Treatment of Deep Vein Thrombosis and Pulmonary Embolism Supplement 3: Disclosure of Interests Forms of Researchers who Contributed to the Guidelines

Arnav Agarwal
Fazila Binte Abu Bakar Aloweni
Rachel Couban
Juan Martin Criniti
Ivan D. Florez
Ariel Izcovich
Sean Kennedy
Luciane Cruz Lopes
Luis Colunga Lozano
Liming Lu
Ignacio Neumann
Sureka Pavalagantharajah
Ignacio Pineda
Federico Popoff
Francisca Rodriguez
Stephanie Ross
Jaiming Wu
Yuqing Zhang
Part A. Material Interests in Companies

Equity
1. Do you currently or in the past 24 months have you had equity in any for-profit company that develops, produces, markets, or distributes drugs, devices, services, or therapies used to diagnose, treat, monitor, manage, or alleviate health conditions? Equity includes stock, stock options, and other ownership interests but excludes diversified mutual fund shares.

☒ No
☐ Yes, as described below:

Add rows as needed for each equity interest.

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Patents and Royalties
2. Do you currently or in the past 24 months have you owned patents for or received royalties from any intellectual property or product used to diagnose, treat, monitor, manage, or alleviate health conditions?

☒ No
☐ Yes, as described below:

Add rows as needed for each patent or royalty interest.

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To report activities that generate revenues for your institution, see Part B, Question 5.

Industry-Funded Research

4. Do you currently or in the past 24 months have you been involved in research funded or supported (e.g., in kind support) by any for-profit company that develops, produces, markets, or distributes drugs, devices, services, or therapies used to diagnose, treat, monitor, manage, or alleviate health conditions?

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**My Partner’s or Spouse’s Interests**

5. Currently or in the past 24 months has your partner or spouse had any of the interests described in questions 1-4?

- ☒ No

- ☐ Yes, as described below:

  Add rows as needed for each interest.

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Part B. Interests That Are Not Mainly Financial

You have been invited to participate as a researcher on systematic evidence reviews that will inform clinical practice guidelines by the American Society of Hematology on the following topic:

Venous thromboembolism

The questions that follow are designed to elicit information about personal beliefs, intellectual positions or opinions, institutional relationships, and other interests that are not mainly financial and that may be relevant to guidelines on the above topic.

Personal Beliefs
1. Do you have strongly held beliefs related to the topic of these guidelines?
   - ☒ No
   - ☐ Yes
   If yes, please explain:

Previously Published Opinions
2. Have you ever authored, coauthored, or publicly provided an opinion related to the topic of these guidelines, e.g., a clinical practice guideline, textbook, review article, meeting poster or presentation, grand rounds talk, letter to the editor?
   - ☒ No
   - ☐ Yes
   If yes, what were those views and where were they made?

Research
3. Currently or in the past 24 months, have you been involved in a leadership role in any research project not already reported under Part A, Question 4, relevant to the topic of these guidelines, e.g., a research project funded by a nonprofit or governmental organization?
   - ☒ No
☐ Yes, as described below:

**Column 1** Name the entity funding the research.

**Column 2** Describe the research project.

**Column 3** Describe your role: (a) national or overall principal investigator, (b) member of a steering committee of a study that does not have a principal investigator, (c) site or local investigator. If other than these options, please describe.

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**Institutional Relationships**

4. Could your salary be affected by recommendations on this topic?

☐ Don’t know

☒ No

☐ Yes

If yes, please explain:

5. Do you generate revenues for your institution or employer by clinical activity, teaching, speaking, consulting, testifying, writing, or otherwise sharing your knowledge or opinions about this guideline topic?

☐ Don’t know

☒ No

☐ Yes

If yes, please explain:

6. Could your institution benefit or be harmed by recommendations of guidelines on this topic?

☐ Don’t know

☒ No

☐ Yes

If yes, please explain:
Career Advancement
7. How would you characterize the support you would receive from your primary mentor, institution, or other entities if your contributions to guidelines on this topic generated a strong reaction from peers outside your institution?
N/A.

