

#### **Instructions**

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Odedra 1



Section 1. Identifying Inform	ation		
1. Given Name (First Name) Anand	2. Surname (Last Name) Odedra		3. Date 17-January-2020
4. Are you the corresponding author?	☐ Yes ✓ No	Corresponding Author Katharine Collins	or's Name
5. Manuscript Title A Plasmodium vivax experimental huma	an infection model for eva	lluating efficacy of in	terventions
6. Manuscript Identifying Number (if you kn 134923-JCI-CMED-1	ow it)	_	
Section 2. The Weak Under Co			
The Work Under Co	onsideration for Public	cation	
Did you or your institution <b>at any time</b> recei any aspect of the submitted work (including statistical analysis, etc.)? Are there any relevant conflicts of intere	but not limited to grants, da		
If yes, please fill out the appropriate info Excess rows can be removed by pressing	ormation below. If you hav	re more than one ent	ity press the "ADD" button to add a row.
Name of Institution/Company	Grant	n-Financial other?	Comments
BMGF grant - "Investment in the Controlled Human Malaria Infection (CHMI) model at QIMR via MMV"	<b>✓</b>		Grant number: OPP1111147
NHMRC Program Grant	<b>✓</b>		Grant number: 1132975
Section 3. Belovent financial			
Relevant financial	activities outside the s	submitted work.	
Place a check in the appropriate boxes in of compensation) with entities as descriclicking the "Add +" box. You should rep	bed in the instructions. Us	se one line for each e	ntity; add as many lines as you need by
Are there any relevant conflicts of intere	est? Yes No		
Section 4. Intellectual Proper	ty Patents & Copyric	ghts	
Do you have any patents, whether plant	ned, pending or issued, br	oadly relevant to the	work? Yes V No

Odedra 2



Section F	
Section 5.	Relationships not covered above
	lationships or activities that readers could perceive to have influenced, or that give the appearance of acing, what you wrote in the submitted work?
Yes, the follow	ring relationships/conditions/circumstances are present (explain below):
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	nuscript acceptance, journals will ask authors to confirm and, if necessary, update their disclosure statements nals may ask authors to disclose further information about reported relationships.
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Wang 1



Section 1. Identifying Inform	nation			
1. Given Name (First Name) Claire	2. Surname (Last Name) Wang	3. Date 17-January-2020		
4. Are you the corresponding author?	☐ Yes 🗸 No	Corresponding Author's Name Katharine Collins		
5. Manuscript Title A Plasmodium vivax experimental hum	nan infection model for eva	lluating efficacy of interventions		
6. Manuscript Identifying Number (if you k 134923-JCI-CMED-1	now it)	_		
Section 2				
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Did you or your institution <b>at any time</b> 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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Do you have any patents, whether plan				

Wang 2



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Ms. Wang has nothing to disclose.

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Khoury 1



Section 1. Identifying Inform	nation		
1. Given Name (First Name) David	2. Surname (Last Name) Khoury	3. Date 17-January-2020	
4. Are you the corresponding author?	Yes ✓ No	Corresponding Author's Name Katharine Collins	
5. Manuscript Title A Plasmodium vivax experimental hum	nan infection model for ev	aluating efficacy of interventions	
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Did you or your institution <b>at any time</b> rece	eive payment or services fron g but not limited to grants, d	n a third party (government, commercial, private foundation, etc.) for ata monitoring board, study design, manuscript preparation,	
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Do you have any patents, whether plan			

Khoury 2



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Dr. Khoury has nothing to disclose.			

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patent

Ballard 1



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4. Are you the corresponding author?	☐ Yes ✓ No	Corresponding Authors	or's Name
5. Manuscript Title A Plasmodium vivax experimental huma	an infection model for eva	aluating efficacy of in	terventions
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Relevant linancial	activities outside the s	submitted work.	
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Ballard 2



