

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.

Identifying information.

2. The work under consideration for publication.

This section asks for information about the work that you have submitted for publication. The time frame for this reporting is that of the work itself, from the initial conception and planning to the present. The requested information is about resources that you received, either directly or indirectly (via your institution), to enable you to complete the work. Checking "No" means that you did the work without receiving any financial support from any third party -- that is, the work was supported by funds from the same institution that pays your salary and that institution did not receive third-party funds with which to pay you. If you or your institution received funds from a third party to support the work, such as a government granting agency, charitable foundation or commercial sponsor, check "Yes".

3. Relevant financial activities outside the submitted work.

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.

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



Identifying Information

Section 1.

ICMJE Form for Disclosure of Potential Conflicts of Interest

| Benjamin | Surname (Last Nan Horne | ne) | | 3. Date 25-May-2018 |
|--|---|--|---------------------------------------|--|
| 4. Are you the corresponding author? | ✓ Yes No | | | |
| 5. Manuscript Title Extreme Erythrocyte Macrocytic and M | licrocytic Percentages | are Highly Predic | ctive of Mo | orbidity and Mortality |
| 6. Manuscript Identifying Number (if you I 120183-INS-CMED-1 | know it) | | | |
| Section 2. The Work Under | Consideration for P | ublication | | |
| Did you or your institution at any time rec | eive payment or services | from a third party | | |
| any aspect of the submitted work (includir statistical analysis, etc.)? | ng but not limited to gran | its, data monitoring | g board, stu | udy design, manuscript preparation, |
| Are there any relevant conflicts of inte | rest? Yes | No | | |
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| | | | | |
| | | | | |
| Section 3. Relevant financia | l activities outside t | the submitted | work. | |
| Place a check in the appropriate boxes of compensation) with entities as described the "Add +" box. You should re | in the table to indicate ribed in the instruction eport relationships tha | e whether you hans. Use one line for t were present d | ave financ or each en | tity; add as many lines as you need by |
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| Se | ction 4. | Intellectual | Property | Patents | s & Copyri | ghts | | | |
|------------|-----------------------------|------------------------------------|---------------|-----------------------|---------------|----------------|--|---|--------|
| If ye | s, please fill | • | iate informa | tion belo | w. If you ha | • | ant to the work? n one entity pres | Yes No No s the "ADD" button to add | a row. |
| | Paten | ıt? | Pending? | Issued <mark>?</mark> | Licensed | Royalties? | Licensee? | Comments | |
| | novel measure dispersion | es of red blood | √ | | | | | Provisional patent. | |
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| Se | ction 5. | Relationshi | ps not cove | ered abo | ove | | | | |
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| | es, the follo | wing relationsh | ips/conditio | ns/circun | nstances are | e present (ex | plain below): | | |
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| Se | ction 6. | | | | | | | | |
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| Astr | aZeneca, no | n-financial supp | oort from Gla | xoSmith | Kline, non-f | inancial sup | | gram, grants from entra, outside the submitte on pending. | ed |
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Evaluation and Feedback

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



| Section 1. | dentifying Inforr | nation | | | | | |
|--|--|----------------------------------|----------------------------------|-----------------------|-------------------------------|---|-----------|
| 1. Given Name (First Joseph | Name) | 2. Surname Muhlestei | e (Last Name) n | | | 3. Date 25-May-2018 | |
| 4. Are you the corres | ponding author? | Yes | ✓ No | Correspon Benjamin | ding Author's Nam D. Horne | ne | |
| 5. Manuscript Title Extreme Erythrocyt | e Macrocytic and M | icrocytic Pero | centages are l | lighly Predi | ctive of Morbidity | y and Mortality | |
| 6. Manuscript Identif 120183-INS-CMED- | | now it) | | | | | |
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| Section 2. T | he Work Under C | onsideration | on for Publi | cation | | | |
| any aspect of the sub statistical analysis, etc Are there any releva | mitted work (includin)? | g but not limit | ed to grants, da | | | nmercial, private foundatior ign, manuscript preparation | |
| Section 3. | elevant financial | activities o | outside the s | submitted | work. | | |
| of compensation) w clicking the "Add +" Are there any releva | vith entities as descr box. You should re | ribed in the ir port relation | nstructions. Us ships that we | se one line f | or each entity; ac | tionships (regardless of a dd as many lines as you n onths prior to publicati | eed by |
| Section 4. | ntellectual Prope | rty Paten | ts & Copyri | ghts | | | |
| Do you have any pa If yes, please fill out Excess rows can be | the appropriate inf | ormation bel | ow. If you hav | | | ✓ Yes No s the "ADD" button to ad | ld a row. |
| Patent? | Pend | ing? Issued | ? Licensed? | Royalties? | Licensee? | Comments | |
| Use of novel measures of cell size dispersion | f red blood | | | | | Provisional patent. | |

