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.

1. Identifying information.
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# ICMJE Form for Disclosure of Potential Conflicts of Interest

## Section 1. Identifying Information

1. Given Name (First Name)  
Carlos  
2. Surname (Last Name)  
Vallejo  
3. Date  
28-March-2014  
4. Are you the corresponding author?  
☑ Yes  ☐ No  
5. Phase IV open-label study of the efficacy and safety of deferasirox after allogeneic stem cell transplantation  
6. Manuscript Identifying Number (if you know it)  
HAEMATOL/2014/105908

## Section 2. The Work Under Consideration for Publication

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

## Section 3. Relevant financial activities outside the submitted work.

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Dr. Vallejo 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) Montserrat
2. Surname (Last Name) Batlle
3. Date 27-March-2014
4. Are you the corresponding author? Yes ☐ No ☑
   Corresponding Author’s Name Carlos Vallejo
5. Phase IV open-label study of the efficacy and safety of deferasirox after allogeneic stem cell transplantation
6. Manuscript Identifying Number (if you know it) HAEMATOL/2014/105908

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Dr. Batlle has nothing to disclose.

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<thead>
<tr>
<th>1. Given Name (First Name)</th>
<th>2. Surname (Last Name)</th>
<th>3. Date</th>
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<tbody>
<tr>
<td>LOURDES</td>
<td>VAZQUEZ</td>
<td>27-March-2014</td>
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</table>

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

Corresponding Author's Name

<table>
<thead>
<tr>
<th>Corresponding Author's Name</th>
</tr>
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<tbody>
<tr>
<td>VALLEJO C.</td>
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5. Manuscript Title

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Dr. VAZQUEZ has nothing to disclose.

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### Section 1. Identifying Information

1. Given Name (First Name)  
   Carlos

2. Surname (Last Name)  
   Solano

3. Date  
   08-April-2014

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

5. Manuscript Title  
   Phase IV open-label study of the efficacy and safety of deferasirox after allogeneic stem cell transplantation

6. Manuscript Identifying Number (if you know it)  
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Dr Carlos Solano has nothing to disclose

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Section 1. Identifying Information

1. Given Name (First Name)  ANTONIA
2. Surname (Last Name)   SAMPOL
3. Date  28-March-2014

4. Are you the corresponding author?  ✔ No

Corresponding Author’s Name  CARLOS VALLEJO

5. Manuscript Title
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Dr. SAMPOL 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) RAFAEL F.
2. Surname (Last Name) DUARTE
3. Date 27-March-2014
4. Are you the corresponding author? ☑ Yes  ☐ No

**Corresponding Author’s Name**

CARLOS VALLEJO / ISIDRO JARQUE

5. Manuscript Title

Phase IV open-label study of the efficacy and safety of deferasirox after allogeneic stem cell transplantation

6. Manuscript Identifying Number (if you know it)

HAEMATOL/2014/105908

**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

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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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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. DUARTE 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) Dolores
2. Surname (Last Name) Hernandez-Maraver
3. Date 14-April-2014
4. Are you the corresponding author? Yes ☐ No ☑
   Corresponding Author’s Name Carlos Vallejo
5. Manuscript Title
   Phase IV open-label study of the efficacy and safety of deferasirox after allogeneic stem cell transplantation
6. Manuscript Identifying Number (if you know it)
   HAEMATOL/2014/105908

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

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

Section 4. Intellectual Property -- Patents & Copyrights

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Dr. Hernandez-Maraver has nothing to disclose.

