

ICMJE DISCLOSURE FORM

Date: 10/12/2021

Your Name: Masaki Yamada

Manuscript Title: **Hematopoietic stem cell transplantation with reduced intensity conditioning for Omenn syndrome**

Manuscript Number (if known): Click or tap here to enter text.

In the interest of transparency, we ask you to disclose all relationships/activities/interests listed below that are related to the content of your manuscript. "Related" means any relation with for-profit or not-for-profit third parties whose interests may be affected by the content of the manuscript. Disclosure represents a commitment to transparency and does not necessarily indicate a bias. If you are in doubt about whether to list a relationship/activity/interest, it is preferable that you do so.

The author's relationships/activities/interests should be defined broadly. For example, if your manuscript pertains to the epidemiology of hypertension, you should declare all relationships with manufacturers of antihypertensive medication, even if that medication is not mentioned in the manuscript.

In item #1 below, report all support for the work reported in this manuscript without time limit. For all other items, the time frame for disclosure is the past 36 months.

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Time frame: past 36 months								
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I certify that I have answered every question and have not altered the wording of any of the questions on this form.

ICMJE DISCLOSURE FORM

Date: 10/12/2021

Your Name: Kimikazu Matsumoto

Manuscript Title: Hematopoietic stem cell transplantation with reduced intensity conditioning for Omenn syndrome

Manuscript Number (if known): [Click or tap here to enter text.](#)

In the interest of transparency, we ask you to disclose all relationships/activities/interests listed below that are related to the content of your manuscript. "Related" means any relation with for-profit or not-for-profit third parties whose interests may be affected by the content of the manuscript. Disclosure represents a commitment to transparency and does not necessarily indicate a bias. If you are in doubt about whether to list a relationship/activity/interest, it is preferable that you do so.

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I certify that I have answered every question and have not altered the wording of any of the questions on this form.

ICMJE DISCLOSURE FORM

Date: 10/12/2021

Your Name: TOMOO OSUMI

Manuscript Title: Hematopoietic stem cell transplantation with reduced intensity conditioning for Omenn syndrome

Manuscript Number (if known): [Click or tap here to enter text.](#)

In the interest of transparency, we ask you to disclose all relationships/activities/interests listed below that are related to the content of your manuscript. "Related" means any relation with for-profit or not-for-profit third parties whose interests may be affected by the content of the manuscript. Disclosure represents a commitment to transparency and does not necessarily indicate a bias. If you are in doubt about whether to list a relationship/activity/interest, it is preferable that you do so.

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ICMJE DISCLOSURE FORM

Date: 9/19/2021

Your Name: Yukihiro Matsukawa

Manuscript Title: Hematopoietic stem cell transplantation with reduced intensity conditioning for Omenn syndrome

Manuscript Number (if known): [Click or tap here to enter text.](#)

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ICMJE DISCLOSURE FORM

Date: 10/13/2021

Your Name: Satoshi Fujiyama

Manuscript Title: Hematopoietic stem cell transplantation with reduced intensity conditioning for Omenn syndrome

Manuscript Number (if known): [Click or tap here to enter text.](#)

In the interest of transparency, we ask you to disclose all relationships/activities/interests listed below that are related to the content of your manuscript. "Related" means any relation with for-profit or not-for-profit third parties whose interests may be affected by the content of the manuscript. Disclosure represents a commitment to transparency and does not necessarily indicate a bias. If you are in doubt about whether to list a relationship/activity/interest, it is preferable that you do so.

The author's relationships/activities/interests should be defined broadly. For example, if your manuscript pertains to the epidemiology of hypertension, you should declare all relationships with manufacturers of antihypertensive medication, even if that medication is not mentioned in the manuscript.

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I certify that I have answered every question and have not altered the wording of any of the questions on this form.

