

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

Adhikari 1



| Section 1. | Identifying Inform | ation | | |
|---------------------------------------------------------------------------------------------------|---------------------------|------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------|
| 1. Given Name (First Name) 2. Surname (Last Name) Samrachana Adhikari | | , | 3. Date 24-April-2020 | |
| 4. Are you the corresponding author? | | Yes ✓ No | Corresponding Author's Name Jose Scher | |
| 5. Manuscript Title COVID-19 in Imm | | natory Diseases A New Y | ork Case Series | |
| 6. Manuscript Iden 20-09567 | tifying Number (if you kn | ow it) | | |
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| Section 2. | The Work Under Co | onsideration for Public | ation | |
| any aspect of the su statistical analysis, e | ubmitted work (including | but not limited to grants, da | a third party (government, commercial, private foundatio ta monitoring board, study design, manuscript preparatio | |
| Section 3. | Relevant financial | activities outside the s | ubmitted work. | |
| of compensation) clicking the "Add |) with entities as descri | bed in the instructions. Us port relationships that wer | ether you have financial relationships (regardless of e one line for each entity; add as many lines as you r e present during the 36 months prior to publicat i | need by |
| Section 4. | Intellectual Proper | ty Patents & Copyric | ıhts | |
| Do you have any patents, whether planned, pending or issued, broadly relevant to the work? Yes Vo | | | | |

Adhikari 2



| Section 5. Polationships not severed above |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
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| 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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| Based on the above disclosures, this form will automatically generate a disclosure statement, which will appear in the box below. |
| Dr. Adhikari has nothing to disclose. |

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Adhikari 3



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Axelrad 1



| Section 1. Identifying Inform | nation | |
|-----------------------------------------------------------|--------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| 1. Given Name (First Name) Jordan | 2. Surname (Last Name) Axelrad | 3. Date 24-April-2020 |
| 4. Are you the corresponding author? | ☐ Yes ✓ No | Corresponding Author's Name Jose Scher |
| 5. Manuscript Title COVID-19 in Immune-Mediated Inflam | matory Diseases A New Y | ork Case Series |
| 6. Manuscript Identifying Number (if you k 20-09567 | now it) | |
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| Do you have any patents, whether plan | nned, pending or issued, br | roadly relevant to the work? Yes V No |

Axelrad 2



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| Dr. Axelrad has nothing to disclose. |

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Castillo 1



| Section 1. | Identifying Inform | nation | |
|--------------------------------------------------------|---------------------------|------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| 1. Given Name (First Name) 2. Surnam Rochelle Castillo | | 2. Surname (Last Name) Castillo | 3. Date 24-April-2020 |
| 4. Are you the corresponding author? | | Yes ✓ No | Corresponding Author's Name Jose Scher |
| 5. Manuscript Title COVID-19 in Imm | | natory Diseases A New Y | ork Case Series |
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| Do you have any | patents, whether plan | ned, pending or issued, bı | roadly relevant to the work? Yes V No |

Castillo 2



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Chen 1



| Section 1. Identifying Info | rmation | |
|----------------------------------------------------------|-------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| 1. Given Name (First Name) Alan | 2. Surname (Last Name) Chen | 3. Date 24-April-2020 |
| 4. Are you the corresponding author? | ☐ Yes ✓ No | Corresponding Author's Name Jose Scher |
| 5. Manuscript Title COVID-19 in Immune-Mediated Infla | mmatory Diseases A New Y | 'ork Case Series |
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| Do you have any patents, whether pl | | |

Chen 2



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| Dr. Chen has nothing to disclose. |

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Haberman 1



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| Given Name (First Name) Rebecca | | 2. Surname (Last Name Haberman | e) 3. Date 24-April-2020 | | |
| 4. Are you the corresponding author? | | ☐ Yes ✓ No | Corresponding Author's Name Jose Scher | | |
| · · | 5. Manuscript Title COVID-19 in Immune-Mediated Inflammatory Diseases A New York Case Series | | | | |
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| Name of Entity | | Grant? Personal Fees? | Non-Financial Other? Comments | | |
| lanssen | | | Advisory Board | | |
| | I | | | | |
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Haberman 2