Advocacy and Policy Positions
8. Do you work for or are you a member of an organization with a stated position related to the topic of these guidelines, e.g., position statement, editorial, blog, amicus brief, or legislature or legal testimony?
☒ No
☐ Yes. Name of organization(s): ___
If yes, are you involved in formulating or voting for positions?
☐ No
☐ Yes
If yes, could recommendations of these guidelines conflict with policies you have promoted or are obligated to follow?
☐ Don’t know or not applicable
☒ No
☐ Yes
If yes, please explain:

Professional Specialty
9. What is your primary profession? If you are a clinician, what is your clinical specialty or subspecialty?
Medical student (no clinical specialty or subspecialty).
10. Do you prescribe or otherwise recommend diagnostic tests or treatments that may be addressed by these guidelines?
☒ No
☐ Yes
If yes, please explain:
**Expected Interests**

11. Do you expect new financial or nonfinancial interests relevant to the topic of these guidelines not already declared in Part A or Part B of this form?

- [x] No
- [ ] Yes

If yes, please describe:
Part C. Summary (ASH Internal Use)

ASH will review your disclosures and summarize here interests that are judged to be current, material, and with an affected company. You will then be invited to review our determinations and to agree to make all parts of this form (A, B and C) publically available.

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<td>Optimal management of anticoagulation therapy (systematic reviews)</td>
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<td>10/20/16 Alexander; 10/26/16 Kunkle</td>
<td>No material conflicts of interest</td>
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<tr>
<td>Yes</td>
<td>7/19/2018 Alexander</td>
<td>On 7/18/2018, Arnav Agarwal confirmed all information in this form.</td>
</tr>
<tr>
<td>Yes</td>
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Notes:
ASH Guidelines Researcher
Declaration of Interests Form

Part A. Material Interests in Companies

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Venous thromboembolism

The questions that follow are designed to elicit information about personal beliefs, intellectual positions or opinions, institutional relationships, and other interests that are not mainly financial and that may be relevant to guidelines on the above topic.

Personal Beliefs
1. Do you have strongly held beliefs related to the topic of these guidelines?
   - ☒ No
   - ☐ Yes
   If yes, please explain:

Previously Published Opinions
2. Have you ever authored, coauthored, or publicly provided an opinion related to the topic of these guidelines, e.g., a clinical practice guideline, textbook, review article, meeting poster or presentation, grand rounds talk, letter to the editor?
   - ☒ No
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Research
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   - ☒ No
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☐ Don’t know

☒ No

☐ Yes

If yes, please explain:

6. Could your institution benefit or be harmed by recommendations of guidelines on this topic?

☒ Don’t know

☐ No

☐ Yes

If yes, please explain:
Career Advancement

7. How would you characterize the support you would receive from your primary mentor, institution, or other entities if your contributions to guidelines on this topic generated a strong reaction from peers outside your institution?

I think they would supportive as this a non-bias and rigorous review done by a highly qualified team members.

Advocacy and Policy Positions

8. Do you work for or are you a member of an organization with a stated position related to the topic of these guidelines, e.g., position statement, editorial, blog, amicus brief, or legislature or legal testimony?

☒ No
☐ Yes. Name of organization(s): ___

If yes, are you involved in formulating or voting for positions?

☐ No
☐ Yes

If yes, could recommendations of these guidelines conflict with policies you have promoted or are obligated to follow?

☐ Don’t know or not applicable
☐ No
☐ Yes

If yes, please explain:

Professional Specialty

9. What is your primary profession? If you are a clinician, what is your clinical specialty or subspecialty?

I am a research nurse. My sub-specialty is urology and general surgical nursing.

10. Do you prescribe or otherwise recommend diagnostic tests or treatments that may be addressed by these guidelines?

☒ No
☐ Yes

If yes, please explain:
Expected Interests

11. Do you expect new financial or nonfinancial interests relevant to the topic of these guidelines not already declared in Part A or Part B of this form?

