

#### **Instructions**

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Broderick 1



Section 1.	Identifying Inform	nation	
1. Given Name (Fi Claire	rst Name)	Surname (Last Name)     Broderick	3. Date 31-March-2021
4. Are you the corresponding author?		Yes ✓ No	Corresponding Author's Name Michael Levin
5. Manuscript Title Immunomodula		system Inflammatory Synd	rome in Children
6. Manuscript Ide	ntifying Number (if you kr	now it)	
Section 2.	The Work Under C	onsideration for Public	cation
any aspect of the s statistical analysis,	submitted work (including	g 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 financial	activities outside the s	submitted work.
of compensation clicking the "Add	n) with entities as descri	ibed in the instructions. Us port relationships that we	ether you have financial relationships (regardless of amount se one line for each entity; add as many lines as you need by re <b>present during the 36 months prior to publication</b> .
Section 4.	Intellectual Prope	rty Patents & Copyri	ghts
Do you have any	patents, whether plan	ned, pending or issued, br	roadly relevant to the work? Yes V No

Broderick 2



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

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Broderick 3



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Carter 1



Section 1. Identifying Inform	ation		
1. Given Name (First Name) Michael	2. Surname (Last Name) Carter		3. Date 31-March-2021
4. Are you the corresponding author?	☐ Yes ✓ No	Corresponding Au	thor's Name
5. Manuscript Title Immunomodulatory Treatments of Mult	isystem Inflammatory Dis	order in Children	
6. Manuscript Identifying Number (if you kn 21-02968	ow it)		
		_	
Section 2. The Work Under Co	onsideration for Public	cation	
any aspect of the submitted work (including statistical analysis, etc.)? Are there any relevant conflicts of intere	but not limited to grants, da st?	ta monitoring board,	ment, commercial, private foundation, etc.) for study design, manuscript preparation, ntity press the "ADD" button to add a row.
Name of Institution/Company	Grant? Personal Nor	n-Financial upport?	? Comments
National Institute of Health Research (NIHR), Uk	<b>✓</b>		NIHR Academic Clinical Lectureship (CL-2017-17-006)
Section 3. Relevant financial a	activities outside the s	submitted work.	
of compensation) with entities as descri clicking the "Add +" box. You should rep Are there any relevant conflicts of intere	bed in the instructions. Us ort relationships that wer st? Yes V No	e one line for each e <b>present during t</b>	ncial relationships (regardless of amount entity; add as many lines as you need by he 36 months prior to publication.
Section 4. Intellectual Proper	ty Patents & Copyric	yhts	
Do you have any patents, whether plann	ned, pending or issued, br	oadly relevant to th	ne work? Yes Vo

Carter 2



Section 5.	
Section 5.	Relationships not covered above
	elationships or activities that readers could perceive to have influenced, or that give the appearance of encing, what you wrote in the submitted work?
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	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
Based on the abo	ove disclosures, this form will automatically generate a disclosure statement, which will appear in the box
Dr. Carter report	s grants from National Institute of Health Research (NIHR), UK, during the conduct of the study; .

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Cunnington 1



Section 1. Identifying Info	ormation	
Given Name (First Name)     Aubrey	2. Surname (Last Name) Cunnington	3. Date 31-March-2021
4. Are you the corresponding author?	Yes ✓ No	Corresponding Author's Name Michael Levin
5. Manuscript Title Immunomodulatory Treatment of M	Iultisystem Inflammatory Syn	drome in Children
6. Manuscript Identifying Number (if yo 21-02968	u know it)	
		-
Section 2. The Work Unde	r Consideration for Public	cation
	ding but not limited to grants, da	a third party (government, commercial, private foundation, etc.) for ita monitoring board, study design, manuscript preparation,
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Intellectual Pro	perty Patents & Copyrig	ints
Do you have any patents, whether p	lanned, pending or issued, br	oadly relevant to the work? Yes V No

Cunnington 2



Section 5.	
Re	lationships not covered above
	onships or activities that readers could perceive to have influenced, or that give the appearance of g, what you wrote in the submitted work?
✓ Yes, the following	relationships/conditions/circumstances are present (explain below):
No other relations	ships/conditions/circumstances that present a potential conflict of interest
My wife is an employ	ee of GlaxoSmithKline
	cript acceptance, journals will ask authors to confirm and, if necessary, update their disclosure statements may ask authors to disclose further information about reported relationships.
Section 6. Dis	closure Statement
Based on the above of below.	lisclosures, this form will automatically generate a disclosure statement, which will appear in the box
Dr. Cunnington repo	rts his wife is an employee of GlaxoSmithKline.