Muhlestein 2



| Section 5. Polationships not sovered above |
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| 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 statements On occasion, journals may ask authors to disclose further information about reported relationships. |
| 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. Muhlestein reports a patent Use of novel measures of red blood cell size dispersion pending. |

Evaluation and Feedback

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

Muhlestein 3



| Section 1. | Identifying In | formation | | | | | |
|---|--|---|----------------------------------|-----------------------|-------------------------------|--|-----------|
| 1. Given Name (Firs Sterling | t Name) | 2. Surname Bennett | e (Last Name) | | | 3. Date 25-May-2018 | |
| 4. Are you the corre | esponding author? | Yes | ✓ No | Correspon Benjamin | ding Author's Nam D. Horne | ne | |
| 5. Manuscript Title Extreme Erythrocy | yte Macrocytic ar | nd Microcytic Pero | centages are l | Highly Predi | ctive of Morbidit | y and Mortality | |
| 6. Manuscript Ident | | ou know it) | | _ | | | |
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| Section 2. | The Work Und | er Consideratio | on for Publi | cation | | | |
| any aspect of the su statistical analysis, e Are there any rele | bmitted work (incl tc.)? | uding but not limit | ed to grants, da | | | nmercial, private foundatio ign, manuscript preparatio | |
| Section 3. | Relevant finan | cial activities o | outside the | submitted | work. | | |
| of compensation) clicking the "Add Are there any rele | with entities as o +" box. You shou | lescribed in the ir Id report relation | nstructions. Us ships that we | se one line f | or each entity; ac | tionships (regardless of Id as many lines as you r onths prior to publicat | need by |
| Section 4. | Intellectual Pro | operty Paten | ts & Copyri | ghts | | | |
| Do you have any p If yes, please fill or Excess rows can b | ut the appropriat | e information bel | low. If you hav | | | ✓ Yes No s the "ADD" button to ac | dd a row. |
| Patent | ? Po | ending? Issued | ? Licensed? | Royalties? | Licensee? | Comments | |
| Use of novel measures cell size dispersion | of red blood | ✓ | | | | Provisional patent. | |

Bennett 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? |
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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. Bennett reports a patent Use of novel measures of red blood cell size dispersion pending. |

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Bennett 3



| Section 1. Ide | entifying Informa | tion | | |
|---|---|--|---|-------|
| 1. Given Name (First Na Joseph Boone | • | 2. Surname (Last Name) Muhlestein | 3. Date 25-May-2018 | |
| 4. Are you the correspo | onding author? | Yes ✓ No | Corresponding Author's Name Benjamin D. Horne | |
| 5. Manuscript Title Extreme Erythrocyte | Macrocytic and Micr | ocytic Percentages are H | lighly Predictive of Morbidity and Mortality | |
| 6. Manuscript Identifyir 120183-INS-CMED-1 | ng Number (if you kno | w it) | | |
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| Section 2. The | e Work Under Cor | nsideration for Public | ation | |
| | itted work (including b ? | out not limited to grants, da | a third party (government, commercial, private foundation, etc.) ta monitoring board, study design, manuscript preparation, |) for |
| Section 3. Rel | levant financial a | ctivities outside the s | ubmitted work. | |
| of compensation) wit | th entities as describe box. You should repo | ed in the instructions. Us ort relationships that wer | ether you have financial relationships (regardless of amou e one line for each entity; add as many lines as you need b e present during the 36 months prior to publication . | |
| Section 4. Int | ellectual Property | y Patents & Copyrig | yhts | |
| Do you have any pate | ents, whether planne | ed, pending or issued, bro | oadly relevant to the work? | |