☒ No

☐ Yes

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1. Do you have strongly held beliefs related to the topic of these guidelines?

   x No
   □ Yes

   If yes, please explain:

Previously Published Opinions

2. Have you ever authored, coauthored, or publicly provided an opinion related to the topic of these guidelines, e.g., a clinical practice guideline, textbook, review article, meeting poster or presentation, grand rounds talk, letter to the editor?

   x No
   □ Yes

   If yes, what were those views and where were they made?

Research

3. Currently or in the past 24 months, have you been involved in a leadership role in any research project not already reported under Part A, Question 4, relevant to the topic of these guidelines, e.g., a research project funded by a nonprofit or governmental organization?

   x No
☐ Yes, as described below:

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   ☑ No

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   □ Don’t know

   ✗ No

   □ Yes

   If yes, please explain:

6. Could your institution benefit or be harmed by recommendations of guidelines on this topic?

   □ Don’t know

   ✔ No

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☐ No
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☐ Don’t know or not applicable
☐ No
☐ Yes
If yes, please explain:

Professional Specialty
9. What is your primary profession? If you are a clinician, what is your clinical specialty or subspecialty?

Critical care Medicine/Internal Medicine.

10. Do you prescribe or otherwise recommend diagnostic tests or treatments that may be addressed by these guidelines?

☐ No
☐ Yes
If yes, please explain:
In our hospital environment we apply the treatment and diagnostic algorithms (if the patient’s conditions enable it)

**Expected Interests**

11. Do you expect new financial or nonfinancial interests relevant to the topic of these guidelines not already declared in Part A or Part B of this form?

   - [x] No
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<td>Treatment of VTE (systematic reviews)</td>
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<tr>
<th>Approved to participate?</th>
<th>Reviewer name and date</th>
<th>Notes</th>
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<tr>
<td>Yes</td>
<td>10/20/16 Alexander; 10/26/16 Kunkle</td>
<td>No material conflicts of interest</td>
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</table>

Summarize all current material interests in affected companies described above:

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Notes:

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Part A. Material Interests in Companies

Equity
1. Do you currently or in the past 24 months have you had equity in any for-profit company that develops, produces, markets, or distributes drugs, devices, services, or therapies used to diagnose, treat, monitor, manage, or alleviate health conditions? Equity includes stock, stock options, and other ownership interests but excludes diversified mutual fund shares.

☐ No
☐ Yes, as described below:

Add rows as needed for each equity interest.

<table>
<thead>
<tr>
<th>Company</th>
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</thead>
</table>

Patents and Royalties
2. Do you currently or in the past 24 months have you owned patents for or received royalties from any intellectual property or product used to diagnose, treat, monitor, manage, or alleviate health conditions?

☐ No
☐ Yes, as described below:

Add rows as needed for each patent or royalty interest.

<table>
<thead>
<tr>
<th>Company</th>
<th>Description</th>
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</tr>
</thead>
</table>
3. Do you currently or in the past 24 months have you received personal income or other remuneration (e.g., reimbursement or financial support for the costs of travel) from any for-profit company that develops, produces, markets, or distributes drugs, devices, services, or therapies used to diagnose, treat, monitor, manage, or alleviate health conditions?

☒ No

☐ Yes, as described below:

**Column 1** Name the company.

**Column 2** Describe the activity for which you received income or other remuneration, e.g., employment, consultancy, speakers bureau involvement, service on an advisory committee or board, expert testimony.

**Column 3** Indicate when the activity ended, if applicable. (If the activity has not yet ended, indicate “current” or “ongoing.”)

Add rows as needed for each activity.

To report activities that generate revenues for your institution, see Part B, Question 5.
Industry-Funded Research

4. Do you currently or in the past 24 months have you been involved in research funded or supported (e.g., in kind support) by any for-profit company that develops, produces, markets, or distributes drugs, devices, services, or therapies used to diagnose, treat, monitor, manage, or alleviate health conditions?