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| Dr. Haberman reports other from Janssen, outside the submitted work. |

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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

Hudesman 1



| Section 1. Identifying Info | rmation | | | |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------|------------------------------|-------------------------------|--|
| Given Name (First Name) David | 2. Surname (Last Name) Hudesman | | 3. Date 24-April-2020 | |
| 4. Are you the corresponding author? | ☐ Yes ✓ No | Corresponding Autho | or's Name | |
| 5. Manuscript Title COVID-19 in Immune-Mediated Infla | mmatory Diseases A New Y | York Case Series | | |
| 6. Manuscript Identifying Number (if you 20-09567 | u know it) | | | |
| | | _ | | |
| Section 2. The Work Under | r Consideration for Publi | ication | | |
| 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 Vo | | | | |
| Section 3. Relevant financi | ial 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? | | | | |
| Name of Entity | Grant? Personal No | on-Financial Support? Other? | Comments | |
| fizer | V | | Research Grant and Consultant | |
| anssen | | | Consultant | |
| Abbvie | | | Consultant | |
| akeda | | | Consultant | |
| MC | | | Consultant | |

Hudesman 2



| Section 4. Intellectual Property Patents & Copyrights |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Do you have any patents, whether planned, pending or issued, broadly relevant to the work? Yes Volume 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. Hudesman reports grants and personal fees from Pfizer, personal fees from Janssen, personal fees from Abbvie, personal fees from Takeda, personal fees from BMS, outside the submitted work. |

Evaluation and Feedback

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

Hudesman 3



Instructions

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

Izmirly 1



| Section 1. | Identifying Inform | nation | | | |
|-------------------------------------------------------------------------------------------------|------------------------------------------------------|-------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|--|
| 1. Given Name (Fir Peter | , , | 2. Surname (Last Name) Izmirly | 3. Date 24-April-2020 | | |
| 4. Are you the corresponding author? | | Yes ✓ No | Corresponding Author's Name Jose Scher | | |
| 5. Manuscript Title COVID-19 in Immune-Mediated Inflammatory Diseases A New York Case Series | | | | | |
| 6. Manuscript Iden 20-09567 | tifying Number (if you kr | now it) | | | |
| | | | | | |
| Section 2. | The Work Under Co | onsideration for Publ | lication | | |
| any aspect of the su statistical analysis, | ubmitted work (including | but not limited to grants, o | m a third party (government, commercial, private foundation, etc.) for data monitoring board, study design, manuscript preparation, | | |
| Section 3. | Relevant financial | activities outside the | submitted work. | | |
| of compensation clicking the "Add |) with entities as descri +" box. You should rep | ibed in the instructions. Uport relationships that we | whether you have financial relationships (regardless of amount Use one line for each entity; add as many lines as you need by ere present during the 36 months prior to publication . | | |
| • | evant conflicts of intere ut the appropriate info | | | | |
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| Name of Entity | | Grant? Personal No | on-Financial Other? Comments | | |
| Glaxo Smith Kline (GS | K) | | Consultant | | |
| Exagen | | | Consultant | | |
| | | | | | |
| Section 4. | Latelle de LB | to Detect 0.5 | to be a | | |
| | Intellectual Proper | rty Patents & Copyr | lights | | |
| Do you have any | patents, whether plan | ned, pending or issued, b | broadly relevant to the work? Yes Vo | | |

Izmirly 2



| Section 5. Polationships not sovered above | | | | |
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| 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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| 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 | | | | |
| Disciosare statement | | | | |
| Based on the above disclosures, this form will automatically generate a disclosure statement, which will appear in the box below. | | | | |
| Dr. Izmirly reports personal fees from Glaxo Smith Kline (GSK), personal fees from Exagen, outside the submitted work. | | | | |