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Robinson 1



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Robinson 2



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Mitchell 1



Section 1.	Identifying Inform	ation				
1. Given Name (Fi Hayley	rst Name)	2. Surname (	(Last Name)			3. Date 17-January-2020
4. Are you the cor	responding author?	Yes	<b>√</b> No	Correspond Katharine	_	or's Name
5. Manuscript Title A Plasmodium v	e ivax experimental hum	an infection r	nodel for ev	aluating effic	acy of int	terventions
6. Manuscript Idei 134923-JCI-CME	ntifying Number (if you kn D-1	ow it)		_		
Section 2.	The Work Under Co	onsideratio	n for Publi	cation		
any aspect of the s statistical analysis,	submitted work (including etc.)?	but not limited	d to grants, d			ent, commercial, private foundation, etc.) for udy design, manuscript preparation,
If yes, please fill o	evant conflicts of intere out the appropriate info be removed by pressing	rmation belo	ow. If you ha	ve more than	one enti	ity press the "ADD" button to add a row.
Name of Institut	ion/Company	Grant•	_	n-Financial Support <mark>?</mark>	Other?	Comments
•	ment in the Controlled tion (CHMI) model at	<b>✓</b>				Grant number: OPP1111147
NHMRC Program Gra	nt	<b>✓</b>				Grant number: 1132975
Section 3.	Relevant financial	activities o	utside the	submitted	work.	
of compensation clicking the "Ado	the appropriate boxes i n) with entities as descri I +" box. You should rep	n the table to bed in the ins port relationsl	indicate wh structions. U hips that we	nether you ha	ave financ or each er	cial relationships (regardless of amount ntity; add as many lines as you need by e 36 months prior to publication.
Are there any rel	evant conflicts of intere	sst? Yes	✓ No			
Section 4.	Intellectual Proper	ty Patent	s & Copyri	ghts		
Do you have any	patents, whether plani	ned, pending	or issued, b	roadly releva	nt to the	work? Yes No

Mitchell 2



Section 5.	
Section 5.	Relationships not covered above
	elationships or activities that readers could perceive to have influenced, or that give the appearance of ncing, what you wrote in the submitted work?
Yes, the follow	wing relationships/conditions/circumstances are present (explain below):
✓ No other rela	tionships/conditions/circumstances that present a potential conflict of interest
	nuscript acceptance, journals will ask authors to confirm and, if necessary, update their disclosure statements rnals may ask authors to disclose further information about reported relationships.
Section 6.	Disclosure Statement
Based on the abo	ove disclosures, this form will automatically generate a disclosure statement, which will appear in the box
	orts grants from BMGF grant - "Investment in the Controlled Human Malaria Infection (CHMI) model at QIMR is from NHMRC Program Grant, during the conduct of the study; .

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patent

Moehrle 1



Section 1. Identifying Inform	ation		
1. Given Name (First Name) Joerg	2. Surname (Last Name) Moehrle		3. Date 17-January-2020
4. Are you the corresponding author?	☐ Yes 🗸 No	Corresponding Author Katharine Collins	or's Name
5. Manuscript Title A Plasmodium vivax experimental hum	an infection model for ev	aluating efficacy of int	terventions
6. Manuscript Identifying Number (if you kn 134923-JCI-CMED-1	ow it)	_	
Section 2. The West Hadar C			
The Work Under Co	onsideration for Publi	ication	
Did you or your institution <b>at any time</b> recei any aspect of the submitted work (including statistical analysis, etc.)? Are there any relevant conflicts of intere	but not limited to grants, d		ent, commercial, private foundation, etc.) for udy design, manuscript preparation,
•		ve more than one enti	ity press the "ADD" button to add a row.
Excess rows can be removed by pressing			
Name of Institution/Company	Grant	on-Financial Support? Other?	Comments
Medicines for Malaria venture (MMV)			l am an employee of Medicines for Malaria venture
Section 3. Relevant financial	activities outside the	submitted work.	
Place a check in the appropriate boxes i of compensation) with entities as descriclicking the "Add +" box. You should rep	bed in the instructions. Uport relations hips that we	lse one line for each er	ntity; add as many lines as you need by
Are there any relevant conflicts of intere	est? Yes ✓ No		
Section 4. Intellectual Proper	ty Patents & Copyri	ghts	
Do you have any patents, whether plant			work? ☐ Yes ✔ No

