

## ICMJE Form for Disclosure of Potential Conflicts of Interest

### Instructions

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## ICMJE Form for Disclosure of Potential Conflicts of Interest

### Section 1. Identifying Information

1. Given Name (First Name)

Ying Shi

2. Surname (Last Name)

Ho

3. Date

24-December-2020

4. Are you the corresponding author?

Yes  No

5. Manuscript Title

Higher Starting Dose of Ciclosporin Optimized Therapeutic Levels in alloHSC T Patients Receiving Phenytoin for Busulfan-induced Seizure Prophylaxis

6. Manuscript Identifying Number (if you know it)

BCT-2020-022

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1. Given Name (First Name) Vin Cci	2. Surname (Last Name) Ng	3. Date 24-December-2020
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Ying Shi Ho
5. Manuscript Title Higher Starting Dose of Ciclosporin Optimized Therapeutic Levels in alloH SCT Patients Receiving Phenytoin for Busulfan-induced Seizure Prophylaxis		
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1. Given Name (First Name) Mui Fong	2. Surname (Last Name) Chong	3. Date 24-December-2020
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Ying Shi Ho
5. Manuscript Title Higher Starting Dose of Ciclosporin Optimized Therapeutic Levels in alloH SCT Patients Receiving Phenytoin for Busulfan-induced Seizure Prophylaxis		
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