ICMJE DISCLOSURE FORM

Date: 10/12/2021

Your Name: Masafumi ONODERA

Manuscript Title: Hematopoietic stem cell transplantation with reduced intensity conditioning for Omenn syndrome

Manuscript Number (if known): [Click or tap here to enter text.](#)

In the interest of transparency, we ask you to disclose all relationships/activities/interests listed below that are related to the content of your manuscript. "Related" means any relation with for-profit or not-for-profit third parties whose interests may be affected by the content of the manuscript. Disclosure represents a commitment to transparency and does not necessarily indicate a bias. If you are in doubt about whether to list a relationship/activity/interest, it is preferable that you do so.

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ICMJE DISCLOSURE FORM

Date: 10/12/2021

Your Name: Hidetoshi Takada

Manuscript Title: Hematopoietic stem cell transplantation with reduced intensity conditioning for Omenn syndrome

Manuscript Number (if known): [Click or tap here to enter text.](#)

In the interest of transparency, we ask you to disclose all relationships/activities/interests listed below that are related to the content of your manuscript. "Related" means any relation with for-profit or not-for-profit third parties whose interests may be affected by the content of the manuscript. Disclosure represents a commitment to transparency and does not necessarily indicate a bias. If you are in doubt about whether to list a relationship/activity/interest, it is preferable that you do so.

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ICMJE DISCLOSURE FORM

Date: 10/12/2021

Your Name: Daisuke Tomizawa

Manuscript Title: Hematopoietic stem cell transplantation with reduced intensity conditioning for Omenn syndrome

Manuscript Number (if known): [Click or tap here to enter text.](#)

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ICMJE DISCLOSURE FORM

Date: 10/12/2021

Your Name: Motohiro Kato

Manuscript Title: **Hematopoietic stem cell transplantation with reduced intensity conditioning for Omenn syndrome**

Manuscript Number (if known): Click or tap here to enter text.

In the interest of transparency, we ask you to disclose all relationships/activities/interests listed below that are related to the content of your manuscript. "Related" means any relation with for-profit or not-for-profit third parties whose interests may be affected by the content of the manuscript. Disclosure represents a commitment to transparency and does not necessarily indicate a bias. If you are in doubt about whether to list a relationship/activity/interest, it is preferable that you do so.

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ICMJE DISCLOSURE FORM

Date: 10/12/2021

Your Name: Ken-Ichi Imadome

Manuscript Title: Hematopoietic stem cell transplantation with reduced intensity conditioning for Omenn syndrome

Manuscript Number (if known): [Click or tap here to enter text.](#)

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Date: 10/12/2021

Your Name: Toru Uchiyama

Manuscript Title: Hematopoietic stem cell transplantation with reduced intensity conditioning for Omenn syndrome

Manuscript Number (if known): [Click or tap here to enter text.](#)

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Date: 10/12/2021

Your Name: Hiroko Fukushima

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Date: 10/12/2021

Your Name: Kyohei Isshiki

Manuscript Title: Hematopoietic stem cell transplantation with reduced intensity conditioning for Omenn syndrome

Manuscript Number (if known): [Click or tap here to enter text.](#)

In the interest of transparency, we ask you to disclose all relationships/activities/interests listed below that are related to the content of your manuscript. "Related" means any relation with for-profit or not-for-profit third parties whose interests may be affected by the content of the manuscript. Disclosure represents a commitment to transparency and does not necessarily indicate a bias. If you are in doubt about whether to list a relationship/activity/interest, it is preferable that you do so.

The author's relationships/activities/interests should be defined broadly. For example, if your manuscript pertains to the epidemiology of hypertension, you should declare all relationships with manufacturers of antihypertensive medication, even if that medication is not mentioned in the manuscript.

In item #1 below, report all support for the work reported in this manuscript without time limit. For all other items, the time frame for disclosure is the past 36 months.

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ICMJE DISCLOSURE FORM

Date: 10/12/2021

Your Name: Takao Deguchi

Manuscript Title: Hematopoietic stem cell transplantation with reduced intensity conditioning for Omenn syndrome

Manuscript Number (if known): [Click or tap here to enter text.](#)

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