

ICMJE Form for Disclosure of Potential Conflicts of Interest

Instructions

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4. Intellectual Property.

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) Susanne	2. Surname (Last Name) Van Santen	3. Date 14-April-2014
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Van der Ven
5. Manuscript Title Hematological parameters predicting a response to oral iron therapy in chronic inflammation'		
6. Manuscript Identifying Number (if you know it) HAEMATOL/2014/106799		

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Section 1. Identifying Information

1. Given Name (First Name)
Quirijn

2. Surname (Last Name)
de Mast

3. Date
09-April-2014

4. Are you the corresponding author?

Yes No

Corresponding Author's Name
André J.A.M. van der Ven

5. Manuscript Title

Hematological parameters predicting a response to oral iron therapy in chronic inflammation

6. Manuscript Identifying Number (if you know it)

HAEMATOL/2014/106799

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Dr. de Mast has nothing to disclose.

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1. Given Name (First Name) Janine	2. Surname (Last Name) Oosting	3. Date 14-April-2014
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Susanne van Santen
5. Manuscript Title Hematological parameters predicting a response to oral iron therapy in chronic inflammation		
6. Manuscript Identifying Number (if you know it) HAEMATOL/2014/106799		

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Dr. Oosting has nothing to disclose.

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1. Given Name (First Name) Annelies	2. Surname (Last Name) van Ede	3. Date 09-April-2014
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name S. van Santen
5. Manuscript Title Hematological parameters predicting a response to oral iron therapy in chronic inflammation		
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4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Andre van der Ven
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Are there any relevant conflicts of interest? Yes No

If yes, please fill out the appropriate information below.

Name of Entity	Grant?	Personal Fees?	Non-Financial Support?	Other?	Comments
Hepcidinanalysis.com	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	I am an employee of the Radboud university medical center (Nijmegen, The Netherlands) that amongst others offers hepcidin measurements to the medical scientific and pharmaceutical communities through a service unit called 'hepcidinanalysis.com' on a fee per sample basis

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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

ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name) andre

2. Surname (Last Name) van der ven

3. Date 08-April-2014

4. Are you the corresponding author? Yes No

5. Manuscript Title
'Hematological parameters predicting a response to oral iron therapy in chronic inflammation'

6. Manuscript Identifying Number (if you know it)
HAEMATOL/2014/106799

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.

Name of Entity	Grant?	Personal Fees?	Non-Financial Support?	Other?	Comments
sysmex inc	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	unrestricted grant

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 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?

- 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. van der ven reports grants from sysmex inc, outside the submitted work; .

Evaluation and Feedback

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