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De 1



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Do you have any	patents, whether plan	ned, pending or issued, br	oadly relevant to the work? ☐ Yes ✓ No

De 2



Section 5.		
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Dr. De has nothi	ng to disclose.	

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1

HERBERG



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Given Name (First Name)  JETHRO	2. Surname (Last Name) HERBERG	3. Date 31-March-2021	
4. Are you the corresponding author?	☐ Yes ✓ No	Corresponding Author's Name MICHAEL LEVIN	
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Section 3. Relevant finance	ial activities outside the s	submitted work.	
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Do you have any patents, whether planned, pending or issued, broadly relevant to the work? Yes Vo			

HERBERG 2



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Dr. HERBERG ha	s nothing to disclose.	

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

Hoggart 1



Section 1.	Identifying Inform	nation	
1. Given Name (Fir Clive	st Name)	2. Surname (Last Name) Hoggart	3. Date 31-March-2021
4. Are you the corr	esponding author?	Yes ✓ No	Corresponding Author's Name Michael Levin
5. Manuscript Title Immunomodulat		system Inflammatory Synd	rome in Children
6. Manuscript Ider 21-02968	ntifying Number (if you kr	now it)	
			_
Section 2.	The Work Under Co	onsideration for Public	cation
any aspect of the si statistical analysis,	ubmitted work (including	but not limited to grants, da	a third party (government, commercial, private foundation, etc.) for at a monitoring board, study design, manuscript preparation,
Section 3.	Relevant financial	activities outside the s	submitted work.
of compensation clicking the "Add	) with entities as descri	bed in the instructions. Use port relationships that we	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 Proper	ty Patents & Copyri	ghts
Do you have any			roadly relevant to the work? Yes V No

Hoggart 2



Section 5.	Delationships not severed above	
	Relationships not covered above	
	relationships or activities that readers could perceive to have influenced, or that give the appearance of encing, what you wrote in the submitted work?	
Yes, the follo	wing relationships/conditions/circumstances are present (explain below):	
✓ No other rela	ationships/conditions/circumstances that present a potential conflict of interest	
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Section 6.		
Section 6.	Disclosure Statement	
Based on the abo below.	ove disclosures, this form will automatically generate a disclosure statement, which will appear in the box	
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Kaforou 1



Section 1. Identifying Inform	nation	
1. Given Name (First Name) Myrsini	2. Surname (Last Name) Kaforou	3. Date 31-March-2021
4. Are you the corresponding author?	☐ Yes ✓ No	Corresponding Author's Name Michael Levin
5. Manuscript Title Immunomodulator Treatment of Multi	system Inflammatory Synd	rome in Children
6. Manuscript Identifying Number (if you k 21-02968	now it)	
Section 2. The Work Under C	Consideration for Public	cation
	g 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	submitted work.
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Section 4. Intellectual Prope	rty Patents & Copyric	ghts
Do you have any patents, whether plan	nned, pending or issued, br	oadly relevant to the work? Yes V No

Kaforou 2



Section 5. Polationships not sovered above	
Relationships not covered above	
Are there other relationships or activities that readers could perceive to have influenced potentially influencing, what you wrote in the submitted work?	d, or that give the appearance of
Yes, the following relationships/conditions/circumstances are present (explain belo	w):
✓ No other relationships/conditions/circumstances that present a potential conflict of	finterest
At the time of manuscript acceptance, journals will ask authors to confirm and, if neces On occasion, journals may ask authors to disclose further information about reported re	• •
Section 6. Disclosure Statement	
Based on the above disclosures, this form will automatically generate a disclosure state below.	ment, which will appear in the box
Dr. Kaforou has nothing to disclose.	

