# ICMJE DISCLOSURE FORM

**Date:** 4/11/2025

**Your Name:** Noely Evangelista Ferreira

**Manuscript Title:** Metagenomic detection of central nervous system infections missed by conventional testing

**Manuscript Number (if known):** 189295-INS-CRPH-RV-4

In the interest of transparency, we ask you to disclose all relationships/activities/interests listed below that are related to the content of your manuscript. "Related" means any relation with for-profit or not-for-profit third parties whose interests may be affected by the content of the manuscript. Disclosure represents a commitment to transparency and does not necessarily indicate a bias. If you are in doubt about whether to list a relationship/activity/interest, it is preferable that you do so.

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| **3** | Royalties or licenses | ☒ **None** | |
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| **8** | Patents planned, issued or pending | ☒ **None** | |
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# ICMJE DISCLOSURE FORM

**Date:** 4/11/2025

**Your Name:** Michael G. Berg

**Manuscript Title:** Metagenomic detection of central nervous system infections missed by conventional testing

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**Date:** 4/11/2025

**Your Name:** Antonio Charlys da Costa

**Manuscript Title:** Metagenomic detection of central nervous system infections missed by conventional testing

**Manuscript Number (if known):** 189295-INS-CRPH-RV-4

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# ICMJE DISCLOSURE FORM

**Date:** 4/11/2025

**Your Name:** Mary A. Rodgers

**Manuscript Title:** Metagenomic detection of central nervous system infections missed by conventional testing

**Manuscript Number (if known):** 189295-INS-CRPH-RV-4

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# ICMJE DISCLOSURE FORM

**Date:** 4/11/2025

**Your Name:** Esper G. Kallas

**Manuscript Title:** Metagenomic detection of central nervous system infections missed by conventional testing

**Manuscript Number (if known):** 189295-INS-CRPH-RV-4

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# ICMJE DISCLOSURE FORM

**Date:** 4/11/2025

**Your Name:** Cassia G. Terrasani Silveira

**Manuscript Title:** Metagenomic detection of central nervous system infections missed by conventional testing

**Manuscript Number (if known):** 189295-INS-CRPH-RV-4

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# ICMJE DISCLOSURE FORM

**Date:** 4/11/2025

**Your Name:** Mateus Vailant Thomazella

**Manuscript Title:** Metagenomic detection of central nervous system infections missed by conventional testing

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# ICMJE DISCLOSURE FORM

**Date:** 4/11/2025

**Your Name:** Ana Carolina Soares de Oliveira

**Manuscript Title:** Metagenomic detection of central nervous system infections missed by conventional testing

**Manuscript Number (if known):** 189295-INS-CRPH-RV-4

In the interest of transparency, we ask you to disclose all relationships/activities/interests listed below that are related to the content of your manuscript. "Related" means any relation with for-profit or not-for-profit third parties whose interests may be affected by the content of the manuscript. Disclosure represents a commitment to transparency and does not necessarily indicate a bias. If you are in doubt about whether to list a relationship/activity/interest, it is preferable that you do so.

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| | | | Click the tab key to add additional rows. |
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| **2** | Grants or contracts from any entity (if not indicated in item #1 above). | ☒ **None** | |
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| **3** | Royalties or licenses | ☒ **None** | |
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| **13** | Other financial or non-financial interests | ☒ **None** | |
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**Please place an "X" next to the following statement to indicate your agreement:**

☒ I certify that I have answered every question and have not altered the wording of any of the questions on this form.

# ICMJE DISCLOSURE FORM

**Date:** 4/11/2025

**Your Name:** Layla Honorato

**Manuscript Title:** Metagenomic detection of central nervous system infections missed by conventional testing

**Manuscript Number (if known):** 189295-INS-CRPH-RV-4

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# ICMJE DISCLOSURE FORM

**Date:** 4/11/2025

**Your Name:** Heuder G. O. Paião

**Manuscript Title:** Metagenomic detection of central nervous system infections missed by conventional testing

**Manuscript Number (if known):** 189295-INS-CRPH-RV-4

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# ICMJE DISCLOSURE FORM

**Date:** 4/11/2025

**Your Name:** Renan Barros Domingues

**Manuscript Title:** Metagenomic detection of central nervous system infections missed by conventional testing

**Manuscript Number (if known):** 189295-INS-CRPH-RV-4

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# ICMJE DISCLOSURE FORM

**Date:** 4/11/2025

**Your Name:** Carlos Senne

**Manuscript Title:** Metagenomic detection of central nervous system infections missed by conventional testing

**Manuscript Number (if known):** 189295-INS-CRPH-RV-4

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# ICMJE DISCLOSURE FORM

**Date:** 4/11/2025

**Your Name:** Marina F. Côrtes

**Manuscript Title:** Metagenomic detection of central nervous system infections missed by conventional testing

**Manuscript Number (if known):** 189295-INS-CRPH-RV-4

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# ICMJE DISCLOSURE FORM

**Date:** 4/11/2025

**Your Name:** Tania R. Tozetto-Mendoza

**Manuscript Title:** Metagenomic detection of central nervous system infections missed by conventional testing

**Manuscript Number (if known):** 189295-INS-CRPH-RV-4

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# ICMJE DISCLOSURE FORM

**Date:** 4/11/2025

**Your Name:** Hélio R. Gomes

**Manuscript Title:** Metagenomic detection of central nervous system infections missed by conventional testing

**Manuscript Number (if known):** 189295-INS-CRPH-RV-4

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| **3** | Royalties or licenses | ☒ **None** | |
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| **8** | Patents planned, issued or pending | ☒ **None** | |
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| **9** | Participation on a Data Safety Monitoring Board or Advisory Board | ☒ **None** | |
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**Please place an "X" next to the following statement to indicate your agreement:**

☒ I certify that I have answered every question and have not altered the wording of any of the questions on this form.

# ICMJE DISCLOSURE FORM

**Date:** 4/11/2025

**Your Name:** Maria Laura Mariano Matos

**Manuscript Title:** Metagenomic detection of central nervous system infections missed by conventional testing

**Manuscript Number (if known):** 189295-INS-CRPH-RV-4

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# ICMJE DISCLOSURE FORM

**Date:** 4/11/2025

**Your Name:** Geovani de Oliveira Ribeiro

**Manuscript Title:** Metagenomic detection of central nervous system infections missed by conventional testing

**Manuscript Number (if known):** 189295-INS-CRPH-RV-4

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# ICMJE DISCLOSURE FORM

**Date:** 4/11/2025

**Your Name:** Steven S. Witkin

**Manuscript Title:** Metagenomic detection of central nervous system infections missed by conventional testing

**Manuscript Number (if known):** 189295-INS-CRPH-RV-4

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# ICMJE DISCLOSURE FORM

**Date:** 4/11/2025

**Your Name:** Gavin A. Cloherty

**Manuscript Title:** Metagenomic detection of central nervous system infections missed by conventional testing

**Manuscript Number (if known):** 189295-INS-CRPH-RV-4

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# ICMJE DISCLOSURE FORM

**Date:** 4/11/2025

**Your Name:** Maria Cassia Mendes-Correa

**Manuscript Title:** Metagenomic detection of central nervous system infections missed by conventional testing

**Manuscript Number (if known):** 189295-INS-CRPH-RV-4

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