

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.

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4. Intellectual Property.

This section asks about patents and copyrights, whether pending, issued, licensed and/or receiving royalties.

5. Relationships not covered above.

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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) Norbert | 2. Surname (Last Name) Gorin | 3. Date 15-September-2014 |
| 4. Are you the corresponding author? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No | | |
| 5. Manuscript Title T Replete Haploidentical versus Autologous Stem Cell Transplantation in Adult Acute Leukemia: A Matched Pair Analysis | | |
| 6. Manuscript Identifying Number (if you know it) HAEMATOL/2014/111450 | | |

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Are there any relevant conflicts of interest? Yes No

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Dr. Gorin has nothing to disclose.

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Section 1. Identifying Information

| | | |
|--|---|---|
| 1. Given Name (First Name) Myriam | 2. Surname (Last Name) LABOPIN | 3. Date 15-September-2014 |
| 4. Are you the corresponding author? | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | Corresponding Author's Name Norbert Claude GORIN |
| 5. Manuscript Title Haplo identical versus Autologous Stem Cell Transplantation in adult acute leukemias. A pair match analysis | | |
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Dr. LABOPIN has nothing to disclose.

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Section 1. Identifying Information

1. Given Name (First Name)

Simona

2. Surname (Last Name)

Piemontese

3. Date

16-September-2014

4. Are you the corresponding author?

Yes No

Corresponding Author's Name

Gorin Norbert-Claude

5. Manuscript Title

Haploidentical versus autologous stem cell transplantation in adult acute leukemias. A pair match analysis

6. Manuscript Identifying Number (if you know it)

HAEMATOL/2014/111450

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| | | |
|---|----------------------------------|--|
| 1. Given Name (First Name) William | 2. Surname (Last Name) Arcese | 3. Date 15-September-2014 |
| 4. Are you the corresponding author? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | | Corresponding Author's Name Norbert Gorin |
| 5. Manuscript Title Haplo identical versus Autologous Stem Cell Transplantation in adult acute leukemias. A pair match analysis. | | |
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Section 1. Identifying Information

1. Given Name (First Name) STELLA 2. Surname (Last Name) SANTARONE 3. Date 15 SEPT. 2014

4. Are you the corresponding author? Yes No

5. Manuscript Title

HAPLOIDENTICAL VERSUS AUTOLOGOUS STEM CELL TRANSPLANTATION
IN ADULT ACUTE LEUKEMIAS - A PAIR MATCHED
ANALYSIS

6. Manuscript Identifying Number (if you know it)

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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) He | 2. Surname (Last Name) Huang | 3. Date 16-September-2014 |
| 4. Are you the corresponding author? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | | Corresponding Author's Name Norbert-Claude Gorin |
| 5. Manuscript Title Haploidentical versus autologous stem cell transplantation in adult acute leukemias. A pair match analysis. | | |
| 6. Manuscript Identifying Number (if you know it) HAEMATOL/2014/111450 | | |

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

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

Dr. Huang 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) Giovanna | 2. Surname (Last Name) Meloni | 3. Date 16-September-2014 |
| 4. Are you the corresponding author? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | | Corresponding Author's Name Norbet Gorin |
| 5. Manuscript Title T Replete Haploidentical versus Autologous Stem Cell Transplantation in Adult Acute Leukemia: A Matched Pair Analysis | | |
| 6. Manuscript Identifying Number (if you know it) HAEMATOL/2014/111450 | | |

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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

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Section 6. Disclosure Statement

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Dr. Meloni 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) Felicetto | 2. Surname (Last Name) Ferrara | 3. Date 15-September-2014 |
| 4. Are you the corresponding author? | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | Corresponding Author's Name Norbert Gorin |
| 5. Manuscript Title | | |
| 6. Manuscript Identifying Number (if you know it) HAEMATOL/2014/111450 | | |

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

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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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Section 6. Disclosure Statement

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Dr. Ferrara 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) Dietrich | 2. Surname (Last Name) Beelen | 3. Date 14-October-2014 |
| 4. Are you the corresponding author? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | | Corresponding Author's Name Gorin N |
| 5. Manuscript Title T Replete Haploidentical versus Autologous Stem Cell Transplantation in Adult Acute Leukemia: A Matched Pair Analysis | | |
| 6. Manuscript Identifying Number (if you know it) HAEMATOL/2014/111450 | | |

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

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

Dr. Beelen 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) MIGUEL | 2. Surname (Last Name) SANZ | 3. Date 15-September-2014 |
| 4. Are you the corresponding author? | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | Corresponding Author's Name Norbert-Claude Gorin |
| 5. Manuscript Title Haploidentical versus autologous stem cell transplantation in adult acute leukemias. A pair match analysis | | |
| 6. Manuscript Identifying Number (if you know it) HAEMATOL/2014/111450 | | |

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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

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Dr. SANZ 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) Andrea | 2. Surname (Last Name) Bacigalupo | 3. Date 15-September-2014 |
| 4. Are you the corresponding author? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | | Corresponding Author's Name Norbert Gorin |
| 5. Manuscript Title T Replete Haploidentical versus Autologous Stem Cell Transplantation in Adult Acute Leukemia: A Matched Pair Analysis | | |
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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

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Dr. Bacigalupo has nothing to disclose.

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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.

2. The work under consideration for publication.

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4. Intellectual Property.

This section asks about patents and copyrights, whether pending, issued, licensed and/or receiving royalties.

5. Relationships not covered above.

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Other: Anything not covered under the previous three boxes

Pending: The patent has been filed but not issued

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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) Fabio | 2. Surname (Last Name) Ciceri | 3. Date 18-September-2014 |
| 4. Are you the corresponding author? | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | Corresponding Author's Name Gorin |
| 5. Manuscript Title T Replete Haploidentical versus Autologous Stem Cell Transplantation in Adult Acute Leukemia: A Matched Pair Analysis | | |
| 6. Manuscript Identifying Number (if you know it) HAEMATOL/2014/111450 | | |

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. Ciceri 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) Audrey | 2. Surname (Last Name) Mailhol | 3. Date 20-September-2014 |
| 4. Are you the corresponding author? | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | Corresponding Author's Name Gorin Norbert-Claude |
| 5. Manuscript Title Haploidentical versus autologous stem cell transplantation in adult acute leukemias. A pair match analysis | | |
| 6. Manuscript Identifying Number (if you know it) HAEMATOL/2014/111450 | | |

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

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Audrey Mailhol 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) Arnon | 2. Surname (Last Name) Nagler | 3. Date 16-September-2014 |
| 4. Are you the corresponding author? | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | Corresponding Author's Name GORIN Norbert-claude |
| 5. Manuscript Title Haploidentical versus autologous stem cell transplantation in adult acute leukemias. A pair match analysis. | | |
| 6. Manuscript Identifying Number (if you know it) HAEMATOL/2014/111450 | | |

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

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Dr. Nagler 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) Mohamad | 2. Surname (Last Name) MOHTY | 3. Date 15-September-2014 |
| 4. Are you the corresponding author? | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | Corresponding Author's Name GORIN Norbert-Claude |
| 5. Manuscript Title Haploidentical versus autologous stem cell transplantation in adult acute leukemias. A pair match analysis. | | |
| 6. Manuscript Identifying Number (if you know it) HAEMATOL/2014/111450 | | |

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Are there any relevant conflicts of interest? Yes No

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Dr. MOHTY has nothing to disclose.

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