

## ICMJE DISCLOSURE FORM

Date: 15/08/2021  
 Your Name: SHARAT DAMODAR  
 Manuscript Title: Standardization and Accreditation in Haemopoietic Stem Cell Transplantation – an Asia Pacific perspective  
 Manuscript number (if known): BCT-2021-015

In the interest of transparency, we ask you to disclose all relationships/activities/interests listed below that are related to the content of your manuscript. “Related” means any relation with for-profit or not-for-profit third parties whose interests may be affected by the content of the manuscript. Disclosure represents a commitment to transparency and does not necessarily indicate a bias. If you are in doubt about whether to list a relationship/activity/interest, it is preferable that you do so.

The following questions apply to the author’s relationships/activities/interests as they relate to the **current manuscript only**.

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In item #1 below, report all support for the work reported in this manuscript without time limit. For all other items, the time frame for disclosure is the past 36 months.

		Name all entities with whom you have this relationship or indicate none (add rows as needed)	Specifications/Comments (e.g., if payments were made to you or to your institution)
<b>Time frame: Since the initial planning of the work</b>			
1	All support for the present manuscript (e.g., funding, provision of study materials, medical writing, article processing charges, etc.) <b>No time limit for this item.</b>	__X__ None	
<b>Time frame: past 36 months</b>			
2	Grants or contracts from any entity (if not indicated in item #1 above).	__X__ None	
3	Royalties or licenses	__X__ None	

4	Consulting fees	<input checked="" type="checkbox"/> None	
5	Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or educational events	<input checked="" type="checkbox"/> None	
6	Payment for expert testimony	<input checked="" type="checkbox"/> None	
7	Support for attending meetings and/or travel	<input checked="" type="checkbox"/> None	
8	Patents planned, issued or pending	<input checked="" type="checkbox"/> None	
9	Participation on a Data Safety Monitoring Board or Advisory Board	<input checked="" type="checkbox"/> None	
10	Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid	<input checked="" type="checkbox"/> None	
11	Stock or stock options	<input checked="" type="checkbox"/> None	
12	Receipt of equipment, materials, drugs, medical writing, gifts or other services	<input checked="" type="checkbox"/> None	
13	Other financial or non-financial interests	<input checked="" type="checkbox"/> None	

Please place an "X" next to the following statement to indicate your agreement:

I certify that I have answered every question and have not altered the wording of any of the questions on this form.

## ICMJE DISCLOSURE FORM

Date: 26 Aug 2021

Your Name: David D Ma

Manuscript Title: Standardization and Accreditation in Haemopoietic Stem Cell Transplantation – an Asia Pacific perspective

Manuscript number (if known): BCT-2021-015

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<b>Time frame: past 36 months</b>			
2	Grants or contracts from any entity (if not indicated in item #1 above).	___ Yes	Grants from not for profits and pharmaceutical organizations for research projects --- unrelated to this manuscript
3	Royalties or licenses	___ None	

4	Consulting fees	___ None	
5	Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or educational events	___ None	
6	Payment for expert testimony	___ None	
7	Support for attending meetings and/or travel	___ None	
8	Patents planned, issued or pending	Yes	Patent on novel diagnostic tests and treatment for AML for work not related to this submitted manuscript
9	Participation on a Data Safety Monitoring Board or Advisory Board	___ None	
10	Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid	Yes	Co-chair of GENA committee of WBMT (unpaid) Member of the executive board of APBMT (unpaid)
11	Stock or stock options	___ None	
12	Receipt of equipment, materials, drugs, medical writing, gifts or other services	___ None	
13	Other financial or non-financial interests	___ None	

Please place an "X" next to the following statement to indicate your agreement:

\_\_\_ I certify that I have answered every question and have not altered the wording of any of the questions on this form.

 26 Aug 2021

## ICMJE DISCLOSURE FORM

Date: 18<sup>th</sup> Aug 2021

Your Name: Alok Srivastava

Manuscript Title: Standardization and Accreditation in Haemopoietic Stem Cell Transplantation – an Asia Pacific perspective

Manuscript number (if known): BCT-2021-015

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<b>Time frame: past 36 months</b>			
2	Grants or contracts from any entity (if not indicated in item #1 above).	___ None	
3	Royalties or licenses	___ None	

4	Consulting fees	<input type="checkbox"/> <input type="checkbox"/> None	
5	Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or educational events	<input type="checkbox"/> <input type="checkbox"/> None	
6	Payment for expert testimony	<input type="checkbox"/> <input type="checkbox"/> None	
7	Support for attending meetings and/or travel	<input type="checkbox"/> <input type="checkbox"/> None	
8	Patents planned, issued or pending	<input type="checkbox"/> <input type="checkbox"/> None	
9	Participation on a Data Safety Monitoring Board or Advisory Board	<input type="checkbox"/> <input type="checkbox"/> None	
10	Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid	<input type="checkbox"/> <input type="checkbox"/> None	
11	Stock or stock options	<input type="checkbox"/> <input type="checkbox"/> None	
12	Receipt of equipment, materials, drugs, medical writing, gifts or other services	<input type="checkbox"/> <input type="checkbox"/> None	
13	Other financial or non-financial interests	<input type="checkbox"/> <input type="checkbox"/> None	

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I certify that I have answered every question and have not altered the wording of any of the questions on this form.