☒ No

☐ Yes, as described below:

Column 1  Name the company funding or supporting the research.

Column 2  Briefly describe the research project. Indicate if funding or support goes to you directly or to your institution.

Column 3  Describe your role: (a) national or overall principal investigator, (b) member of a steering committee of a study that does not have a principal investigator, (c) site or local investigator. If other than these options, please describe.

Column 4  Indicate when your involvement ended, if applicable. (If your involvement has not yet ended, indicate “current” or “ongoing.”)

Add rows as needed for each research project.

<table>
<thead>
<tr>
<th>Company</th>
<th>Description of Research</th>
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</table>

My Partner’s or Spouse’s Interests

5. Currently or in the past 24 months has your partner or spouse had any of the interests described in questions 1-4?

☒ No

☐ Yes, as described below:
Add rows as needed for each interest.

<table>
<thead>
<tr>
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</table>
Part B. Interests That Are Not Mainly Financial

You have been invited to participate as a researcher on systematic evidence reviews that will inform clinical practice guidelines by the American Society of Hematology on the following topic:

**Venous thromboembolism**

The questions that follow are designed to elicit information about personal beliefs, intellectual positions or opinions, institutional relationships, and other interests that are not mainly financial and that may be relevant to guidelines on the above topic.

**Personal Beliefs**

1. Do you have strongly held beliefs related to the topic of these guidelines?
   - [ ] No
   - [ ] Yes

   If yes, please explain:

**Previously Published Opinions**

2. Have you ever authored, coauthored, or publicly provided an opinion related to the topic of these guidelines, e.g., a clinical practice guideline, textbook, review article, meeting poster or presentation, grand rounds talk, letter to the editor?
   - [ ] No
   - [ ] Yes

   If yes, what were those views and where were they made?

**Research**

3. Currently or in the past 24 months, have you been involved in a leadership role in any research project not already reported under Part A, Question 4, relevant to the topic of these guidelines, e.g., a research project funded by a nonprofit or governmental organization?
   - [ ] No
☐ Yes, as described below:

**Column 1** Name the entity funding the research.

**Column 2** Describe the research project.

**Column 3** Describe your role: (a) national or overall principal investigator, (b) member of a steering committee of a study that does not have a principal investigator, (c) site or local investigator. If other than these options, please describe.

**Column 4** Indicate when your involvement ended, if applicable. (If your involvement has not yet ended, indicate “current” or “ongoing.”)

Add rows as needed for each research project.

<table>
<thead>
<tr>
<th>Funder</th>
<th>Description of Research</th>
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</tbody>
</table>

**Institutional Relationships**

4. Could your salary be affected by recommendations on this topic? NO

5. Do you generate revenues for your institution or employer by clinical activity, teaching, speaking, consulting, testifying, writing, or otherwise sharing your knowledge or opinions about this guideline topic?
   
   ☐ Don’t know
   
   ☒ No
   
   ☐ Yes

   If yes, please explain:

6. Could your institution benefit or be harmed by recommendations of guidelines on this topic?

   ☐ Don’t know
   
   ☒ No
   
   ☐ Yes

   If yes, please explain:
Career Advancement
7. How would you characterize the support you would receive from your primary mentor, institution, or other entities if your contributions to guidelines on this topic generated a strong reaction from peers outside your institution? I hope they would be pleased with my work.

Advocacy and Policy Positions
8. Do you work for or are you a member of an organization with a stated position related to the topic of these guidelines, e.g., position statement, editorial, blog, amicus brief, or legislature or legal testimony?
   ☒ No
   ☐ Yes. Name of organization(s): ___
   If yes, are you involved in formulating or voting for positions?
   ☐ No
   ☐ Yes
   If yes, could recommendations of these guidelines conflict with policies you have promoted or are obligated to follow?
   ☐ Don’t know or not applicable
   ☐ No
   ☐ Yes
   If yes, please explain:

Professional Specialty
9. What is your primary profession? If you are a clinician, what is your clinical specialty or subspecialty?
   Research coordinator/ Librarian

10. Do you prescribe or otherwise recommend diagnostic tests or treatments that may be addressed by these guidelines?
    ☒ No
    ☐ Yes
If yes, please explain:

Expected Interests

11. Do you expect new financial or nonfinancial interests relevant to the topic of these guidelines not already declared in Part A or Part B of this form?