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Levin 1



Section 1. Identifying Info	rmation	
1. Given Name (First Name) Michael	2. Surname (Last Name) Levin	3. Date 31-March-2021
4. Are you the corresponding author?	✓ Yes No	
5. Manuscript Title Immunomodulator Treatment of Mu	ıltisystem Inflammatory Syndrome in Children	
6. Manuscript Identifying Number (if yo 21-02968	u know it)	
Section 2. The Work Unde	Consideration for Publication	
	eceive payment or services from a third party (government, or ling but not limited to grants, data monitoring board, study of terest? Yes V No	
Section 3. Relevant finance	ial activities outside the submitted work.	
of compensation) with entities as de	es in the table to indicate whether you have financial rescribed in the instructions. Use one line for each entity report relationships that were <b>present during the 36</b> terest?	; add as many lines as you need by
Section 4. Intellectual Pro-	Detects 0 Constitute	
Intellectual Pro	perty Patents & Copyrights	
Do you have any patents, whether p	lanned, pending or issued, broadly relevant to the wor	k? ☐ Yes ✓ No

Levin 2



Section 5. Relationships not sovered 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?
Yes, the following relationships/conditions/circumstances are present (explain below):
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McArdle 1



Section 1.	Identifying Inform	nation	
1. Given Name (Fi Andrew	rst Name)	2. Surname (Last Name) McArdle	3. Date 31-March-2021
4. Are you the cor	responding author?	Yes ✓ No	Corresponding Author's Name Prof Mike Levin
5. Manuscript Title Immunomodula		system Inflammatory Synd	rome in Children
6. Manuscript Ider 21-02968	ntifying Number (if you kr	now it)	
			-
Section 2.	The Work Under C	onsideration for Public	cation
any aspect of the s statistical analysis,	ubmitted work (including	g but not limited to grants, da	a third party (government, commercial, private foundation, etc.) for ita monitoring board, study design, manuscript preparation,
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Section 4.	Intellectual Proper	rty Patents & Copyric	yhts
Do you have any	patents, whether plan	ned, pending or issued, br	oadly relevant to the work? Yes V No

McArdle 2



Section 5. Relationships not sovered above
Relationships not covered above
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Munblit 1



Section 1.	Identifying Inform	nation	
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4. Are you the corr	responding author?	Yes ✓ No	Corresponding Author's Name Michael Levin
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Do you have any	•		roadly relevant to the work? Yes V No

Munblit 2



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Nijman 1



Section 1. Identifying Information	ation		
1. Given Name (First Name) Ruud	2. Surname (Last Name) Nijman		3. Date 31-March-2021
4. Are you the corresponding author?	Yes ✓ No	Corresponding Auth	or's Name
5. Manuscript Title Immunomodulator Treatment of Multisy	rstem Inflammatory Synd	rome in Children	
6. Manuscript Identifying Number (if you kno	ow it)		
		_	
Section 2. The Work Under Co	nsideration for Public	cation	
Did you or your institution <b>at any time</b> received any aspect of the submitted work (including statistical analysis, etc.)?  Are there any relevant conflicts of interest of the statistical analysis, etc.) by the statistical analysis, etc.)?	but not limited to grants, da st?	ta monitoring board, st	tudy design, manuscript preparation,
Name of Institution/Company	Grant•	n-Financial Other?	Comments
NIHR	<b>V</b>		NIHR Academic Clinical lecturer award (ACL-2018-021-007)
Section 3. Relevant financial a	activities outside the s	submitted work.	
Place a check in the appropriate boxes ir of compensation) with entities as describ clicking the "Add +" box. You should rep Are there any relevant conflicts of interes	n the table to indicate wholed in the instructions. Use ort relationships that werest? Yes V No	ether you have finan se one line for each e re <b>present during th</b>	ntity; add as many lines as you need by
Section 4. Intellectual Propert	y Patents & Copyric	ghts	
Do you have any patents, whether plann	ed, pending or issued, br	oadly relevant to the	work? ☐ Yes ✓ No

Nijman 2



Section 5. Relationships not covered above
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Dr. Nijman reports grants from NIHR, during the conduct of the study;.

