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

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### Section 1. Identifying Information

1. **Given Name (First Name)**
   - Ruben

2. **Surname (Last Name)**
   - Alvero

3. **Date**
   - 27-January-2014

4. **Are you the corresponding author?**
   - Yes ☑

5. **Manuscript Title**
   - Letrozole versus Clomiphene for Infertility in Polycystic Ovary Syndrome

6. **Manuscript Identifying Number (if you know it)**
   - 13-13517

### 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? ☑

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Do you have any patents, whether planned, pending or issued, broadly relevant to the work? ☑
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Section 6. Disclosure Statement

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Dr. Alvero 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)  
   Valerie

2. Surname (Last Name)  
   Baker

3. Date  
   24-January-2014

4. Are you the corresponding author?  
   [ ] Yes  
   ✔ No

   Corresponding Author’s Name  
   Richard Legro

5. Manuscript Title  
   Letrozole versus Clomiphene for Infertility in Polycystic Ovary Syndrome

6. Manuscript Identifying Number (if you know it)  
   13-13517

Section 2. The Work Under Consideration for Publication

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Are there any relevant conflicts of interest?  
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   ✔ No

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Dr. Baker has nothing to disclose.

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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)  Kurt
2. Surname (Last Name)  Barnhart
3. Date  28-January-2014
4. Are you the corresponding author?  ☐ Yes  ✔ No  

Corresponding Author’s Name  Richard Legro

5. Manuscript Title  Letrozole versus Clomiphene for Infertility in Polycystic Ovary Syndrome

6. Manuscript Identifying Number (if you know it)  13-13517

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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If yes, please fill out the appropriate information below.

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<th>Name of Entity</th>
<th>Grant?</th>
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<th>Non-Financial Support?</th>
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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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Dr. Barnhart reports grant support from the NIH outside the submitted work.

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name) Gordon
2. Surname (Last Name) Bates
3. Date 24-January-2014
4. Are you the corresponding author? Yes ☑ No
5. Corresponding Author’s Name Richard Legro
6. Manuscript Title
   Letrozole versus Clomiphene for Infertility in Polycystic Ovary Syndrome
7. Manuscript Identifying Number (if you know it)
   13-13517

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Dr. Bates 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)  
   Robert  

2. Surname (Last Name)  
   Brzyski  

3. Date  
   23-January-2014  

4. Are you the corresponding author?  
   ✔ No  
   Corresponding Author’s Name  
   Richard Legro  

5. Manuscript Title  
   Letrozole versus Clomiphene for Infertility in Polycystic Ovary Syndrome  

6. Manuscript Identifying Number (if you know it)  
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Are there any relevant conflicts of interest?  
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Are there any relevant conflicts of interest?  
   ✔ No  

## Section 4. Intellectual Property -- Patents & Copyrights

Do you have any patents, whether planned, pending or issued, broadly relevant to the work?  
   ✔ No  

Brzyski
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**Section 5. Relationships not covered above**

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Dr. Brzyski has nothing to disclose.

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

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4. Are you the corresponding author? [ ] Yes [ ] No

Corresponding Author’s Name
Richard Legro

5. Manuscript Title
Letrozole versus Clomiphene for Infertility in Polycystic Ovary Syndrome

6. Manuscript Identifying Number (if you know it)
13-13517

Section 2. The Work Under Consideration for Publication

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Do you have any patents, whether planned, pending or issued, broadly relevant to the work? [ ] Yes [ ] No
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Section 6. Disclosure Statement

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Dr. Casson has nothing to disclose.