Muhlestein 2



| Section 5. Polationships not severed above |
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| 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? |
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| ✓ 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 |
| Based on the above disclosures, this form will automatically generate a disclosure statement, which will appear in the box below. |
| Dr. Muhlestein has nothing to disclose. |

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Muhlestein 3



| Section 1. Identifying Inform | nation | |
|--|---|--|
| 1. Given Name (First Name) Kurt | 2. Surname (Last Name) Jensen | 3. Date 25-May-2018 |
| 4. Are you the corresponding author? | Yes ✓ No | Corresponding Author's Name Benjamin D. Horne |
| 5. Manuscript Title Extreme Erythrocyte Macrocytic and Mi | crocytic Percentages are F | Highly Predictive of Morbidity and Mortality |
| 6. Manuscript Identifying Number (if you kr 120183-INS-CMED-1 | now it) | |
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| Section 2. The Work Under Co | onsideration for Public | cation |
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| Intellectual Proper | rty Patents & Copyri | ghts |
| Do you have any patents, whether plan | ned, pending or issued, br | roadly relevant to the work? Yes V No |

Jensen 2



| Section 5. Relationships not covered 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 |
| Based on the above disclosures, this form will automatically generate a disclosure statement, which will appear in the box below. |
| Dr. Jensen has nothing to disclose. |

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Jensen 3



| Section 1. | Identifying Inform | nation | |
|---|-----------------------------------|--|--|
| 1. Given Name (Fir Diane | st Name) | 2. Surname (Last Name) Marshall | 3. Date 25-May-2018 |
| 4. Are you the corr | esponding author? | Yes ✓ No | Corresponding Author's Name Benjamin D. Horne |
| 5. Manuscript Title Extreme Erythrod | | crocytic Percentages are F | lighly Predictive of Morbidity and Mortality |
| 6. Manuscript Iden 120183-INS-CME | ntifying Number (if you kr D-1 | now it) | |
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| any aspect of the su statistical analysis, | ubmitted work (including | but not limited to grants, da | a third party (government, commercial, private foundation, etc.) for ta monitoring board, study design, manuscript preparation, |
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| Section 4. | Intellectual Proper | ty Patents & Copyric | yhts |
| Do you have any | patents, whether plan | ned, pending or issued, br | oadly relevant to the work? Yes V No |

Marshall 2



| Section 5. | |
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| Section 5. | Relationships not covered above |
| | elationships 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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| Section 6. | Disclosure Statement |
| Based on the abo | ove disclosures, this form will automatically generate a disclosure statement, which will appear in the box |
| Dr. Marshall has | nothing to disclose. |

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Marshall 3



| Section 1. Identifying Inform | nation | |
|--|---|--|
| 1. Given Name (First Name) Tami | 2. Surname (Last Name) Bair | 3. Date 25-May-2018 |
| 4. Are you the corresponding author? | ☐ Yes ✓ No | Corresponding Author's Name Benjamin D. Horne |
| 5. Manuscript Title Extreme Erythrocyte Macrocytic and Mi | crocytic Percentages are F | Highly Predictive of Morbidity and Mortality |
| 6. Manuscript Identifying Number (if you kr 120183-INS-CMED-1 | now it) | |
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| Do you have any patents, whether plan | ned, pending or issued, br | roadly relevant to the work? Yes V No |

Bair 2



| Section 5. Polationships not severed above |
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| 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 statements On occasion, journals may ask authors to disclose further information about reported relationships. |
| 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. Bair has nothing to disclose. |

