

Instructions

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

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Section 1.	Identifying Infor	mation	
1. Given Name (Fi Sara	rst Name)	2. Surname (Last Name) Anvari	3. Date 11-February-2021
4. Are you the corresponding author?		Yes 🖌 No	Corresponding Author's Name Kimberly Blumenthal
5. Manuscript Title	2		
Delayed Large Lo	ocal Reactions to the	Moderna COVID-19 Vaccine	
6. Manuscript Ider 21-02131	ntifying Number (if you	know it)	_

Section 2. The Work Under Consideration for Publication

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🖌 No

Are there any relevant conflicts of interest?		Yes	
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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	V N	lo
)			



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Dr. Anvari has nothing to disclose.

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Section 1. Identifying Infor	mation	
1. Given Name (First Name) Aleena	2. Surname (Last Name) Banerji	3. Date 10-February-2021
4. Are you the corresponding author?	Yes 🖌 No	Corresponding Author's Name Kimberly Blumenthal
5. Manuscript Title	Madaraa COVID 10 Vaccina	
Delayed Large Local Reactions to the		
6. Manuscript Identifying Number (if you	know it)	
21-02131		_

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Are there any relevant conflicts of interest?	Yes
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Are there any relevant conflicts of interest?	Y	'es	\checkmark	No
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Do you have any patents, whether planned, pending or issued, broadly relevant to the work?	Yes	\checkmark	No



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Dr. Banerji has nothing to disclose.

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4. Are you the cor	responding author?	✓ Yes No	
5. Manuscript Title Delayed Large L		Moderna COVID-19 Vaccine	

6. Manuscript Identifying Number (if you know it)

21-02131

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Are there any relevant conflicts of interest? \checkmark Yes \square 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 <mark>?</mark>	Other?	Comments	
National Institute of Health	\checkmark				NIH K01AI125631	
Massachusetts General Hospital Department of Medicine	\checkmark				Transformative Scholar Award	

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Are there any relevant conflicts of interest? Yes No

If yes, please fill out the appropriate information below.

Name of Entity	Grant?	Personal Fees	Non-Financial Support?	Other?	Comments	
AAAAI Foundation	\checkmark					
CRICO, the risk management foundation of harvard medical school	\checkmark					



Name of Entity	Grant?	Personal Fees ?	Non-Financial Support?	Other?	Comments	
Massachusetts General Hospital	\checkmark				Claflin Distinguished Scholar Award	

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. Blumenthal reports grants from National Institute of Health, grants from Massachusetts General Hospital Department of Medicine, during the conduct of the study; grants from AAAAI Foundation, grants from CRICO, the risk management foundation of harvard medical school, grants from Massachusetts General Hospital, utside the submitted work.

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4. Are you the corresponding author?		Yes 🖌 No	Corresponding Author's Name Kimberly Blumenthal
5. Manuscript Title Delayed Large Lo		Moderna COVID-19 Vaccine	
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No

Are there any relevant conflicts of interest? \checkmark Yes

If yes, please fill out the appropriate information below.

Name of Entity	Grant?	Personal Fees ?	Non-Financial Support?	Other?	Comments	
Fate Therapeutics				\checkmark	Patent royalties RE: previous work on induced pluripotent stem cells	

-	- •	
Sec		n 4
500		

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. Foreman reports other from Fate Therapeutics, outside the submitted work.

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1. Given Name (Fii Esther	rst Name)	2. Surname (Last Name) Freeman	3. Date 10-February-2021
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Are there any relevant conflicts of interest? \checkmark Yes

If yes, please fill out the appropriate information below.

Name of Entity	Grant?	Personal Fees ?	Non-Financial Support?	Other?	Comments	
National Institute of Health - NIAID	\checkmark				K23 - supplement to study COVID- related skin manifestations.	
International League of Dermatologic Societies	\checkmark				Grant to support COVID-19 Dermatology Registry, which includes COVID-19 vaccine reactions	
UpToDate				\checkmark	Royalty as author for UpToDate topic "Coronavirus disease 2019 (COVID-19): Issues related to dermatologic care"	



Section 4. Intellectual Property -- Patents & Copyrights

Do you have any patents, whether planned, pending or issued, broadly relevant to the work? Yes Ves

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Dr. Freeman reports grants from National Institute of Health - NIAID, grants from International League of Dermatologic Societies, other from UpToDate, outside the submitted work.