Evaluation and Feedback

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**Section 1. Identifying Information**

1. Given Name (First Name)  
   Gregory

2. Surname (Last Name)  
   Christman

3. Date  
   24-January-2014

4. Are you the corresponding author?  
   Yes ☑ No

   Corresponding Author’s Name  
   Richard Legro

5. Manuscript Title  
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6. Manuscript Identifying Number (if you know it)  
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Dr. Christman 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)  
   Christos

2. Surname (Last Name)  
   Coutifaris

3. Date  
   29-January-2014

4. Are you the corresponding author?  
   ☑ Yes  ☐ No

   Corresponding Author’s Name  
   Richard Legro

5. Manuscript Title  
   Letrozole versus Clomiphene for Infertility in Polycystic Ovary Syndrome

6. Manuscript Identifying Number (if you know it)  
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Coutifaris
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Dr. Coutifaris reports grant support from the NICHD during the conduct of the study.

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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)  Diamond
3. Date  27-January-2014
4. Are you the corresponding author?  Yes ✔ No
   Corresponding Author’s Name  Richard Legro

5. Manuscript Title
   Letrozole versus Clomiphene for Infertility in Polycystic Ovary Syndrome

6. Manuscript Identifying Number (if you know it)
   13-13517

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Section 1. Identifying Information

1. Given Name (First Name)  
   Esther  

2. Surname (Last Name)  
   Eisenberg  

3. Date  
   25-January-2014  

4. Are you the corresponding author?  
   Yes ☐  No ☑  
   Corresponding Author’s Name  
   Richard Legro  

5. Manuscript Title  
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Eisenberg
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Dr. Eisenberg 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)  
   Daniel

2. Surname (Last Name)  
   Haisenleder

3. Date  
   24-January-2014

4. Are you the corresponding author?  
   [ ] Yes  
   [ ] No

   Corresponding Author’s Name  
   Richard Legro

5. Manuscript Title  
   Letrozole versus Clomiphene for Infertility in Polycystic Ovary Syndrome

6. Manuscript Identifying Number (if you know it)  
   13-13517

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Are there any relevant conflicts of interest?  
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Do you have any patents, whether planned, pending or issued, broadly relevant to the work?  
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   [ ] No
ICMJE Form for Disclosure of Potential Conflicts of Interest

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Dr. Haisenleder 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)**
   Hao
2. **Surname (Last Name)**
   Huang
3. **Date**
   24-January-2014
4. **Are you the corresponding author?**
   - Yes
   - No ✔
   **Corresponding Author’s Name**
   Richard Legro
5. **Manuscript Title**
   Letrozole versus Clomiphene for Infertility in Polycystic Ovary Syndrome
6. **Manuscript Identifying Number (if you know it)**
   13-13517

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- No ✔

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Dr. Huang 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)  
   Stephen

2. Surname (Last Name)  
   Krawetz

3. Date  
   24-January-2014

4. Are you the corresponding author?  
   ✔ No

   Corresponding Author’s Name  
   Richard Legro

5. Manuscript Title  
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Dr. Krawetz has nothing to disclose.

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1. Given Name (First Name)  
   Richard

2. Surname (Last Name)  
   Legro

3. Date  
   24-January-2014

4. Are you the corresponding author?  
   ✔ Yes  
   ☐ No

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Are there any relevant conflicts of interest?  
   ✔ Yes  
   ☐ No

If yes, please fill out the appropriate information below. If you have more than one entity press the “ADD” button to add a row. Excess rows can be removed by pressing the “X” button.

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Are there any relevant conflicts of interest?  
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   ☐ No

If yes, please fill out the appropriate information below.

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<th>Name of Entity</th>
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Dr. Legro reports grant support from the NIH during the conduct of the study, and personal fees from Ferring Pharmaceuticals, AstraZeneca, Euroscreen, the NIH, and the FDA outside the submitted work.
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<tr>
<td>Richard</td>
<td>Lucidi</td>
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4. Are you the corresponding author?  
   - Yes  
   - No  
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Section 6. Disclosure Statement

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Dr. Lucidi has nothing to disclose.

