Proper	ty Patents & Copyric	phts
Do you have any patents, whether plant	ned, pending or issued, br	oadly relevant to the work? Yes V No



Section 5. Relationships and assessed 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?
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Section 6. Disclosure Statement
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Dr. Rossing has nothing to disclose.

Evaluation and Feedback



Section 1. Identifying Inform	mation	
Given Name (First Name) Karin A. W.	2. Surname (Last Name) Wadt	3. Date 19-January-2018
4. Are you the corresponding author?	Yes ✓ No	Corresponding Author's Name Anne-Marie Gerdes
5. Manuscript Title En familie med nedarvet DICER1 muta	tion	
6. Manuscript Identifying Number (if you k	know it)	
Section 2. The Work Under 0	Consideration for Publi	ication
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Dr. Wadt has not	hing to disclose.

Evaluation and Feedback

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