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Section 1.	Identifying Infor	mation		
1. Given Name (Fi Dean	rst Name)	2. Surname (Last Name) Hashimoto		3. Date 11-February-2021
4. Are you the cor	responding author?	Yes 🖌 No	Corresponding Author's Nai Kimberly Blumenthal	me
5. Manuscript Title DelaDelayed Lar		the Moderna COVID-19 V	/accine	
6. Manuscript Ide 21-02131	ntifying 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.)?

🖌 No

Are there any relevant conflicts of interest?	Yes
---	-----

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



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):

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Section 6. Disclosure Statement

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Dr. Hashimoto has nothing to disclose.

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5. Manuscript Title			
Delayed Large Lo	ocal Reactions to the l	Moderna COVID-19 Vaccii	ne
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Are there any relevant conflicts of interest?		Yes
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No

Are there any relevant conflicts of interest?		Yes	√	
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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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Dr. Li has nothing to disclose.

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Section 1.	Identifying Inform	mation		
1. Given Name (Fi Lacey	rst Name)	2. Surname (Last Name) Robinson		. Date 1-February-2021
4. Are you the cor	responding author?	Yes 🖌 No	Corresponding Author's Name Kimberly Blumenthal	2
5. Manuscript Title Delayed Large Le		Moderna COVID-19 Vaccine		
6. Manuscript Ider 21-02131	ntifying Number (if you k	xnow it)	_	

Section 2. The Work Under Consideration for Publication

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Are there any relevant conflicts of interest?		Yes
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No

Are there any relevant conflicts of interest?		Yes	\checkmark	1
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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	\checkmark	No



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Dr. Robinson has nothing to disclose.

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1. Given Name (Fi Rebecca	rst Name)	2. Surname (Last Name) Saff	3. Date 11-February-2021
4. Are you the corresponding author?		Yes 🖌 No	Corresponding Author's Name Kimberly Blumenthal,
5. Manuscript Title	2		
Delayed Large Lo	ocal Reactions to the	Moderna COVID-19 Vaccine	2
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Are there any relevant conflicts of interest?		Yes
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No

Are there any relevant conflicts of interest?		Yes	\checkmark	
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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	
		•	



Section 5. Relationships not covered above

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Dr. Saff has nothing to disclose.

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Are there any relevant conflicts of interest? Yes

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No

Are there any relevant conflicts of interest? \checkmark Yes

If yes, please fill out the appropriate information below.

Name of Entity	Grant?	Personal Fees	Non-Financial Support?	Other?	Comments
Single lecture on COVID-19 to Vertex Pharmaceuticals 3/2020		\checkmark			Received compensation to give a talk about COVID-19

-			
SE	ecti	on	4
5			

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

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Dr. Shenoy reports personal fees from Single lecture on COVID-19 to Vertex Pharmaceuticals 3/2020, outside the submitted work.

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1. Given Name (First Name) 2. Surname (Last Name) 3. Date Anna Wolfson 10-February-202 4. Are you the corresponding author? Yes ✓ No Corresponding Author's Name	
4 Are you the corresponding author? Ves V No Corresponding Author's Name	21
Kimberly Blumenthal	
5. Manuscript Title	
Delayed Large Local Reactions to the Moderna COVID-19 Vaccine	
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21-02131	

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Are there any relevant conflicts of interest?		Yes	
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Are there any relevant conflicts of interest?		Yes	\checkmark	
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Section 4. Intellectual Property -- Patents & Copyrights

by you have any patents, whether planned, pending of issued, broadly relevant to the work: res ¥ No	Do you have any patents, whether planned, pending or issued, broadly relevant to the work? $\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \$	Yes	🖌 No
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Dr. Wolfson has nothing to disclose.

Evaluation and Feedback