Evaluation and Feedback

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# ICMJE Form for Disclosure of Potential Conflicts of Interest

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<td>03-February-2014</td>
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<td>4. Are you the corresponding author?</td>
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ICMJE Form for Disclosure of Potential Conflicts of Interest

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)  Nanette
2. Surname (Last Name)  Santoro
3. Date  23-January-2014
4. Are you the corresponding author?  Yes  ✔  No
   Corresponding Author’s Name  Richard Legro
5. Manuscript Title  Letrozole versus Clomiphene for Infertility in Polycystic Ovary Syndrome
6. Manuscript Identifying Number (if you know it)  13-13517

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

Section 3. Relevant financial activities outside the submitted work.

Place a check in the appropriate boxes in the table to indicate whether you have financial relationships (regardless of amount of compensation) with entities as described in the instructions. Use one line for each entity; add as many lines as you need by clicking the “Add +” box. You should report relationships that were present during the 36 months prior to publication.

Are there any relevant conflicts of interest?  Yes  ✔  No
If yes, please fill out the appropriate information below.

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<th>Non-Financial Support?</th>
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Dr. Santoro reports grant support from Bayer and other support from Menogenix outside the submitted work.

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## Section 1. Identifying Information

1. **Given Name (First Name)**
   - William

2. **Surname (Last Name)**
   - Schlaff

3. **Date**
   - 25-January-2014

4. **Are you the corresponding author?**
   - No

   **Corresponding Author’s Name**
   - Richard Legro

5. **Manuscript Title**
   - Letrozole versus Clomiphene for Infertility in Polycystic Ovary Syndrome

6. **Manuscript Identifying Number (if you know it)**
   - 13-13517

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Dr. Schlaff 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)  
   Peter

2. Surname (Last Name)  
   Snyder

3. Date  
   23-January-2014

4. Are you the corresponding author?  
   Yes  No  ✔

   Corresponding Author's Name  
   Richard Legro

5. Manuscript Title  
   Letrozole versus Clomiphene for Infertility in Polycystic Ovary Syndrome

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# ICMJE Form for Disclosure of Potential Conflicts of Interest

## Section 1. Identifying Information

1. **Given Name (First Name)**: J
2. **Surname (Last Name)**: Trussell
3. **Date**: 25-January-2014
4. **Are you the corresponding author?**
   - Yes [ ]
   - No [x]

   **Corresponding Author’s Name**:
   Richard Legro

5. **Manuscript Title**:
   Letrozole versus Clomiphene for Infertility in Polycystic Ovary Syndrome

6. **Manuscript Identifying Number (if you know it)**:
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Are there any relevant conflicts of interest?  
- Yes [ ]
- No [x]

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- Yes [ ]
- No [x]

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Do you have any patents, whether planned, pending or issued, broadly relevant to the work?  
- Yes [ ]
- No [x]
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Dr. Trussell has nothing to disclose.

Evaluation and Feedback

Please visit http://www.icmje.org/cgi-bin/feedback to provide feedback on your experience with completing this form.
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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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)  
Rebecca

2. Surname (Last Name)  
Usadi

3. Date  
24-January-2014

4. Are you the corresponding author?  
Yes ☐  No ☑

Corresponding Author’s Name  
Richard Legro

5. Manuscript Title  
Letrozole versus Clomiphene for Infertility in Polycystic Ovary Syndrome

6. Manuscript Identifying Number (if you know it)  
13-13517

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 ☐

If yes, please fill out the appropriate information below. If you have more than one entity press the “ADD” button to add a row. Excess rows can be removed by pressing the “X” button.

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Are there any relevant conflicts of interest?  
Yes ☐  No ☑

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Dr. Usadi reports grant support from the NICHD during the conduct of the study.

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Section 1. Identifying Information

1. Given Name (First Name) Qingshang
2. Surname (Last Name) Yan
3. Date 24-January-2014
4. Are you the corresponding author? □ Yes ✔ No
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   Richard Legro
5. Manuscript Title
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Dr. Yan has nothing to disclose.

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1. Given Name (First Name)
   Heping

2. Surname (Last Name)
   Zhang

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