

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)
Fabrice

2. Surname (Last Name)
Danjou

3. Date
20-August-2014

4. Are you the corresponding author? 1 Yes 0 No

5. Manuscript Title
A genetic score for the prediction of beta-thalassemia severity

6. Manuscript Identifying Number (if you know it)
HAEMATOL/2014/113886

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Dr. Danjou has nothing to disclose.

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Section 1. Identifying Information

1. Given Name (First Name) Marcella	2. Surname (Last Name) Francavilla	3. Date 20-August-2014
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name DANJOU Fabrice
5. Manuscript Title A genetic score for the prediction of beta-thalassemia severity		
6. Manuscript Identifying Number (if you know it) HAEMATOL/2014/113886		

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1. Given Name (First Name) Franco	2. Surname (Last Name) Anni	3. Date 20-August-2014
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name DANJOU Fabrice
5. Manuscript Title A genetic score for the prediction of beta-thalassemia severity		
6. Manuscript Identifying Number (if you know it) HAEMATOL/2014/113886		

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Section 1. Identifying Information

1. Given Name (First Name) Stefania	2. Surname (Last Name) Satta	3. Date 20-August-2014
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name DANJOU Fabrice
5. Manuscript Title A genetic score for the prediction of beta-thalassemia severity		
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1. Given Name (First Name) Franca-Rosa	2. Surname (Last Name) Demartis	3. Date 20-August-2014
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1. Given Name (First Name) Lucia	2. Surname (Last Name) Perseu	3. Date 20-August-2014
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name DANJOU Fabrice
5. Manuscript Title A genetic score for the prediction of beta-thalassemia severity		
6. Manuscript Identifying Number (if you know it) HAEMATOL/2014/113886		

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

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Section 6. Disclosure Statement

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Dr. Perseu 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) Matteo	2. Surname (Last Name) Manca	3. Date 20-August-2014
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name DANJOU Fabrice
5. Manuscript Title A genetic score for the prediction of beta-thalassemia severity		
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Dr. Manca 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) Maria Carla	2. Surname (Last Name) Sollaino	3. Date 20-August-2014
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name DANJOU Fabrice
5. Manuscript Title A genetic score for the prediction of beta-thalassemia severity		
6. Manuscript Identifying Number (if you know it) HAEMATOL/2014/113886		

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Dr. Sollaino 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) Laura	2. Surname (Last Name) Manunza	3. Date 20-August-2014
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name DANJOU Fabrice
5. Manuscript Title A genetic score for the prediction of beta-thalassemia severity		
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Dr. Manunza has nothing to disclose.

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Section 1. Identifying Information

1. Given Name (First Name) Elisabetta	2. Surname (Last Name) Mereu	3. Date 20-August-2014
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name DANJOU Fabrice
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4. Intellectual Property.

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name) Serge	2. Surname (Last Name) Pissard	3. Date 20-August-2014
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name DANJOU Fabrice
5. Manuscript Title A genetic score for the prediction of beta-thalassemia severity		
6. Manuscript Identifying Number (if you know it) HAEMATOL/2014/113886		

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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Dr. Pissard 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) Philippe	2. Surname (Last Name) Joly	3. Date 20-August-2014
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name DANJOU Fabrice
5. Manuscript Title A genetic score for the prediction of beta-thalassemia severity		
6. Manuscript Identifying Number (if you know it) HAEMATOL/2014/113886		

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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Dr. Joly 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) Isabelle	2. Surname (Last Name) Thuret	3. Date 20-August-2014
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name DANJOU Fabrice
5. Manuscript Title A genetic score for the prediction of beta-thalassemia severity		
6. Manuscript Identifying Number (if you know it) HAEMATOL/2014/113886		

Section 2. The Work Under Consideration for Publication

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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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Dr. Thuret 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) Raffaella	2. Surname (Last Name) Origa	3. Date 20-August-2014
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name DANJOU Fabrice
5. Manuscript Title A genetic score for the prediction of beta-thalassemia severity		
6. Manuscript Identifying Number (if you know it) HAEMATOL/2014/113886		

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Do you have any patents, whether planned, pending or issued, broadly relevant to the work? Yes No

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Dr. Origa has nothing to disclose.

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Section 1. Identifying Information

1. Given Name (First Name) Joseph	2. Surname (Last Name) Borg	3. Date 20-August-2014
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name DANJOU Fabrice
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Dr. Borg has nothing to disclose.

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1. Given Name (First Name) Gian Luca	2. Surname (Last Name) Forni	3. Date 20-August-2014
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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. Forni 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) Antonio	2. Surname (Last Name) Piga	3. Date 20-August-2014
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name DANJOU Fabrice
5. Manuscript Title A genetic score for the prediction of beta-thalassemia severity		
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Dr. Piga 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) Maria Eliana	2. Surname (Last Name) Lai	3. Date 20-August-2014
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name DANJOU Fabrice
5. Manuscript Title A genetic score for the prediction of beta-thalassemia severity		
6. Manuscript Identifying Number (if you know it) HAEMATOL/2014/113886		

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Dr. Lai 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) Catherine	2. Surname (Last Name) Badens	3. Date 20-August-2014
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name DANJOU Fabrice
5. Manuscript Title A genetic score for the prediction of beta-thalassemia severity		
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1. Given Name (First Name) Paolo	2. Surname (Last Name) Moi	3. Date 20-August-2014
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name DANJOU Fabrice
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ICMJE Form for Disclosure of Potential Conflicts of Interest

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1. Given Name (First Name) Renzo	2. Surname (Last Name) Galanello	3. Date 20-August-2014
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