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Nijman 3



#### **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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## 4. Intellectual Property.

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

## Relationships not covered above.

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

Patel 1



Section 1.	Identifying Inform	nation	
1. Given Name (Fii Harsita	rst Name)	2. Surname (Last Name) Patel	3. Date 31-March-2021
4. Are you the cor	responding author?	Yes ✓ No	Corresponding Author's Name Michael Levin
5. Manuscript Title Immunomodula		ystem Inflammatory Synd	rome in Children
6. Manuscript Ider 21-02968	ntifying Number (if you kr	now it)	
Section 2.	The Work Under Co	onsideration for Public	cation
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	) 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 e <b>present during the 36 months prior to publication</b> .
Section 4.	Intellectual Proper	ty Patents & Copyric	yhts
Do you have any	patents, whether plan	ned, pending or issued, br	oadly relevant to the work? ☐ Yes ✓ No

Patel 2



Section 5. Relationships not sovered 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?
Yes, the following relationships/conditions/circumstances are present (explain below):
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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. Patel has nothing to disclose.

#### **Evaluation and Feedback**

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Patel 3



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Seaby 1



Section 1.	Identifying Inform	nation	
1. Given Name (First Name) Eleanor		2. Surname (Last Name) Seaby	3. Date 31-March-2021
4. Are you the corresponding author?		Yes ✓ No	Corresponding Author's Name Michael Levin
5. Manuscript Title Immunomodulat	or Treatment of Multis	ystem Inflammatory Sync	Irome in Children
6. Manuscript Iden 21-02968	tifying Number (if you kr	now it)	
Section 2.	The Work Under Co	onsideration for Publi	cation
any aspect of the su statistical analysis, e	ıbmitted work (including	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 financial	activities outside the	submitted work.
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Do you have any patents, whether planned, pending or issued, broadly relevant to the work? Yes Vo			

Seaby 2



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Dr. Seaby has nothing to disclose.

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Shah 1



Section 1.	Identifying Inform	nation	
1. Given Name (Fi Priyen	rst Name)	2. Surname (Last Name) Shah	3. Date 31-March-2021
4. Are you the corresponding author?		Yes ✓ No	Corresponding Author's Name Michael Levin
5. Manuscript Title Immunomodula		system Inflammatory Synd	rome in Children
6. Manuscript Ider 21-02968	ntifying Number (if you kr	now it)	
			-
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Do you have any patents, whether planned, pending or issued, broadly relevant to the work? Yes Vo			

Shah 2



Section 5.					
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Continu					
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Dr. Shah has not	thing to disclose.				

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Tremoulet 1



Section 1. Identifying Information	mation	
1. Given Name (First Name) Adriana	2. Surname (Last Name) Tremoulet	3. Date 31-March-2021
4. Are you the corresponding author?	☐ Yes ✓ No	Corresponding Author's Name Mike Levin
5. Manuscript Title Immunomodulator Treatment of Mult	isystem Inflammatory Synd	rome in Children
6. Manuscript Identifying Number (if you l 21-02968	know it)	
Section 2. The Work Under 0	Consideration for Public	cation
	ng but not limited to grants, da	a third party (government, commercial, private foundation, etc.) for ata monitoring board, study design, manuscript preparation,
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Section 4. Intellectual Prope	erty Patents & Copyrig	ghts
Do you have any patents, whether pla	nned, pending or issued, br	roadly relevant to the work? Yes V No

Tremoulet 2



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Dr. Tremoulet has nothing to disclose.