☒ No

☐ Yes

If yes, please describe:
**Part C. Summary (ASH Internal Use)**

ASH will review your disclosures and summarize here interests that are judged to be current, material, and with an affected company. You will then be invited to review our determinations and to agree to make all parts of this form (A, B and C) publically available.

**Guideline topic:** Venous thromboembolism

<table>
<thead>
<tr>
<th>Approved to participate?</th>
<th>Reviewer name and date</th>
<th>Notes</th>
</tr>
</thead>
<tbody>
<tr>
<td>Yes</td>
<td>7/26/2018 Alexander</td>
<td>No material conflicts of interest.</td>
</tr>
<tr>
<td>Yes</td>
<td>7/24/2019 Alexander</td>
<td>On 6/17/2019, Rachel Couban confirmed all information in this form.</td>
</tr>
<tr>
<td>Yes</td>
<td>1/9/2020 Alexander</td>
<td>On 1/9/2020, Rachel Couban confirmed all information in this form.</td>
</tr>
</tbody>
</table>

Summarize all current material interests in affected companies described above:

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Notes:

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**Notes:**

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Part A. Material Interests in Companies

Equity
1. Do you currently or in the past 24 months have you had equity in any for-profit company that develops, produces, markets, or distributes drugs, devices, services, or therapies used to diagnose, treat, monitor, manage, or alleviate health conditions? Equity includes stock, stock options, and other ownership interests but excludes diversified mutual fund shares.

☒ No ☑
☐ Yes, as described below:

Add rows as needed for each equity interest.

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Patents and Royalties
2. Do you currently or in the past 24 months have you owned patents for or received royalties from any intellectual property or product used to diagnose, treat, monitor, manage, or alleviate health conditions?

☒ No ☑
☐ Yes, as described below:

Add rows as needed for each patent or royalty interest.

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</table>
Personal Income or Other Remuneration

3. Do you currently or in the past 24 months have you received personal income or other remuneration (e.g., reimbursement or financial support for the costs of travel) from any for-profit company that develops, produces, markets, or distributes drugs, devices, services, or therapies used to diagnose, treat, monitor, manage, or alleviate health conditions?

☐ No
☒ Yes, as described below:

**Column 1** Name the company.

**Column 2** Describe the activity for which you received income or other remuneration, e.g., employment, consultancy, speakers bureau involvement, service on an advisory committee or board, expert testimony.

**Column 3** Indicate when the activity ended, if applicable. (If the activity has not yet ended, indicate “current” or “ongoing.”)

Add rows as needed for each activity.

To report activities that generate revenues for your institution, see Part B, Question 5.

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<tr>
<th>Company</th>
<th>Description</th>
<th>End Date</th>
<th>For ASH Internal Use</th>
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<tbody>
<tr>
<td>Novartis</td>
<td>Evidence based medicine workshop (Speaker)</td>
<td>June 2016 (one day duration)</td>
<td>Not a COI. Novartis does not market any drugs used in the treatment of VTE.</td>
</tr>
<tr>
<td>Novartis</td>
<td>Evidence based medicine workshop (Speaker)</td>
<td>June 2015 (one day duration)</td>
<td>Not a COI. Novartis does not market any drugs used in the treatment of VTE.</td>
</tr>
<tr>
<td>Novartis</td>
<td>Health technology assessment about multiple sclerosis</td>
<td>May 2016</td>
<td>Not a COI. Novartis does not market any drugs used in the treatment of VTE.</td>
</tr>
</tbody>
</table>
Industry-Funded Research

4. Do you currently or in the past 24 months have you been involved in research funded or supported (e.g., in kind support) by any for-profit company that develops, produces, markets, or distributes drugs, devices, services, or therapies used to diagnose, treat, monitor, manage, or alleviate health conditions?