## ICMJE DISCLOSURE FORM

Date: 18-August-2021

Your Name: Dr Annabella Chang

Manuscript Title: Standardization and Accreditation in Haemopoietic Stem Cell Transplantation – an Asia Pacific perspective

Manuscript number (if known): BCT-2021-015

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1	All support for the present manuscript (e.g., funding, provision of study materials, medical writing, article processing charges, etc.) <b>No time limit for this item.</b>	Dept Haematology, SVH	
		RCPAQAP	
<b>Time frame: past 36 months</b>			
2	Grants or contracts from any entity (if not indicated in item #1 above).	___ None	
3	Royalties or licenses	___ None	

4	Consulting fees	<input type="checkbox"/> <input type="checkbox"/> None	
5	Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or educational events	<input type="checkbox"/> <input type="checkbox"/> None	
6	Payment for expert testimony	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> None	
7	Support for attending meetings and/or travel	<input type="checkbox"/> <input type="checkbox"/> None	
8	Patents planned, issued or pending	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> None	
9	Participation on a Data Safety Monitoring Board or Advisory Board	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> None	
10	Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> None	
11	Stock or stock options	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> None	
12	Receipt of equipment, materials, drugs, medical writing, gifts or other services	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> None	
13	Other financial or non-financial interests	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> None	

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## ICMJE DISCLOSURE FORM

Date: 17 AUG 2021  
 Your Name: Aloysius Yew Leng HO  
 Manuscript Title: Standardization and Accreditation in Haemopoietic Stem Cell Transplantation – an Asia Pacific perspective  
 Manuscript number (if known): BCT-2021-015

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<b>Time frame: past 36 months</b>			
2	Grants or contracts from any entity (if not indicated in item #1 above).	___ None	
3	Royalties or licenses	___ None	

4	Consulting fees	<input type="checkbox"/> <input type="checkbox"/> None	
5	Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or educational events	<input type="checkbox"/> <input type="checkbox"/> None	
6	Payment for expert testimony	<input type="checkbox"/> <input type="checkbox"/> None	
7	Support for attending meetings and/or travel	<input type="checkbox"/> <input type="checkbox"/> None	
8	Patents planned, issued or pending	<input type="checkbox"/> <input type="checkbox"/> None	
9	Participation on a Data Safety Monitoring Board or Advisory Board	<input type="checkbox"/> <input type="checkbox"/> None	
10	Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid	<input type="checkbox"/> <input type="checkbox"/> None	
11	Stock or stock options	<input type="checkbox"/> <input type="checkbox"/> None	
12	Receipt of equipment, materials, drugs, medical writing, gifts or other services	<input type="checkbox"/> <input type="checkbox"/> None	
13	Other financial or non-financial interests	<input type="checkbox"/> <input type="checkbox"/> None	

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## ICMJE DISCLOSURE FORM

Date: 17 August 2021

Your Name: Scott Ragg

Manuscript Title: Standardization and Accreditation in Haemopoietic Stem Cell Transplantation – an Asia Pacific perspective

Manuscript number (if known): BCT-2021-015

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6	Payment for expert testimony	___ None	
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8	Patents planned, issued or pending	___ None	
9	Participation on a Data Safety Monitoring Board or Advisory Board	___ None	
10	Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid	___ None	
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**X** I certify that I have answered every question and have not altered the wording of any of the questions on this form.



## ICMJE DISCLOSURE FORM

Date: August 26, 2021  
 Your Name: William YK Hwnag  
 Manuscript Title: Standardization and Accreditation in Haemopoietic Stem Cell Transplantation – an Asia Pacific perspective  
 Manuscript number (if known): BCT-2021-015

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<b>Time frame: past 36 months</b>			
2	Grants or contracts from any entity (if not indicated in item #1 above).	___ None	
3	Royalties or licenses	___ None	

4	Consulting fees	___ None	
5	Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or educational events	___ None	
6	Payment for expert testimony	___ None	
7	Support for attending meetings and/or travel	___ None	
8	Patents planned, issued or pending	___ None	
9	Participation on a Data Safety Monitoring Board or Advisory Board	___ None	
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