

## ICMJE Form for Disclosure of Potential Conflicts of Interest

### Instructions

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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)

Laura

2. Surname (Last Name)

Bender

3. Date

29-November-2020

4. Are you the corresponding author?

☒ Yes ☐ No

5. Manuscript Title

High risk of recurrence for grade II meningioma: a 10 year multicenter analysis of prognosis factors

6. Manuscript Identifying Number (if you know it)

CCO-20-226

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Dr. Bender has nothing to disclose.

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1. Given Name (First Name) François	2. Surname (Last Name) Somme	3. Date 29-November-2020
4. Are you the corresponding author? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Corresponding Author's Name Laura Bender
5. Manuscript Title High risk of recurrence for grade II meningioma: a 10 year multicenter analysis of prognosis factors		
6. Manuscript Identifying Number (if you know it) CCO-20-226		

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Dr. Somme has nothing to disclose.

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### Section 1. Identifying Information

1. Given Name (First Name)  
Benoit

2. Surname (Last Name)  
Lhermitte

3. Date  
27-November-2020

4. Are you the corresponding author?

☐ Yes ☒ No

Corresponding Author's Name  
Laura Bender

5. Manuscript Title  
High risk of recurrence for grade II meningioma: a 10 year multicenter analysis of prognosis factors

6. Manuscript Identifying Number (if you know it)  
CCO-20-226

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Dr. Lhermitte 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) Guido	2. Surname (Last Name) Ahle	3. Date 30-November-2020
4. Are you the corresponding author? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Corresponding Author's Name Laura Bender
5. Manuscript Title High risk of recurrence for grade II meningioma: a 10 year multicenter analysis of prognosis factors		
6. Manuscript Identifying Number (if you know it) CCO-20-226		

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Dr. Ahle 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)

Mathieu

2. Surname (Last Name)

Boone

3. Date

28-November-2020

4. Are you the corresponding author?

☐ Yes

☒ No

Corresponding Author's Name

Laura Bender

5. Manuscript Title

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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) Marie	2. Surname (Last Name) Blonski	3. Date 30-November-2020
4. Are you the corresponding author? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Corresponding Author's Name Laura Bender
5. Manuscript Title High risk of recurrence for grade II meningioma: a 10 year multicenter analysis of prognosis factors		
6. Manuscript Identifying Number (if you know it) CCO-20-226		

### 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.)?

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

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Dr. Blonski 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)  
Celso

2. Surname (Last Name)  
Pouget

3. Date  
30-November-2020

4. Are you the corresponding author?

☐ Yes ☒ No

Corresponding Author's Name  
Laura Bender

5. Manuscript Title  
High risk of recurrence for grade II meningioma: a 10 year multicenter analysis of prognosis factors

6. Manuscript Identifying Number (if you know it)  
CCO-20-226

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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



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INTERNATIONAL COMMITTEE *of*  
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### Section 5.

#### Relationships not covered above

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### Section 6.

#### Disclosure Statement

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Dr. Pouget 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) Gilles	2. Surname (Last Name) Truc	3. Date 28-November-2020
4. Are you the corresponding author? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Corresponding Author's Name Laura Bender
5. Manuscript Title High risk of recurrence for grade II meningioma: a 10 year multicenter analysis of prognosis factors		
6. Manuscript Identifying Number (if you know it) CCO-20-226		

### 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.)?

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. Truc 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)

Hélène

2. Surname (Last Name)

Cebula

3. Date

27-November-2020

4. Are you the corresponding author?

☐ Yes ☒ No

Corresponding Author's Name

Laura Bender

5. Manuscript Title

High risk of recurrence for grade II meningioma: a 10 year multicenter analysis of prognosis factors

6. Manuscript Identifying Number (if you know it)

CCO-20-226

### 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

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## ICMJE Form for Disclosure of Potential Conflicts of Interest

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Dr. Cebula 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) Georges	2. Surname (Last Name) Noël	3. Date 29-November-2020
4. Are you the corresponding author? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Corresponding Author's Name Laura Bender
5. Manuscript Title High risk of recurrence for grade II meningioma: a 10 year multicenter analysis of prognosis factors		
6. Manuscript Identifying Number (if you know it) CCO-20-226		

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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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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. Noël has nothing to disclose.

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