Evaluation and Feedback

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Bair 3



| Section 1. | ldentifying Inform | nation | | |
|---|------------------------------------|--------------------------------|--|--|
| 1. Given Name (Fi Heidi | rst Name) | 2. Surname (Last Name) May | | 3. Date 25-May-2018 |
| 4. Are you the cor | responding author? | Yes Vo | Corresponding Author's Name Benjamin D. Horne | |
| 5. Manuscript Title Extreme Erythro | | icrocytic Percentages are | Highly Predictive of M | lorbidity and Mortality |
| 6. Manuscript Ider 120183-INS-CME | ntifying Number (if you kr :D-1 | now it) | | |
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| Are there any rel | evant conflicts of intere | est? ✓ Yes No | | |
| If yes, please fill o | out the appropriate info | ormation below. | | |
| Name of Entity | | Grant | on-Financial Other? | Comments |
| CareCentra | | | | Three risk scores are licensed under a royalty agreement to CareCentra. |
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| Section 4. | Intellectual Proper | rty Patents & Copyr | ights | |
| Do you have any | patents, whether plan | ned, pending or issued, k | proadly relevant to the | work? ☐ Yes ✓ No |

May 2



| Section 5. Relationships not covered above |
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| 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? |
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| ✓ 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 |
| Based on the above disclosures, this form will automatically generate a disclosure statement, which will appear in the box below. |
| Dr. May reports other from CareCentra, outside the submitted work. |

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May 3



| Section 1. | Identifying Inform | ation | | |
|--|------------------------------------|---|---|--|
| 1. Given Name (Fii John | rst Name) | 2. Surname (Last Name) Carlquist | | 3. Date 25-May-2018 |
| 4. Are you the cor | responding author? | ☐ Yes ✓ No | Corresponding Author's Nam Benjamin D. Horne | ne |
| 5. Manuscript Title Extreme Erythroo | | crocytic Percentages are H | Highly Predictive of Morbidit | y and Mortality |
| 6. Manuscript Ider 120183-INS-CME | ntifying Number (if you kr ED-1 | now it) | | |
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| Section 4. | Intellectual Proper | ty Patents & Copyri | ghts | |
| Do you have any | patents, whether plan | ned, pending or issued, br | roadly relevant to the work? | ☐ Yes 🗸 No |

Carlquist 2



| Section 5. Relationships not sovered above |
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| 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? |
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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. Carlquist has nothing to disclose. |

Evaluation and Feedback

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Carlquist 3



| Section 1. Identifying Inform | nation | |
|--|---|--|
| 1. Given Name (First Name) Matthew | 2. Surname (Last Name) Hegewald | 3. Date 25-May-2018 |
| 4. Are you the corresponding author? | ☐ Yes ✓ No | Corresponding Author's Name Benjamin D. Horne |
| 5. Manuscript Title Extreme Erythrocyte Macrocytic and Mi | icrocytic Percentages are F | Highly Predictive of Morbidity and Mortality |
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| | g but not limited to grants, da | a third party (government, commercial, private foundation, etc.) for ata monitoring board, study design, manuscript preparation, |
| Section 3. Relevant financial | activities outside the | submitted work. |
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| Intellectual Proper | rty Patents & Copyric | gnts |
| Do you have any patents, whether plan | ned, pending or issued, br | roadly relevant to the work? Yes V No |

Hegewald 2



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| Dr. Hegewald has nothing to disclose. |

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Hegewald 3



| Section 1. | Identifying Inform | nation | |
|---|-----------------------------------|---|--|
| Given Name (Fir Stacey | rst Name) | 2. Surname (Last Name) Knight | 3. Date 25-May-2018 |
| 4. Are you the corr | responding author? | Yes ✓ No | Corresponding Author's Name Benjamin D. Horne |
| 5. Manuscript Title Extreme Erythroo | | crocytic Percentages are F | Highly Predictive of Morbidity and Mortality |
| 6. Manuscript Ider 120183-INS-CME | ntifying Number (if you kr D-1 | now it) | |
| | | | |
| Section 2. | The Work Under Co | onsideration for Public | cation |
| any aspect of the si statistical analysis, | ubmitted work (including | 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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| of compensation clicking the "Add |) with entities as descri | 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 re present during the 36 months prior to publication . |
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| Do you have any | patents, whether plan | ned, pending or issued, br | roadly relevant to the work? Yes V No |