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Tremoulet 3



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Ulloa-Gutierrez 1



Section 1. Identifying Inform	mation			
1. Given Name (First Name) Rolando	2. Surname (Last Name) Ulloa-Gutierrez	3. Date 31-March-2021		
4. Are you the corresponding author?	☐ Yes ✓ No	Corresponding Author's Name Michael Levin		
5. Manuscript Title Immunomodulator Treatment of Mult	isystem Inflammatory Synd	rome in Children		
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Do you have any patents, whether planned, pending or issued, broadly relevant to the work? Yes Vo				

Ulloa-Gutierrez 2



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Ulloa-Gutierrez 3



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Vito 1



Section 1.	dentifying Informa	ation		
1. Given Name (First I Ortensia	Name)	2. Surname (Last Name) Vito		3. Date 31-March-2021
4. Are you the corresponding author?		Yes ✓ No	Corresponding Author's Nar Michael Levin	ne
5. Manuscript Title Immunomodulator	Treatment of Multisy	vstem Inflammatory Syr	drome in Children	
6. Manuscript Identify 21-02968	ying Number (if you kno	ow it)		
Section 2. Ti	he Work Under Co	nsideration for Pub	lication	
any aspect of the subr statistical analysis, etc	mitted work (including l	but not limited to grants,	m a third party (government, cor data monitoring board, study de:	mmercial, private foundation, etc.) for sign, manuscript preparation,
Section 3.	elevant financial a	ctivities outside the	submitted work.	
of compensation) w clicking the "Add +"	ith entities as describ	oed in the instructions. ort relationships that w		ationships (regardless of amount dd as many lines as you need by nonths prior to publication.
Section 4.	ntellectual Propert	ty Patents & Copyr	ights	
Do you have any patents, whether planned, pending or issued, broadly relevant to the work? Yes Vo				

Vito 2



Section 5. Relationships not covered above
helationships 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. Vito has nothing to disclose.

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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.

## Identifying information.

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This section asks for information about the work that you have submitted for publication. The time frame for this reporting is that of the work itself, from the initial conception and planning to the present. The requested information is about resources that you received, either directly or indirectly (via your institution), to enable you to complete the work. Checking "No" means that you did the work without receiving any financial support from any third party -- that is, the work was supported by funds from the same institution that pays your salary and that institution did not receive third-party funds with which to pay you. If you or your institution received funds from a third party to support the work, such as a government granting agency, charitable foundation or commercial sponsor, check "Yes".

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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.

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**Grant:** A grant from an entity, generally [but not always] paid to your organization

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**Non-Financial Support:** Examples include drugs/equipment supplied by the entity, travel paid by the entity, writing assistance, administrative support, etc.

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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

Whittaker 1



Section 1.	Identifying Inform	nation	
1. Given Name (Fii Elizabeth	rst Name)	2. Surname (Last Name) Whittaker	3. Date 31-March-2021
4. Are you the corresponding author?		Yes ✓ No	Corresponding Author's Name Michael Levin
5. Manuscript Title Immunomodula		ystem Inflammatory Synd	rome in Children
6. Manuscript Ider 21-02698	ntifying Number (if you kr	now it)	
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	) with entities as descri	bed in the instructions. Us port relationships that wer	ether you have financial relationships (regardless of amount e one line for each entity; add as many lines as you need by e <b>present during the 36 months prior to publication</b> .
Section 4.	Intellectual Proper	rty Patents & Copyric	jhts
Do you have any patents, whether planned, pending or issued, broadly relevant to the work? ☐ Yes ✓ No			

Whittaker 2



Section 5. Polationships not severed above
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Wilson 1



Section 1.	Identifying Inform	nation		
1. Given Name (First Name) Clare		2. Surname (Last Name) Wilson	3. Date 31-March-2021	
4. Are you the corresponding author?		Yes ✓ No	Corresponding Author's Name Michael Levin	
5. Manuscript Title Immunomodulator Treatment of Multisystem Inflammatory Syndrome in Children			rome in Children	
6. Manuscript Identifying Number (if you know it) 21-02968				
Section 2. The Work Under Consideration for Publication				
Did you or your institution <b>at any time</b> 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 financial	activities outside the s	ubmitted work.	
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Section 4.	Intellectual Proper	ty Patents & Copyric	yhts	
Do you have any patents, whether planned, pending or issued, broadly relevant to the work? Yes Vo				

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Section 5.	Deletionships not serround above		
	Relationships not covered above		
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