

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.

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

ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name) David	2. Surname (Last Name) Dum	3. Date 20-October-2020
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Ronald Simon
5. Manuscript Title MMR deficiency occurs very rarely in seminoma		
6. Manuscript Identifying Number (if you know it)		

Section 2. The Work Under Consideration for Publication

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Dr. Dum has nothing to disclose.

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1. Given Name (First Name) S	2. Surname (Last Name) Steurer	3. Date 20-October-2020
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Ronald Simon
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Dr. Steurer has nothing to disclose.

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Section 1. Identifying Information

1. Given Name (First Name)

Ronald

2. Surname (Last Name)

Simon

3. Date

20-October-2020

4. Are you the corresponding author?

Yes No

5. Manuscript Title

MMR deficiency occurs very rarely in seminoma

6. Manuscript Identifying Number (if you know it)

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1. Given Name (First Name) Pia	2. Surname (Last Name) Zimmermann	3. Date 20-October-2020
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Ronald Simon
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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

Section 5. Relationships not covered above

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Dr. Clauditz 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) Margit	2. Surname (Last Name) Fisch	3. Date 20-October-2020
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Ronald Simon
5. Manuscript Title MMR deficiency occurs very rarely in seminoma		
6. Manuscript Identifying Number (if you know it)		

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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

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name) Michael	2. Surname (Last Name) Rink	3. Date 20-October-2020
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Ronald Simon
5. Manuscript Title MMR deficiency occurs very rarely in seminoma		
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Section 4. Intellectual Property -- Patents & Copyrights

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Dr. Rink 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) Ronald	2. Surname (Last Name) Dahlem	3. Date 20-October-2020
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Ronald Simon
5. Manuscript Title MMR deficiency occurs very rarely in seminoma		
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Dr. Dahlem has nothing to disclose.

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ICMJE Form for Disclosure of Potential Conflicts of Interest

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1. Given Name (First Name) Wolfgang	2. Surname (Last Name) Höppner	3. Date 20-October-2020
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Ronald Simon
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Dr. Höppner 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)

Henrik

2. Surname (Last Name)

Zecha

3. Date

20-October-2020

4. Are you the corresponding author?

Yes

No

Corresponding Author's Name

Ronald Simon

5. Manuscript Title

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6. Manuscript Identifying Number (if you know it)

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Dr. Zecha 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) Ouaman	2. Surname (Last Name) Doh	3. Date 20-October-2020
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Ronald Simon
5. Manuscript Title MMR deficiency occurs very rarely in seminoma		
6. Manuscript Identifying Number (if you know it)		

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

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Dr. Doh 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) Cord	2. Surname (Last Name) Matthies	3. Date 20-October-2020
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Ronald Simon
5. Manuscript Title MMR deficiency occurs very rarely in seminoma		
6. Manuscript Identifying Number (if you know it)		

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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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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name) Waldemar	2. Surname (Last Name) Wilczak	3. Date 20-October-2020
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Ronald Simon
5. Manuscript Title MMR deficiency occurs very rarely in seminoma		
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Are there any relevant conflicts of interest? Yes No

Section 4. Intellectual Property -- Patents & Copyrights

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ICMJE Form for Disclosure of Potential Conflicts of Interest

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1. Given Name (First Name) Guido	2. Surname (Last Name) Sauter	3. Date 20-October-2020
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Ronald Simon
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1. Given Name (First Name) Christoph	2. Surname (Last Name) Fraune	3. Date 20-October-2020
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