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| Dr. Knight has nothing to disclose. |

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Knight 3



| Section 1. Identifying Inform | nation | |
|---|---|--|
| Given Name (First Name) Viet | 2. Surname (Last Name) Le | 3. Date 25-May-2018 |
| 4. Are you the corresponding author? | ☐ Yes ✓ No | Corresponding Author's Name Benjamin D. Horne |
| 5. Manuscript Title Extreme Erythrocyte Macrocytic and M | icrocytic Percentages are F | lighly Predictive of Morbidity and Mortality |
| 6. Manuscript Identifying Number (if you k 120183-INS-CMED-1 | now it) | |
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| Section 2. The Work Under C | onsideration for Public | cation |
| | 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 | submitted 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 re present during the 36 months prior to publication. |
| Section 4. Intellectual Prope | rty Patents & Copyri | ghts |
| Do you have any patents, whether plan | ned, pending or issued, br | oadly relevant to the work? Yes V No |

Le 2



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| Dr. Le has nothing to disclose. |

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| Section 1. | Identifying Inform | nation | |
|--|------------------------------------|---|--|
| Given Name (First Name) T. Jared | | 2. Surname (Last Name) Bunch | 3. Date 25-May-2018 |
| 4. Are you the corresponding author? | | Yes ✓ No | Corresponding Author's Name Benjamin D. Horne |
| 5. Manuscript Title Extreme Erythro | | icrocytic Percentages are H | lighly Predictive of Morbidity and Mortality |
| 6. Manuscript Ider 120183-INS-CME | ntifying Number (if you kr :D-1 | now it) | |
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| Section 3. | Relevant financial | activities outside the s | submitted work. |
| of compensation clicking the "Add |) with entities as descri | 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 Prope | rty Patents & Copyri <u>c</u> | ghts |
| Do you have any | patents, whether plan | ned, pending or issued, br | oadly relevant to the work? Yes V No |

Bunch 2



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| Relationships not covered above |
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| Dr. Bunch has nothing to disclose. |

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Bunch 3



| Section 1. | Identifying Inform | nation | |
|--|------------------------------------|---|--|
| 1. Given Name (First Name) Donald | | 2. Surname (Last Name) Lappe' | 3. Date 25-May-2018 |
| 4. Are you the corresponding author? | | Yes ✓ No | Corresponding Author's Name Benjamin D. Horne |
| 5. Manuscript Title Extreme Erythro | | icrocytic Percentages are F | lighly Predictive of Morbidity and Mortality |
| 6. Manuscript Ider 120183-INS-CME | ntifying Number (if you kr :D-1 | now it) | |
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| Section 2. | The Work Under C | onsideration for Public | cation |
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| of compensation clicking the "Add |) with entities as descri | 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 re present during the 36 months prior to publication. |
| Section 4. | Intellectual Prope | rty Patents & Copyric | ghts |
| Do you have any | patents, whether plan | ned, pending or issued, br | oadly relevant to the work? Yes V No |

Lappe' 2



| Section 5. Polationships not solvered above | |
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| 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): | |
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| 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. | nts. |
| Section 6. Disclosure Statement | |
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| Dr. Lappe' has nothing to disclose. | |

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Lappe' 3



| Section 1. | Identifying Inform | ation | | |
|---|-----------------------------------|----------------------|--|------------------|
| 1. Given Name (Fi | rst Name) | 2. Surname (Last N | ame) 3. Date 25-May-2018 | |
| 4. Are you the cor | responding author? | Yes ✓ No | Corresponding Author's Name Benjamin D. Horne | |
| 5. Manuscript Title Extreme Erythro | | crocytic Percentag | s are Highly Predictive of Morbidity and Mortality | |
| 6. Manuscript Ider 120183-INS-CME | ntifying Number (if you kn D-1 | ow it) | | |
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| any aspect of the s statistical analysis, Are there any rel | ubmitted work (including | but not limited to g | es from a third party (government, commercial, private fants, data monitoring board, study design, manuscript p | |
| Section 3. | Relevant financial | activities outsid | the submitted work. | |
| of compensation |) with entities as descri | bed in the instruct | nte whether you have financial relationships (regains). Use one line for each entity; add as many lines at were present during the 36 months prior to | s as you need by |
| • | evant conflicts of intere | | No | |
| If yes, please fill o | out the appropriate info | ormation below. | | |
| Name of Entity | | Grant? Person | Non-Financial Other? Comments | |
| CareCentra | | | Three risk scores are lice royalty agreement to Ca | |
| | | | | |
| Section 4. | Intellectual Proper | ty Patents & C | pyrights | |
| Do you have any | patents, whether plani | ned, pending or iss | ued, broadly relevant to the work? Yes | No |

