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

5. Relationships not covered above.

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)
   Christopher Chin Keong

2. Surname (Last Name)
   Liam

3. Date
   30-June-2020

4. Are you the corresponding author?
   ✔ Yes  □ No

5. Manuscript Title
   Autologous stem cell transplantation outcome for Multiple Myeloma in a tertiary referral centre

6. Manuscript Identifying Number (if you know it)

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?
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   □ Yes   ✔ No

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. Liam 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) Yang Liang
2. Surname (Last Name) Boo
3. Date 30-June-2020
4. Are you the corresponding author? ☑ No
5. Manuscript Title Autologous stem cell transplantation outcome for Multiple Myeloma in a tertiary referral centre
6. Manuscript Identifying Number (if you know it)

Section 2. The Work Under Consideration for Publication

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Dr. Boo has nothing to disclose.

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Section 1. Identifying Information

1. Given Name (First Name)  
Kim Wah

2. Surname (Last Name)  
Ho

3. Date  
30-June-2020

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

Corresponding Author’s Name  
Christopher Chin Keong Liam

5. Manuscript Title  
Autologous stem cell transplantation outcome for Multiple Myeloma in a tertiary referral centre

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Dr. Ho has nothing to disclose.

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# ICMJE Form for Disclosure of Potential Conflicts of Interest

## Identifying Information

1. Given Name (First Name)  
Jerome Tsen Chuen

2. Surname (Last Name)  
Tan

3. Date  
30-June-2020

4. Are you the corresponding author?  
✓ No  
Corresponding Author’s Name  
Christopher Chin Keong Liam

5. Manuscript Title  
Autologous stem cell transplantation outcome for Multiple Myeloma in a tertiary referral centre

6. Manuscript Identifying Number (if you know it)

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✓ No

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Dr. Tan has nothing to disclose.

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**Section 1. Identifying Information**

1. Given Name (First Name)  
   Ngee Siang

2. Surname (Last Name)  
   Lau

3. Date  
   30-June-2020

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

   Corresponding Author's Name  
   Christopher Chin Keong Liam

5. Manuscript Title  
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   Yes [ ]  No [x]

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Do you have any patents, whether planned, pending or issued, broadly relevant to the work?  
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Lau
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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)  
   Kian Boon

2. Surname (Last Name)  
   Law

3. Date  
   30-June-2020

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

   Corresponding Author's Name  
   Christopher Chin Keong Liam

5. Manuscript Title  
   Autologous stem cell transplantation outcome for Multiple Myeloma in a tertiary referral centre

6. Manuscript Identifying Number (if you know it)

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 ☑
ICMJE Form for Disclosure of Potential Conflicts of Interest

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Section 6. Disclosure Statement

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Dr. Law 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) Yi Lin
2. Surname (Last Name) Lee
3. Date 30-June-2020
4. Are you the corresponding author? ☑ No
5. Manuscript Title Autologous stem cell transplantation outcome for Multiple Myeloma in a tertiary referral centre
6. Manuscript Identifying Number (if you know it)

Section 2. The Work Under Consideration for Publication

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)  Tee Chuan
2. Surname (Last Name)  Ong
3. Date  30-June-2020
4. Are you the corresponding author?  Yes  No  ✔
   Corresponding Author’s Name  Christopher Chin Keong Liam
5. Manuscript Title  Autologous stem cell transplantation outcome for Multiple Myeloma in a tertiary referral centre
6. Manuscript Identifying Number (if you know it)

Section 2. The Work Under Consideration for Publication

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Section 1. Identifying Information

<table>
<thead>
<tr>
<th>1. Given Name (First Name)</th>
<th>2. Surname (Last Name)</th>
<th>3. Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>Jameela</td>
<td>Sathar</td>
<td>30-June-2020</td>
</tr>
</tbody>
</table>

4. Are you the corresponding author? [☐ Yes] [✓ No]  
Corresponding Author’s Name: Christopher Chin Keong Liam

5. Manuscript Title  
Autologous stem cell transplantation outcome for Multiple Myeloma in a tertiary referral centre

6. Manuscript Identifying Number (if you know it)

Section 2. The Work Under Consideration for Publication

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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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Dr. Sathar 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)  
   Sharifah Shahnaz

2. Surname (Last Name)  
   Syed Abdul Kadir

3. Date  
   30-June-2020

4. Are you the corresponding author?  
   ✔ No

5. Manuscript Title  
   Autologous stem cell transplantation outcome for Multiple Myeloma in a tertiary referral centre

6. Manuscript Identifying Number (if you know it)

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Are there any relevant conflicts of interest?  
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Dr. Syed Abdul Kadir 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)  Sen Mui
2. Surname (Last Name)  Tan
3. Date  30-June-2020
4. Are you the corresponding author?  Yes  No  ✔

Sections 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.)?  Yes  No  ✔

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