

## ICMJE DISCLOSURE FORM

**Date:** 5/26/2023

**Your Name:** Aditya Kumar Gupta

**Manuscript Title:** Outcomes of initial pediatric autologous HSCT at a tertiary care public centre in India: achieving comparable outcomes with adaptations

**Manuscript Number (if known):** Blood Cell Therapy

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.

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**Your Name:** Jagdish Prasad Meena

**Manuscript Title:** Outcomes of initial pediatric autologous HSCT at a tertiary care public centre in India: achieving comparable outcomes with adaptations

**Manuscript Number (if known):** Blood Cell Therapy

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**Your Name:** Priyanka Naranje

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## ICMJE DISCLOSURE FORM

**Date:** 5/26/2023

**Your Name:** Rachna Seth

**Manuscript Title:** Outcomes of initial pediatric autologous HSCT at a tertiary care public centre in India: achieving comparable outcomes with adaptations

**Manuscript Number (if known):** Blood Cell Therapy

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 author's relationships/activities/interests should be defined broadly. For example, if your manuscript pertains to the epidemiology of hypertension, you should declare all relationships with manufacturers of antihypertensive medication, even if that medication is not mentioned in the manuscript.

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**Date:** 5/26/2023

**Your Name:** Sujata Mohanty

**Manuscript Title:** Outcomes of initial pediatric autologous HSCT at a tertiary care public centre in India: achieving comparable outcomes with adaptations

**Manuscript Number (if known):** Blood Cell Therapy

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