ICMJE Form for Disclosure of Potential Conflicts of Interest

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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5. Relationships not covered above.

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Pending: the patent has been filed but not issued
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Royalties: Funds are coming in to you or your institution due to your patent

Barta
ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)  Stefan
2. Surname (Last Name)  Barta
3. Date  27-June-2014
4. Are you the corresponding author?  Yes  No

5. Manuscript Title
A New Prognostic Score for AIDS-Related Lymphomas in the Rituximab-Era

6. Manuscript Identifying Number (if you know it)
HAEMATOL/2014/111112

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.

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Are there any relevant conflicts of interest?  Yes  No

Section 4. Intellectual Property -- Patents & Copyrights

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

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

Dr. Barta 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)  
   Xiaonan

2. Surname (Last Name)  
   Xue

3. Date  
   25-June-2014

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

5. Manuscript Title  
   A New Prognostic Score for AIDS-Related Lymphomas in the Rituximab-Era

6. Manuscript Identifying Number (if you know it)  
   HAEMATOL/2014/111112

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ICMJE Form for Disclosure of Potential Conflicts of Interest

**Section 1. Identifying Information**

1. Given Name (First Name)  
   Dan  

2. Surname (Last Name)  
   Wang  

3. Date  
   26-June-2014  

4. Are you the corresponding author?  
   ✔ No  

   Corresponding Author’s Name  
   Stefan K. Barta  

5. Manuscript Title  
   A New Prognostic Score for AIDS-Related Lymphomas in the Rituximab-Era  

6. Manuscript Identifying Number (if you know it)  
   HAEMATOL/2014/111112

**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.)?  

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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?  
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Dr. Wang 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)  
   Jeannette

2. Surname (Last Name)  
   Lee

3. Date  
   24-June-2014

4. Are you the corresponding author?  
   ✔ No

Corresponding Author’s Name  
Stefan Barta

5. Manuscript Title  
   A New Prognostic Score for AIDS-Related Lymphomas in the Rituximab-Era

6. Manuscript Identifying Number (if you know it)  
   HAEMATOL/2014/111112

Section 2. The Work Under Consideration for Publication

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   ✔ No

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Dr. Lee has nothing to disclose.

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Kaplan 1
ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name) Lawrence
2. Surname (Last Name) Kaplan
3. Date 27-June-2014
4. Are you the corresponding author? ☑ No
5. Manuscript Title A New Prognostic Score for AIDS-Related Lymphomas in the Rituximab-Era
6. Manuscript Identifying Number (if you know it) HAEMATOL/2014/111112

Section 2. The Work Under Consideration for Publication

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Are there any relevant conflicts of interest? ☑ No

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Dr. Kaplan has nothing to disclose.

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- **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 Information**

1. Given Name (First Name)  
   Josep-Maria

2. Surname (Last Name)  
   Ribera

3. Date  
   24-June-2014

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

   Corresponding Author’s Name  
   Stefan K Barta

5. Manuscript Title  
   A New Prognostic Score for AIDS-Related Lymphomas in the Rituximab-Era

6. Manuscript Identifying Number (if you know it)  
   HAEMATOL/2014/111112

**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.**

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Are there any relevant conflicts of interest?  
   [ ] Yes  
   ✔ No

**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. Ribera 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)  
   Albert

2. Surname (Last Name)  
   Oriol

3. Date  
   23-June-2014

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

5. Manuscript Title  
   A New Prognostic Score for AIDS-Related Lymphomas in the Rituximab-Era

6. Manuscript Identifying Number (if you know it)  
   HAEMATOL/2014/111112

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

## 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. Oriol 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) Michele
2. Surname (Last Name) Spina
3. Date 23-June-2014
4. Are you the corresponding author? ☑ No
Corresponding Author’s Name Stefan K. Barta

5. Manuscript Title
A New Prognostic Score for AIDS-Related Lymphomas in the Rituximab-Era

6. Manuscript Identifying Number (if you know it)
HAEMATOL/2014/111112

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Are there any relevant conflicts of interest? ☑ No

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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
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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

| 1. Given Name (First Name)       | Umberto       |
| 2. Surname (Last Name)          | Tirelli       |
| 3. Date                          | 23-June-2014  |
| 4. Are you the corresponding author? | Yes  ✔ No |

Corresponding Author’s Name: Stefan K. Barta

5. Manuscript Title
A New Prognostic Score for AIDS-Related Lymphomas in the Rituximab-Era

6. Manuscript Identifying Number (if you know it)
HAEMATOL/2014/111112

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

Section 4. Intellectual Property -- Patents & Copyrights

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

Section 1. Identifying Information

1. Given Name (First Name)  
Francois

2. Surname (Last Name)  
Boue

3. Date  
25-June-2014

4. Are you the corresponding author?  
☑ No

Corresponding Author’s Name  
Stefan K. Barta

5. Manuscript Title  
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6. Manuscript Identifying Number (if you know it)  
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☑ No

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Dr. Boue 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)  
Wyndham

2. Surname (Last Name)  
Wilson

3. Date  
25-June-2014

4. Are you the corresponding author?  
☑ No

Corresponding Author’s Name
Stefan K. Barta

5. Manuscript Title
A New Prognostic Score for AIDS-Related Lymphomas in the Rituximab-Era

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

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Section 1: Identifying Information
1. Given Name (First Name)  Chandra
2. Surname (Last Name)  Iyer
3. Date  24.6.2014
4. Are you the corresponding author?  No

5. Manuscript Title
A New Prognostic Score for AIDS-Related Lymphomas in the Rituximab-Era
6. Manuscript Identifying Number (if known)
HAEMATOL/2014/111112

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?  No

Section 3: Relevant financial activities outside the submitted work.
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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
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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Cologne, 24.6.2014

[Signature]

[Name]

Uniklinik Köln
Klinik für Innere Medizin
Dr. Christoph Wyen
Infektionsklinik, Abt. 50F18
Kerpener Str. 62, 50937 Köln
Tel.: (0221) 478-4433
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**Royalties:** Funds are coming in to you or your institution due to your patent
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Section 1. Identifying Information

1. Given Name (First Name)  Kieron
2. Surname (Last Name)  Dunleavy
3. Date  25-June-2014
4. Are you the corresponding author?  Yes ☐ No ☑
   Corresponding Author’s Name  Stefan K. Barta
5. Manuscript Title  A New Prognostic Score for AIDS-Related Lymphomas in the Rituximab-Era
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Are there any relevant conflicts of interest?  Yes ☐ No ☑

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Dr. Dunleavy has nothing to disclose.

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Section 1. Identifying Information

1. Given Name (First Name)  Ariela
2. Surname (Last Name)  Noy
3. Date  27-June-2014
4. Are you the corresponding author?  Yes  ✔  No

Corresponding Author’s Name  Stephan Barta

5. Manuscript Title  A New Prognostic Score for AIDS-Related Lymphomas in the Rituximab-Era

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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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Dr. Noy reports grants from NIH, during the conduct of the study; .

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Sparano
## Section 1. Identifying Information

1. Given Name (First Name) | Joseph
2. Surname (Last Name) | Sparano
3. Date | 21-June-2014

4. Are you the corresponding author? | Yes ✔

5. Manuscript Title
   A New Prognostic Score for AIDS-Related Lymphomas in the Rituximab-Era

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