Moehrle 2



Section 5. Polationships not sovered above
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Are there other relationships or activities that readers could perceive to have influenced, or that give the appearance of potentially influencing, what you wrote in the submitted work?
Yes, the following relationships/conditions/circumstances are present (explain below):
✓ No other relationships/conditions/circumstances that present a potential conflict of interest
At the time of manuscript acceptance, journals will ask authors to confirm and, if necessary, update their disclosure statements. On occasion, journals may ask authors to disclose further information about reported relationships.
Section 6. Disclosure Statement
Disclosure Statement
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Dr. Moehrle reports I was an employee of Medicines for Malaria venture,

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McCarthy 1



Section 1. Identifying Information	ation			
1. Given Name (First Name) James	2. Surname (Last Nar McCarthy	ne)		3. Date 17-January-2020
4. Are you the corresponding author?	Yes ✓ No	Correspond Katharine		or's Name
5. Manuscript Title A Plasmodium vivax experimental huma	n infection model fo	or evaluating effic	acy of int	terventions
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Section 2. The Work Under Co	nsideration for P	ublication		
any aspect of the submitted work (including statistical analysis, etc.)? Are there any relevant conflicts of interest If yes, please fill out the appropriate info Excess rows can be removed by pressing	rmation below. If you the "X" button.	No u have more than		
Name of Institution/Company	Grant? Personal Fees?	Non-Financial Support?	Other?	Comments
BMGF grant - "Investment in the Controlled Human Malaria Infection (CHMI) model at QIMR via MMV"	<b>/</b>			Grant number: OPP1111147
NHMRC Program Grant	<b>✓</b>			Grant number: 1132975
NHMRC Practitioner Fellowship	<b>✓</b>			Grant number: 1135955
Place a check in the appropriate boxes in of compensation) with entities as described clicking the "Add +" box. You should rep	n the table to indicat bed in the instruction ort relationships tha	e whether you ha ns. Use one line fo t were <b>present d</b>	ve financ or each er	ntity; add as many lines as you need by
Are there any relevant conflicts of interes	st? Yes ✓	No		

McCarthy 2



Section 4.	Intellectual Property Patents & Copyrights
Do you have any	patents, whether planned, pending or issued, broadly relevant to the work? Yes V No
Section 5.	Relationships not covered above
	relationships or activities that readers could perceive to have influenced, or that give the appearance of encing, what you wrote in the submitted work?
Yes, the follo	wing relationships/conditions/circumstances are present (explain below):
✓ No other rela	tionships/conditions/circumstances that present a potential conflict of interest
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Based on the abobelow.	ove disclosures, this form will automatically generate a disclosure statement, which will appear in the box
	ports grants from BMGF grant - "Investment in the Controlled Human Malaria Infection (CHMI) model at grants from NHMRC Program Grant, grants from NHMRC Practitioner Fellowship, during the conduct of the

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Collins 1



Section 1.	Identifying Inform	ation				
1. Given Name (Fii Katharine	rst Name)	2. Surname (Last Na Collins	nme)		3. Date 17-January-2020	
4. Are you the cor	responding author?	✓ Yes No				
5. Manuscript Title A Plasmodium vi	e ivax experimental huma	n infection model	for evaluating effic	cacy of interv	ventions	
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any aspect of the s statistical analysis,	ubmitted work (including etc.)?	but not limited to gra	nts, data monitorin	-	r, commercial, private foundation, etc.) fo y design, manuscript preparation,	r
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•	ment in the Controlled tion (CHMI) model at	<b>✓</b>		Gr	rant number: OPP1111147	
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of compensation	) with entities as descri	oed in the instruction	ons. Use one line f	or each entit	l relationships (regardless of amount ty; add as many lines as you need by 6 months prior to publication.	
Are there any rel	evant conflicts of intere	st? Yes ✓	No			
	ı					
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Do you have any	patents, whether planr	ned, pending or issu	ied, broadly releva	ant to the wo	ork? ☐ Yes   ✓ No	