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# ICMJE Form for Disclosure of Potential Conflicts of Interest

## Identifying Information

<table>
<thead>
<tr>
<th>Section 1</th>
<th></th>
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</thead>
<tbody>
<tr>
<td>1. Given Name (First Name)</td>
<td>JAVIER</td>
</tr>
<tr>
<td>2. Surname (Last Name)</td>
<td>LOPEZ-JIMENEZ</td>
</tr>
<tr>
<td>3. Date</td>
<td>30-March-2014</td>
</tr>
<tr>
<td>4. Are you the corresponding author?</td>
<td>Yes</td>
</tr>
<tr>
<td>Corresponding Author’s Name</td>
<td>CARLOS VALLEJO</td>
</tr>
<tr>
<td>5. Manuscript Title</td>
<td>Phase IV open-label study of the efficacy and safety of deferasirox after allogeneic stem cell transplantation</td>
</tr>
<tr>
<td>6. Manuscript Identifying Number (if you know it)</td>
<td>HAEMATOL/2014/105908</td>
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</tbody>
</table>

## 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

## Relevant financial activities outside the submitted work.

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## 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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Section 6. Disclosure Statement

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Dr. LOPEZ-JIMENEZ has nothing to disclose.

Evaluation and Feedback

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Montserrat 1
ICMJE Form for Disclosure of Potential Conflicts of Interest

**Section 1. Identifying Information**

1. Given Name (First Name) | Rovira
2. Surname (Last Name) | Montserrat
3. Date | 07-April-2014
4. Are you the corresponding author? | Yes [ ] No [✔]
5. Manuscript Title
   Phase IV open-label study of the efficacy and safety of deferasirox after allogeneic stem cell transplantation
6. Manuscript Identifying Number (if you know it)
   HAEMATOL/2014/105908

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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. Montserrat has nothing to disclose.

Evaluation and Feedback

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Section 1. Identifying Information

1. Given Name (First Name)  
Santiago

2. Surname (Last Name)  
Jimenez

3. Date  
28-March-2014

4. Are you the corresponding author?  
☑ No

Corresponding Author’s Name  
Carlos Vallejo

5. Manuscript Title  
Phase IV open-label study of the efficacy and safety of deferasirox after allogeneic stem cell transplantation

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Dr. Jimenez has nothing to disclose.

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   **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
ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name) DAVID
2. Surname (Last Name) VALCARCEL
3. Date 04-April-2014
4. Are you the corresponding author? ☑ Yes ☐ No
   Corresponding Author’s Name CARLOS VALLEJO
5. Manuscript Title Phase IV open-label study of the efficacy and safety of deferasirox after allogeneic stem cell transplantation
6. Manuscript Identifying Number (if you know it) HAEMATOL/2014/105908

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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Section 4. Intellectual Property -- Patents & Copyrights

Do you have any patents, whether planned, pending or issued, broadly relevant to the work? ☐ Yes ☑ No
ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 5. Relationships not covered above

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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Based on the above disclosures, this form will automatically generate a disclosure statement, which will appear in the box below.

Dr. VALCARCEL reports other from NOVARTIS, from null, outside the submitted work.

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<td>BELLOCH UGARTE</td>
<td>07-April-2014</td>
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4. Are you the corresponding author? □ Yes ✔ No  

5. Phase IV open-label study of the efficacy and safety of deferasirox after allogeneic stem cell transplantation  

6. Manuscript Identifying Number (if you know it)  
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### Section 2. The Work Under Consideration for Publication

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

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### 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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Section 6. Disclosure Statement

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Dr. BELLOCH UGARTE 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) MONICA
2. Surname (Last Name) JIMENEZ
3. Date 07-April-2014
4. Are you the corresponding author? Yes ☑ No
5. Manuscript Title
   Phase IV open-label study of the efficacy and safety of deferasirox after allogeneic stem cell transplantation
6. Manuscript Identifying Number (if you know it)
   HAEMATOL/2014/105908

**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. JIMENEZ reports personal fees from NOVARTIS FARMACEUTICA SPAIN, during the conduct of the study; personal fees from NOVARTIS FARMACEUTICA, 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)  Isidro
2. Surname (Last Name)  Jarque
3. Date  04-April-2014
4. Are you the corresponding author?  Yes  No  ✔

Corresponding Author's Name  Carlos Vallejo

5. Manuscript Title  Phase IV open-label study of the efficacy and safety of deferasirox after allogeneic stem cell transplantation
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Dr. Jarque has nothing to disclose.

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