Anderson 2



| Section 5. Relationships not sovered above |
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| 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? |
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| Dr. Anderson reports other from CareCentra, outside the submitted work. |

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Anderson 3



| Section 1. | Identifying Inform | nation | |
|--|------------------------------------|---|--|
| 1. Given Name (First Name) Kirk | | 2. Surname (Last Name) Knowlton | 3. Date 25-May-2018 |
| 4. Are you the corresponding author? | | Yes ✓ No | Corresponding Author's Name Benjamin D. Horne |
| 5. Manuscript Title Extreme Erythroo | | icrocytic Percentages are F | lighly Predictive of Morbidity and Mortality |
| 6. Manuscript Ider 120183-INS-CME | ntifying Number (if you kr :D-1 | now it) | |
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| Section 2. | The Work Under C | onsideration for Public | ation |
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| Section 3. | Relevant financial | activities outside the s | ubmitted work. |
| of compensation clicking the "Add |) with entities as descri | 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 Prope | rty Patents & Copyric | yhts |
| Do you have any | patents, whether plan | ned, pending or issued, br | oadly relevant to the work? ☐ Yes ✓ No |

Knowlton 2



| Section 5. Relationships not sovered above |
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| 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? |
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| Dr. Knowlton has nothing to disclose. |

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Knowlton 3

STROBE Statement—checklist of items that should be included in reports of observational studies

| | Item No | Recommendation | Reported on page |
|------------------------|------------|--|------------------|
| Title and abstract | 1 | (a) Indicate the study's design with a commonly used term in the title | 1, 3 |
| | | or the abstract | |
| | | (b) Provide in the abstract an informative and balanced summary of | 3 |
| | | what was done and what was found | |
| Introduction | | | |
| Background/rationale | 2 | Explain the scientific background and rationale for the investigation being reported | 4-5 |
| Objectives | 3 | State specific objectives, including any prespecified hypotheses | 5, 15 |
| Methods | | | |
| Study design | 4 | Present key elements of study design early in the paper | 15 |
| Setting | 5 | Describe the setting, locations, and relevant dates, including periods of | 15 |
| - | | recruitment, exposure, follow-up, and data collection | |
| Participants | 6 | (a) Cohort study—Give the eligibility criteria, and the sources and | 15 |
| | | methods of selection of participants. Describe methods of follow-up | |
| | | Case-control study—Give the eligibility criteria, and the sources and | |
| | | methods of case ascertainment and control selection. Give the rationale | |
| | | for the choice of cases and controls | |
| | | Cross-sectional study—Give the eligibility criteria, and the sources and | |
| | | methods of selection of participants | |
| | | (b) Cohort study—For matched studies, give matching criteria and | N/A |
| | | number of exposed and unexposed | |
| | | Case-control study—For matched studies, give matching criteria and | |
| | | the number of controls per case | |
| Variables | 7 | Clearly define all outcomes, exposures, predictors, potential | 15-16 |
| | | confounders, and effect modifiers. Give diagnostic criteria, if | |
| | | applicable | |
| Data sources/ | 8* | For each variable of interest, give sources of data and details of | 16 |
| measurement | | methods of assessment (measurement). Describe comparability of | |
| | | assessment methods if there is more than one group | |
| Bias | 9 | Describe any efforts to address potential sources of bias | 17-18 |
| Study size | 10 | Explain how the study size was arrived at | 15 |
| Quantitative variables | 11 | Explain how quantitative variables were handled in the analyses. If | 16-18 |
| | | applicable, describe which groupings were chosen and why | |
| Statistical methods | 12 | (a) Describe all statistical methods, including those used to control for | 16-18 |
| | | confounding | |
| | | (b) Describe any methods used to examine subgroups and interactions | 16-17 |
| | | (c) Explain how missing data were addressed | 15 |
| | | (d) Cohort study—If applicable, explain how loss to follow-up was | 15 |
| | | addressed | |
| | | Case-control study—If applicable, explain how matching of cases and | |
| | | controls was addressed | |
| | | Cross-sectional study—If applicable, describe analytical methods | |
| | | taking account of sampling strategy | |
| | | (e) Describe any sensitivity analyses | N/A |