Collins 2



Costion F	
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Lucantoni 1



Section 1. Identifying Inform	nation	
Given Name (First Name) Leonardo	2. Surname (Last Name) Lucantoni	3. Date 17-January-2020
4. Are you the corresponding author?	Yes ✓ No	Corresponding Author's Name Katharine Collins
5. Manuscript Title A Plasmodium vivax experimental hum	an infection model for eva	aluating efficacy of interventions
6. Manuscript Identifying Number (if you kr 134923-JCI-CMED-1	now it)	
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any aspect of the submitted work (including statistical analysis, etc.)? Are there any relevant conflicts of intere	but not limited to grants, da	a third party (government, commercial, private foundation, etc.) for ata monitoring board, study design, manuscript preparation,
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Do you have any patents, whether plan	ned, pending or issued, br	roadly relevant to the work? ☐ Yes ✓ No

Lucantoni 2



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Dr. Lucantoni has nothing to disclose.

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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

Adams 1



Section 1. Identifying Inform	ation		
1. Given Name (First Name) Matthew	2. Surname (Last Name) Adams		3. Date 17-January-2020
4. Are you the corresponding author?	☐ Yes ✓ No	Corresponding Author Katharine Collins	or's Name
5. Manuscript Title A Plasmodium vivax experimental huma	an infection model for eva	lluating efficacy of in	terventions
6. Manuscript Identifying Number (if you kn 134923-JCI-CMED-1	ow it)	_	
Section 2. The Weak Under Co			
The Work Under Co	onsideration for Public	cation	
Did you or your institution <b>at any time</b> recei any aspect of the submitted work (including statistical analysis, etc.)? Are there any relevant conflicts of intere	but not limited to grants, da		
If yes, please fill out the appropriate info Excess rows can be removed by pressing		e more than one ent	ity press the "ADD" button to add a row.
Name of Institution/Company	Grant	n-Financial other?	Comments
BMGF grant - "Investment in the Controlled Human Malaria Infection (CHMI) model at QIMR via MMV"	<b>✓</b>		Grant number: OPP1111147
NHMRC Program Grant	<b>✓</b>		Grant number: 1132975
Section 3. Belovent financial			
Relevant financial	activities outside the s	submitted work.	
Place a check in the appropriate boxes in of compensation) with entities as descriclicking the "Add +" box. You should rep	bed in the instructions. Us	se one line for each e	ntity; add as many lines as you need by
Are there any relevant conflicts of intere	est? Yes V No		
Section 4. Intellectual Proper	ty Patents & Copyric	yhts	
Do you have any patents, whether plans	ned, pending or issued, br	oadly relevant to the	work? Yes V No

Adams 2



Section 5.	
Section 5.	Relationships not covered above
	elationships or activities that readers could perceive to have influenced, or that give the appearance of ncing, what you wrote in the submitted work?
Yes, the follow	wing relationships/conditions/circumstances are present (explain below):
✓ No other rela	tionships/conditions/circumstances that present a potential conflict of interest
	nuscript acceptance, journals will ask authors to confirm and, if necessary, update their disclosure statements rnals may ask authors to disclose further information about reported relationships.
Section 6.	Disclosure Statement
Based on the abo	ove disclosures, this form will automatically generate a disclosure statement, which will appear in the box
	ts grants from BMGF grant - "Investment in the Controlled Human Malaria Infection (CHMI) model at QIMR from NHMRC Program Grant, during the conduct of the study; .

### **Evaluation and Feedback**

Please visit <a href="http://www.icmje.org/cgi-bin/feedback">http://www.icmje.org/cgi-bin/feedback</a> to provide feedback on your experience with completing this form.

Adams 3



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patent

Rampton 1



Section 1. Identifying Inform	ation		
1. Given Name (First Name) Melanie	2. Surname (Last Name) Rampton		3. Date 17-January-2020
4. Are you the corresponding author?	☐ Yes ✓ No	Corresponding Author Katharine Collins	or's Name
5. Manuscript Title A Plasmodium vivax experimental hum	an infection model for eva	lluating efficacy of in	terventions
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The Work Under Co	onsideration for Public	cation	
any aspect of the submitted work (including statistical analysis, etc.)? Are there any relevant conflicts of intere	but not limited to grants, da	ta monitoring board, st	
If yes, please fill out the appropriate info Excess rows can be removed by pressing		e more than one ent	ity press the "ADD" button to add a row.
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Relevant financial	activities outside the s	submitted work.	
Place a check in the appropriate boxes i of compensation) with entities as descri clicking the "Add +" box. You should rep	bed in the instructions. Us	se one line for each e	ntity; add as many lines as you need by
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Section 4. Intellectual Proper	ty Patents & Copyric	jhts	
Do you have any patents, whether plant	ned, pending or issued, br	oadly relevant to the	work? Yes V No

