

# ICMJE DISCLOSURE FORM

Date: 04/19/2022  
 Your Name: Jiaojiao Zhang  
 Manuscript Title: A case report of the metagenomics Next-Generation Sequencing for early detection of central nervous system mucormycosis with successful rescue in patient with recurrent chronic lymphocytic leukemia  
 Manuscript number (if known): \_\_\_\_\_

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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3	Royalties or licenses	<u>None</u>	
4	Consulting fees	<u>None</u>	

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9	Participation on a Data Safety Monitoring Board or Advisory Board	____ None	
10	Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid	____ None	
11	Stock or stock options	____ None	
12	Receipt of equipment, materials, drugs, medical writing, gifts or other services	____ None	
13	Other financial or non-financial interests	____ None	

**Please summarize the above conflict of interest in the following box:**

None

**Please place an “X” next to the following statement to indicate your agreement:**

  x   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: 04/19/2022  
 Your Name: Jing Luo  
 Manuscript Title: A case report of the metagenomics Next-Generation Sequencing for early detection of central nervous system mucormycosis with successful rescue in patient with recurrent chronic lymphocytic leukemia  
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Date: 04/19/2022  
 Your Name: Xiangqin Weng  
 Manuscript Title: A case report of the metagenomics Next-Generation Sequencing for early detection of central nervous system mucormycosis with successful rescue in patient with recurrent chronic lymphocytic leukemia  
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# ICMJE DISCLOSURE FORM

Date: 04/19/2022  
 Your Name: Yongmei Zhu  
 Manuscript Title: A case report of the metagenomics Next-Generation Sequencing for early detection of central nervous system mucormycosis with successful rescue in patient with recurrent chronic lymphocytic leukemia  
 Manuscript number (if known): \_\_\_\_\_

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# ICMJE DISCLOSURE FORM

Date: 04/12/2022  
 Your Name: Gaurav Goyal  
 Manuscript Title: A case report of the metagenomics Next-Generation Sequencing for early detection of central nervous system mucormycosis with successful rescue in patient with recurrent chronic lymphocytic leukemia  
 Manuscript number (if known): \_\_\_\_\_

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3	Royalties or licenses	<u>None</u>	
4	Consulting fees	<u>None</u>	

5	Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or educational events	___ None	
6	Payment for expert testimony	___ None	
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9	Participation on a Data Safety Monitoring Board or Advisory Board	___ None	
10	Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid	___ None	
11	Stock or stock options	___ None	
12	Receipt of equipment, materials, drugs, medical writing, gifts or other services	___ None	
13	Other financial or non-financial interests	___ None	

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None

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# ICMJE DISCLOSURE FORM

Date: 04/13/2022

Your Name: Fabiana Perna

Manuscript Title: A case report of the metagenomics Next-Generation Sequencing for early detection of central nervous system mucormycosis with successful rescue in patient with recurrent chronic lymphocytic leukemia

Manuscript number (if known): \_\_\_\_\_

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<b>Time frame: past 36 months</b>			
2	Grants or contracts from any entity (if not indicated in item #1 above).	Lonza	payments were made to my institution
		Leukemia Research foundation	payments were made to my institution
		Indiana University School of Medicine	payments were made to my institution
3	Royalties or licenses	<u>None</u>	

4	Consulting fees	NGMBio	payments were made to me
5	Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or educational events	_____ None	
6	Payment for expert testimony	_____ None	
7	Support for attending meetings and/or travel	_____ None	
8	Patents planned, issued or pending	_____ None	
9	Participation on a Data Safety Monitoring Board or Advisory Board	_____ None	
10	Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid	_____ None	
11	Stock or stock options	_____ None	
12	Receipt of equipment, materials, drugs, medical writing, gifts or other services	_____ None	
13	Other financial or non-financial interests	_____ None	

**Please summarize the above conflict of interest in the following box:**

Fabiana Perna received grants/ contracts from Lonza, Leukemia Research foundation, Indiana University School of Medicine (payments were made to her institution), and received consulting fees from NGMBio.

**Please place an “X” next to the following statement to indicate your agreement:**

**X 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: 4/13/2022  
 Your Name: Manuel R. Espinoza Gutarra  
 Manuscript Title: A case report of the metagenomics Next-Generation Sequencing for early detection of central nervous system mucormycosis with successful rescue in patient with recurrent chronic lymphocytic leukemia  
 Manuscript number (if known): \_\_\_\_\_

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# ICMJE DISCLOSURE FORM

Date: 04/19/2022  
 Your Name: Lu Jiang  
 Manuscript Title: A case report of the metagenomics Next-Generation Sequencing for early detection of central nervous system mucormycosis with successful rescue in patient with recurrent chronic lymphocytic leukemia  
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