☒ No X

☐ Yes, as described below:

Column 1  Name the company funding or supporting the research.

Column 2  Briefly describe the research project. Indicate if funding or support goes to you directly or to your institution.

Column 3  Describe your role: (a) national or overall principal investigator, (b) member of a steering committee of a study that does not have a principal investigator, (c) site or local investigator. If other than these options, please describe.

Column 4  Indicate when your involvement ended, if applicable. (If your involvement has not yet ended, indicate “current” or “ongoing.”)

Add rows as needed for each research project.
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**My Partner’s or Spouse’s Interests**

5. Currently or in the past 24 months has *your partner or spouse* had any of the interests described in questions 1-4?

- [x] No X

- [ ] Yes, as described below:

  Add rows as needed for each interest.

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</tbody>
</table>
Part B. Interests That Are Not Mainly Financial

You have been invited to participate as a researcher on systematic evidence reviews that will inform clinical practice guidelines by the American Society of Hematology on the following topic:

**Venous thromboembolism**

The questions that follow are designed to elicit information about personal beliefs, intellectual positions or opinions, institutional relationships, and other interests that are not mainly financial and that may be relevant to guidelines on the above topic.

**Personal Beliefs**

1. Do you have strongly held beliefs related to the topic of these guidelines?
   - ☒ No
   - ☐ Yes
   If yes, please explain:

**Previously Published Opinions**

2. Have you ever authored, coauthored, or publicly provided an opinion related to the topic of these guidelines, e.g., a clinical practice guideline, textbook, review article, meeting poster or presentation, grand rounds talk, letter to the editor?
   - ☐ No
   - ☒ Yes
   If yes, what were those views and where were they made?

I am the first author of a letter to the editor regarding the use of ticagrelor in Acute Coronary Syndrome. It reviewed primarily the PLATO trial, and raised concerns about risk of bias and misconduct. (Criniti JM, Izcovich A, Popoff F, Ruiz JI, Catalano HN. [Ticagrelor in acute coronary syndrome. Explaining the inexplicable]. Medicina (B Aires). 2014;74(3):239-44.)
Research

3. Currently or in the past 24 months, have you been involved in a leadership role in any research project not already reported under Part A, Question 4, relevant to the topic of these guidelines, e.g., a research project funded by a nonprofit or governmental organization?

☒ No X

☐ Yes, as described below:

<table>
<thead>
<tr>
<th>Column 1</th>
<th>Name the entity funding the research.</th>
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<tbody>
<tr>
<td>Column 2</td>
<td>Describe the research project.</td>
</tr>
<tr>
<td>Column 3</td>
<td>Describe your role: (a) national or overall principal investigator, (b) member of a steering committee of a study that does not have a principal investigator, (c) site or local investigator. If other than these options, please describe.</td>
</tr>
<tr>
<td>Column 4</td>
<td>Indicate when your involvement ended, if applicable. (If your involvement has not yet ended, indicate “current” or “ongoing.”)</td>
</tr>
</tbody>
</table>

Add rows as needed for each research project.

Institutional Relationships

4. Could your salary be affected by recommendations on this topic?

☐ No

☒ Don’t know

☐ No X

☐ Yes

If yes, please explain:
6. Could your institution benefit or be harmed by recommendations of guidelines on this topic?

☐ Don’t know
☒ No X
☐ Yes

If yes, please explain:

Career Advancement

7. How would you characterize the support you would receive from your primary mentor, institution, or other entities if your contributions to guidelines on this topic generated a strong reaction from peers outside your institution?

I think I will not get any special support

Advocacy and Policy Positions

8. Do you work for or are you a member of an organization with a stated position related to the topic of these guidelines, e.g., position statement, editorial, blog, amicus brief, or legislature or legal testimony?