Rampton 2



Section 5.	
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CHALON 1



Section 1.	Identifying Inform	nation	
1. Given Name (First Name) Stephan		2. Surname (Last Na CHALON	me) 3. Date 17-January-2020
4. Are you the corresponding author?		Yes ✓ No	Corresponding Author's Name Katharine Collins
5. Manuscript Title A Plasmodium v		an infection model f	or evaluating efficacy of interventions
6. Manuscript Idea 134923-JCI-CME	ntifying Number (if you kr D-1	now it)	
Section 2.			
any aspect of the s statistical analysis, Are there any rel If yes, please fill o Excess rows can Name of Institut	ubmitted work (including etc.)? evant conflicts of intereport the appropriate infobe removed by pressingion/Company	ive payment or service g but not limited to gra est?  Yes  prmation below. If yo	s from a third party (government, commercial, private foundation, etc.) for nts, data monitoring board, study design, manuscript preparation, No ou have more than one entity press the "ADD" button to add a row.
of compensatior clicking the "Adc Are there any rel	the appropriate boxes in with entities as descr	in the table to indica ibed in the instructio port relationships th	the submitted work.  te whether you have financial relationships (regardless of amount ons. Use one line for each entity; add as many lines as you need by at were present during the 36 months prior to publication.  No
Section 4.	Intellectual Prope	rty Patents & Co	pyrights
Do you have any	patents, whether plan	ned, pending or issu	ed, broadly relevant to the work? Yes Vo

CHALON 2



Section 5.			
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Yes, the following relationships/conditions/circumstances are present (explain below):			
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	nuscript acceptance, journals will ask authors to confirm and, if necessary, update their disclosure statements nals may ask authors to disclose further information about reported relationships.		
Sections			
Section 6.	Disclosure Statement		
Based on the above below.	ve disclosures, this form will automatically generate a disclosure statement, which will appear in the box		
Stephan Chalon is	s an employee of MMV		

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Elliott 1



Section 1. Identifying Inform	nation		
Given Name (First Name) Suzanne	2. Surname (Last Name) Elliott	3. Date 17-January-2020	
4. Are you the corresponding author?	☐ Yes ✓ No	Corresponding Author's Name Katharine Collins	
5. Manuscript Title A Plasmodium vivax experimental human infection model for evalu		luating efficacy of interventions	
6. Manuscript Identifying Number (if you know it) 134923-JCI-CMED-1			
Section 2. The Work Under C	onsideration for Public	nation.	
Did you or your institution <b>at any time</b> rece	ive payment or services from g but not limited to grants, da	a third party (government, commercial, private foundation, etc.) for ta monitoring board, study design, manuscript preparation,	
Section 3. Relevant financial	activities outside the s	ubmitted work.	
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Do you have any patents, whether plan	ned, pending or issued, br	oadly relevant to the work? Yes V No	

Elliott 2



Section 5. Polationships not sovered above		
Relationships not covered above		
Are there other relationships or activities that readers could perceive to have influenced, or that give the appearance of potentially influencing, what you wrote in the submitted work?		
Yes, the following relationships/conditions/circumstances are present (explain below):		
✓ No other relationships/conditions/circumstances that present a potential conflict of interest		
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Section 6. Disclosure Statement		
Disclosure Statement		
Based on the above disclosures, this form will automatically generate a disclosure statement, which will appear in the box below.		
Dr. Elliott has nothing to disclose.		