| Results | | | |
|------------------|-----|---|------------|
| Participants | 13* | (a) Report numbers of individuals at each stage of study—eg numbers | 15, Fig.6 |
| | | potentially eligible, examined for eligibility, confirmed eligible, included in the | |
| | | study, completing follow-up, and analysed | |
| | | (b) Give reasons for non-participation at each stage | 25 (Fig.6) |
| | | (c) Consider use of a flow diagram | Figure 6 |
| Descriptive | 14* | (a) Give characteristics of study participants (eg demographic, clinical, social) | 6 |
| data | | and information on exposures and potential confounders | |
| | | (b) Indicate number of participants with missing data for each variable of | 15 |
| | | interest | |
| | | (c) Cohort study—Summarise follow-up time (eg, average and total amount) | 15, Fig.5 |
| Outcome data | 15* | Cohort study—Report numbers of outcome events or summary measures over | 26-27 |
| | | time | |
| | | Case-control study—Report numbers in each exposure category, or summary | N/A |
| | | measures of exposure | |
| | | Cross-sectional study—Report numbers of outcome events or summary | N/A |
| | | measures | |
| Main results | 16 | (a) Give unadjusted estimates and, if applicable, confounder-adjusted estimates | 26-27 |
| | | and their precision (eg, 95% confidence interval). Make clear which | |
| | | confounders were adjusted for and why they were included | |
| | | (b) Report category boundaries when continuous variables were categorized | 16-17 |
| | | (c) If relevant, consider translating estimates of relative risk into absolute risk | 26-27 |
| | | for a meaningful time period | |
| Other analyses | 17 | Report other analyses done—eg analyses of subgroups and interactions, and | 7-8 |
| | | sensitivity analyses | |
| Discussion | | | |
| Key results | 18 | Summarise key results with reference to study objectives | 9 |
| Limitations | 19 | Discuss limitations of the study, taking into account sources of potential bias or | 12-13 |
| | | imprecision. Discuss both direction and magnitude of any potential bias | |
| Interpretation | 20 | Give a cautious overall interpretation of results considering objectives, | 13-14 |
| - | | limitations, multiplicity of analyses, results from similar studies, and other | |
| | | relevant evidence | |
| Generalisability | 21 | Discuss the generalisability (external validity) of the study results | 12-13 |
| Other informati | on | | |
| Funding | 22 | Give the source of funding and the role of the funders for the present study | 2, 16, 19 |
| | | and, if applicable, for the original study on which the present article is based | |

^{*}Give information separately for cases and controls in case-control studies and, if applicable, for exposed and unexposed groups in cohort and cross-sectional studies.

Note: An Explanation and Elaboration article discusses each checklist item and gives methodological background and published examples of transparent reporting. The STROBE checklist is best used in conjunction with this article (freely available on the Web sites of PLoS Medicine at http://www.plosmedicine.org/, Annals of Internal Medicine at http://www.annals.org/, and Epidemiology at http://www.epidem.com/). Information on the STROBE Initiative is available at www.strobe-statement.org.

Von Elm E, Altman DG, Egger M, Pocock SJ, Gøtzsche PC, Vandenbroucke JP; STROBE Initiative. The Strengthening the Reporting of Observational Studies in Epidemiology (STROBE) statement: guidelines for reporting observational studies. *Lancet* 2007; **370**:1453-7