☒ No X
☐ Yes. Name of organization(s): ___

If yes, are you involved in formulating or voting for positions?

☐ No X
☐ Yes

If yes, could recommendations of these guidelines conflict with policies you have promoted or are obligated to follow?

☐ Don’t know or not applicable X
☐ No
☐ Yes

If yes, please explain:
Professional Specialty

9. What is your primary profession? If you are a clinician, what is your clinical specialty or subspecialty?

Internal medicine

10. Do you prescribe or otherwise recommend diagnostic tests or treatments that may be addressed by these guidelines?

☐ No
☐ Yes X

If yes, please explain:

As part of my internal medicine practice, I see different types of inpatients that may require diagnostic tests or treatments addressed by these guidelines, i.e.: hip fracture, atrial fibrillation, knee replacement, etc.

Expected Interests

11. Do you expect new financial or nonfinancial interests relevant to the topic of these guidelines not already declared in Part A or Part B of this form?

☒ No X
☐ Yes

If yes, please describe:
Part C. Summary (ASH Internal Use)
ASH will review your disclosures and summarize here interests that are judged to be current, material, and with an affected company. You will then be invited to review our determinations and to agree to make all parts of this form (A, B and C) publically available.

Guideline topic: Venous thromboembolism

<table>
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<tr>
<th>Approved to participate?</th>
<th>Date reviewed by ASH staff</th>
<th>Notes</th>
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<tbody>
<tr>
<td>Yes</td>
<td>10/26/2016 Kunkle, Alexander</td>
<td>No material conflicts of interest.</td>
</tr>
<tr>
<td>Yes</td>
<td>1/8/2020 Alexander</td>
<td>New disclosure. See Part D. On 1/8/2020, Dr. Criniti confirmed all information in this form.</td>
</tr>
</tbody>
</table>

Summarize all current material interests in affected companies described above:

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Notes:
Part D. New Declarations

The following interests were disclosed after appointment:

<table>
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<tr>
<th>Company</th>
<th>Description</th>
<th>Disclosure Date</th>
<th>ASH Internal Notes</th>
</tr>
</thead>
<tbody>
<tr>
<td>GlaxoSmithKline</td>
<td>As of December 2019, Dr. Criniti is an employee of Glaxo Smith Kline</td>
<td>1/8/2020</td>
<td>Not a COI. GlaxoSmithKline markets argatroban. However, Dr. Criniti’s employment began after his work on the systematic reviews was complete.</td>
</tr>
</tbody>
</table>
Part A. Material Interests in Companies

**Equity**

1. Do you currently or in the past 24 months have you had equity in any for-profit company that develops, produces, markets, or distributes drugs, devices, services, or therapies used to diagnose, treat, monitor, manage, or alleviate health conditions? Equity includes stock, stock options, and other ownership interests but excludes diversified mutual fund shares.

   ☒ No

   ☐ Yes, as described below:

   Add rows as needed for each equity interest.

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**Patents and Royalties**

2. Do you currently or in the past 24 months have you owned patents for or received royalties from any intellectual property or product used to diagnose, treat, monitor, manage, or alleviate health conditions?

   ☒ No

   ☐ Yes, as described below:

   Add rows as needed for each patent or royalty interest.

<table>
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<tr>
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Personal Income or Other Remuneration

3. Do you currently or in the past 24 months have you received personal income or other remuneration (e.g., reimbursement or financial support for the costs of travel) from any for-profit company that develops, produces, markets, or distributes drugs, devices, services, or therapies used to diagnose, treat, monitor, manage, or alleviate health conditions?

☒ No

☐ Yes, as described below:

<table>
<thead>
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<tr>
<td>Column 2</td>
<td>Describe the activity for which you received income or other remuneration, e.g., employment, consultancy, speakers bureau involvement, service on an advisory committee or board, expert testimony.</td>
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<td>Column 3</td>
<td>Indicate when the activity ended, if applicable. (If the activity has not yet ended, indicate “current” or “ongoing.”)</td>
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Add rows as needed for each activity.

