

## ICMJE Form for Disclosure of Potential Conflicts of Interest

### 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.

#### 1. Identifying information.

#### 2. The work under consideration for publication.

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#### 4. Intellectual Property.

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

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## ICMJE Form for Disclosure of Potential Conflicts of Interest

### Section 1. Identifying Information

1. Given Name (First Name) Ryota	2. Surname (Last Name) Kaneko	3. Date 24-August-2018
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Yumiko Sugishita
5. Manuscript Title Gastric antral vascular ectasia in a pediatric patient with neuroblastoma who underwent tandem stem cell transplantation		
6. Manuscript Identifying Number (if you know it) BCT-2018-007.R1		

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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

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Dr. Kaneko 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) Daisuke	2. Surname (Last Name) Toyama	3. Date 23-August-2018
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Yumiko Sugishita
5. Manuscript Title Gastric antral vascular ectasia in a pediatric patient with neuroblastoma who underwent tandem stem cell transplantation		
6. Manuscript Identifying Number (if you know it) BCT-2018-007.R1		

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Dr. Toyama 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) Kosuke	2. Surname (Last Name) Akiyama	3. Date 24-August-2018
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Yumiko Sugishita
5. Manuscript Title Gastric antral vascular ectasia in a pediatric patient with neuroblastoma who underwent tandem stem cell transplantation		
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Dr. Akiyama 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)

Keiichi

2. Surname (Last Name)

Isoyama

3. Date

24-August-2018

4. Are you the corresponding author?

Yes  No

Corresponding Author's Name

Yumiko Sugishita

5. Manuscript Title

Gastric antral vascular ectasia in a pediatric patient with neuroblastoma who underwent tandem stem cell transplantation

6. Manuscript Identifying Number (if you know it)

BCT-2018-007.R1

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Dr. Isoyama has nothing to disclose.

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1. Given Name (First Name) Masaya	2. Surname (Last Name) Koganesawa	3. Date 24-August-2018
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Yumiko Sugishita
5. Manuscript Title Gastric antral vascular ectasia in a pediatric patient with neuroblastoma who underwent tandem stem cell transplantation		
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Dr. Koganesawa 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) Naoko	2. Surname (Last Name) Okamoto	3. Date 24-August-2018
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Yumiko Sugishita
5. Manuscript Title Gastric antral vascular ectasia in a pediatric patient with neuroblastoma who underwent tandem stem cell transplantation		
6. Manuscript Identifying Number (if you know it) BCT-2018-007.R1		

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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

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

## ICMJE Form for Disclosure of Potential Conflicts of Interest

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### 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. Okamoto has nothing to disclose.

### Evaluation and Feedback

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## ICMJE Form for Disclosure of Potential Conflicts of Interest

### Section 1. Identifying Information

1. Given Name (First Name) Ryosuke	2. Surname (Last Name) Matsuno	3. Date 24-August-2018
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Yumiko Sugishita
5. Manuscript Title Gastric antral vascular ectasia in a pediatric patient with neuroblastoma who underwent tandem stem cell transplantation		
6. Manuscript Identifying Number (if you know it) BCT-2018-007.R1		

### 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

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

## ICMJE Form for Disclosure of Potential Conflicts of Interest

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Dr. Matsuno 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) Sachio	2. Surname (Last Name) Fujita	3. Date 24-August-2018
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Yumiko Sugishita
5. Manuscript Title Gastric antral vascular ectasia in a pediatric patient with neuroblastoma who underwent tandem stem cell transplantation		
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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

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

## ICMJE Form for Disclosure of Potential Conflicts of Interest

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Dr. Fujita 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) Shohei	2. Surname (Last Name) Yamamoto	3. Date 23-August-2018
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Yumiko Sugishita
5. Manuscript Title Gastric antral vascular ectasia in a pediatric patient with neuroblastoma who underwent tandem stem cell transplantation		
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Are there any relevant conflicts of interest?  Yes  No

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## ICMJE Form for Disclosure of Potential Conflicts of Interest

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Dr. Yamamoto 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)

Yumiko

2. Surname (Last Name)

Sugishita

3. Date

23-August-2018

4. Are you the corresponding author?

Yes  No

5. Manuscript Title

Gastric antral vascular ectasia in a pediatric patient with neuroblastoma who underwent tandem stem cell transplantation

6. Manuscript Identifying Number (if you know it)

BCT-2018-007.R1

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Are there any relevant conflicts of interest?  Yes  No

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Dr. Sugishita has nothing to disclose.

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