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Elliott 3



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Shelper 1



Section 1. Identifying Inform	nation	
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4. Are you the corresponding author?	Yes ✓ No	Corresponding Author's Name Katharine Collins
5. Manuscript Title A Plasmodium vivax experimental hum	nan infection model for eva	aluating efficacy of interventions
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Continu 2		
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Do you have any patents, whether plan		

Shelper 2



Section 5. Polationships not severed shows		
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This section asks about your financial relationships with entities in the bio-medical arena that could be perceived to influence, or that give the appearance of potentially influencing, what you wrote in the submitted work. You should disclose interactions with ANY entity that could be considered broadly relevant to the work. For example, if your article is about testing an epidermal growth factor receptor (EGFR) antagonist in lung cancer, you should report all associations with entities pursuing diagnostic or therapeutic strategies in cancer in general, not just in the area of EGFR or lung cancer.

Report all sources of revenue paid (or promised to be paid) directly to you or your institution on your behalf over the 36 months prior to submission of the work. This should include all monies from sources with relevance to the submitted work, not just monies from the entity that sponsored the research. Please note that your interactions with the work's sponsor that are outside the submitted work should also be listed here. If there is any question, it is usually better to disclose a relationship than not to do so.

For grants you have received for work outside the submitted work, you should disclose support ONLY from entities that could be perceived to be affected financially by the published work, such as drug companies, or foundations supported by entities that could be perceived to have a financial stake in the outcome. Public funding sources, such as government agencies, charitable foundations or academic institutions, need not be disclosed. For example, if a government agency sponsored a study in which you have been involved and drugs were provided by a pharmaceutical company, you need only list the pharmaceutical company.

# 4. Intellectual Property.

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

# 5. Relationships not covered above.

Use this section to report other relationships or activities that readers could perceive to have influenced, or that give the appearance of potentially influencing, what you wrote in the submitted work.

#### Definitions.

**Entity:** government agency, foundation, commercial sponsor, academic institution, etc.

**Grant:** A grant from an entity, generally [but not always] paid to your organization

**Personal Fees:** Monies paid to you for services rendered, generally honoraria, royalties, or fees for consulting, lectures, speakers bureaus, expert testimony, employment, or other affiliations

**Non-Financial Support:** Examples include drugs/equipment supplied by the entity, travel paid by the entity, writing assistance, administrative support, etc.

**Other:** Anything not covered under the previous three boxes

**Pending:** The patent has been filed but not issued **Issued:** The patent has been issued by the agency

**Licensed:** The patent has been licensed to an entity, whether earning royalties or not

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

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Section 1. Identifying Inform	nation			
1. Given Name (First Name) Vicky	2. Surname (Last Name) Avery	3. Date 17-January-2020		
4. Are you the corresponding author?	☐ Yes ✓ No	Corresponding Author's Name Katharine Collins		
5. Manuscript Title A Plasmodium vivax experimental human infection model for evaluating efficacy of interventions				
6. Manuscript Identifying Number (if you know it) 134923-JCI-CMED-1				
Section 2. The Week Hader Consideration for Dublication				
The Work Under C	onsideration for Public	ation		
	g but not limited to grants, da	a third party (government, commercial, private foundation, etc.) for ta monitoring board, study design, manuscript preparation,		
Section 3. Relevant financial	activities outside the s	ubmitted work.		
of compensation) with entities as descr	ibed in the instructions. Us port relationships that wer	ether you have financial relationships (regardless of amount se one line for each entity; add as many lines as you need by se present during the 36 months prior to publication.		
Section 4. Intellectual Proper	rty Patents & Copyrig	ıhts		
Do you have any patents, whether plan				

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Section 5. Polationships not severed shows		
Relationships not covered above		
Are there other relationships or activities that readers could perceive to have influenced, or that give the appearance of potentially influencing, what you wrote in the submitted work?		
Yes, the following relationships/conditions/circumstances are present (explain below):		
✓ No other relationships/conditions/circumstances that present a potential conflict of interest		
At the time of manuscript acceptance, journals will ask authors to confirm and, if necessary, update their disclosure statement On occasion, journals may ask authors to disclose further information about reported relationships.		
Section 6. Disclosure Statement		
Disclosure statement		
Based on the above disclosures, this form will automatically generate a disclosure statement, which will appear in the box below.		
Dr. Avery has nothing to disclose.		

#### **Evaluation and Feedback**

Please visit <a href="http://www.icmje.org/cgi-bin/feedback">http://www.icmje.org/cgi-bin/feedback</a> to provide feedback on your experience with completing this form.

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