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Izmirly 3



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Neimann 1



| Section 1. Identifying In | formation | |
|-------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| 1. Given Name (First Name) Andrea | 2. Surname (Last Name) Neimann | 3. Date 24-April-2020 |
| 4. Are you the corresponding author? | ☐ Yes ✓ No | Corresponding Author's Name Jose Scher |
| 5. Manuscript Title COVID-19 in Immune-Mediated In | flammatory Diseases A New Y | ork Case Series |
| 6. Manuscript Identifying Number (if y 20-09567 | vou know it) | |
| | | |
| Section 2. The Work Und | er Consideration for Publi | cation |
| | uding but not limited to grants, da | a third party (government, commercial, private foundation, etc.) for ata monitoring board, study design, manuscript preparation, |
| Section 3. Relevant finan | icial activities outside the | submitted work. |
| of compensation) with entities as o | described in the instructions. Used the second in the instructions. Used the second in | ether 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 Pr | operty Patents & Copyri | ghts |
| Do you have any patents, whether | planned, pending or issued, b | roadly relevant to the work? Yes V No |

Neimann 2



| Section 5. Relationships not covered above | | | | |
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| 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 | | | | |
| Disclosure Statement | | | | |
| Based on the above disclosures, this form will automatically generate a disclosure statement, which will appear in the box below. | | | | |
| Dr. Neimann has nothing to disclose. | | | | |

Evaluation and Feedback

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Neimann 3



Instructions

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

Scher 1



| Section 1. | Identifying Inform | nation | | | | |
|------------------------------------------------------------------|--------------------------------------------------------------------------|----------------------------------------------------------------------------|-----------------------------------------------------------|-----------------|--------------------------------------------------------------------------------------------------------------|--|
| 1. Given Name (Fi | Name (First Name) 2. Surname (Last Name) 3. Date Scher 24-April-2020 | | | | | |
| 4. Are you the co | rresponding author? | ✓ Yes No | | | | |
| 5. Manuscript Titl COVID-19 in Imr | e mune-Mediated Inflamı | matory Diseases A | New York Case Ser | ies | | |
| 6. Manuscript Ide 20-09567 | ntifying Number (if you kr | now it) | | | | |
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| Section 2. | The Work Under C | onsideration for | Publication | | | |
| any aspect of the s statistical analysis, Are there any re | submitted work (including | g but not limited to gra | | | ommercial, private foundation, etc.) design, manuscript preparation, | |
| Section 3. | Relevant financial | activities outside | the submitted | work. | | |
| of compensation clicking the "Add Are there any re | n) with entities as descr | ibed in the instruction port relationships the est? Yes ormation below. | ons. Use one line for at were present d] No | or each entity; | elationships (regardless of amour add as many lines as you need b months prior to publication . | |
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| lovartis | | | | ✓ Cons | sulting Fees | |
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Scher 2



| Section 4 | | | | |
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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 Vo | | | | |
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| Dr. Scher reports other from Novartis, other from Pfizer, other from Janssen, other from Abbvie, other from UCB, outside the submitted work. | | | | |

Evaluation and Feedback

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patent

Yan 1



| Section 1. | Identifying Inform | nation | | |
|---------------------------------------------------------------------------------------------------|------------------------------------------------------|---------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|
| 1. Given Name (First Name) Di | | 2. Surname (Last Name) Yan | 3. Date 24-April-2020 | |
| 4. Are you the corresponding author? | | Yes ✓ No | Corresponding Author's Name Jose Scher | |
| 5. Manuscript Title COVID-19 in Immune-Mediated Inflamn | | matory Diseases A New Y | ork Case Series | |
| 6. Manuscript Ider 20-09567 | ntifying Number (if you kr | now it) | | |
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| Section 2. | The Work Under Co | onsideration for Public | ation | |
| 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. | |
| of compensation clicking the "Add | the appropriate boxes i) with entities as descri | 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 & Copyri <u>c</u> | jhts | |
| Do you have any patents, whether planned, pending or issued, broadly relevant to the work? Yes Vo | | | | |

Yan 2



| Section 5. Relationships not covered above | | | | |
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| Relationships not covered above | | | | |
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| Dr. Yan has nothing to disclose. | | | | |

Evaluation and Feedback

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Yan 3