To report activities that generate revenues for your institution, see Part B, Question 5.

Industry-Funded Research

4. Do you currently or in the past 24 months have you been involved in research funded or supported (e.g., in kind support) by any for-profit company that develops, produces, markets, or distributes drugs, devices, services, or therapies used to diagnose, treat, monitor, manage, or alleviate health conditions?

☒ No

☐ Yes, as described below:

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Column 4  Indicate when your involvement ended, if applicable. (If your involvement has not yet ended, indicate “current” or “ongoing.”)

Add rows as needed for each research project.

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My Partner’s or Spouse’s Interests

5. Currently or in the past 24 months has your partner or spouse had any of the interests described in questions 1-4?

☐ No

☐ Yes, as described below:

Add rows as needed for each interest.

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Part B. Interests That Are Not Mainly Financial

You have been invited to participate as a researcher on systematic evidence reviews that will inform clinical practice guidelines by the American Society of Hematology on the following topic:

![Venous thromboembolism](#)

The questions that follow are designed to elicit information about personal beliefs, intellectual positions or opinions, institutional relationships, and other interests that are not mainly financial and that may be relevant to guidelines on the above topic.

### Personal Beliefs

1. Do you have strongly held beliefs related to the topic of these guidelines?
   - ☒ No
   - ☐ Yes

   If yes, please explain:

### Previously Published Opinions

2. Have you ever authored, coauthored, or publicly provided an opinion related to the topic of these guidelines, e.g., a clinical practice guideline, textbook, review article, meeting poster or presentation, grand rounds talk, letter to the editor?
   - ☒ No
   - ☐ Yes

   If yes, what were those views and where were they made?

### Research

3. Currently or in the past 24 months, have you been involved in a leadership role in any research project not already reported under Part A, Question 4, relevant to the topic of these guidelines, e.g., a research project funded by a nonprofit or governmental organization?
   - ☒ No
☐ Yes, as described below:

Column 1  Name the entity funding the research.

Column 2  Describe the research project.

Column 3  Describe your role: (a) national or overall principal investigator, (b) member of a steering committee of a study that does not have a principal investigator, (c) site or local investigator. If other than these options, please describe.

Column 4  Indicate when your involvement ended, if applicable. (If your involvement has not yet ended, indicate “current” or “ongoing.”)

Add rows as needed for each research project.

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Institutional Relationships

4. Could your salary be affected by recommendations on this topic?

5. Do you generate revenues for your institution or employer by clinical activity, teaching, speaking, consulting, testifying, writing, or otherwise sharing your knowledge or opinions about this guideline topic?

☐ Don’t know
☒ No
☐ Yes

If yes, please explain:

6. Could your institution benefit or be harmed by recommendations of guidelines on this topic?

☐ Don’t know
☒ No
☐ Yes

If yes, please explain:
Career Advancement
7. How would you characterize the support you would receive from your primary mentor, institution, or other entities if your contributions to guidelines on this topic generated a strong reaction from peers outside your institution?

I would receive support for my involvement in the guidelines or systematic reviews regardless of the outcome of the guideline.

Advocacy and Policy Positions
8. Do you work for or are you a member of an organization with a stated position related to the topic of these guidelines, e.g., position statement, editorial, blog, amicus brief, or legislature or legal testimony?

☒ No
☐ Yes. Name of organization(s): ___
If yes, are you involved in formulating or voting for positions?
☐ No
☐ Yes
If yes, could recommendations of these guidelines conflict with policies you have promoted or are obligated to follow?
☐ Don’t know or not applicable
☒ No
☐ Yes
If yes, please explain:

Professional Specialty
9. What is your primary profession? If you are a clinician, what is your clinical specialty or subspecialty?

Pediatrics

10. Do you prescribe or otherwise recommend diagnostic tests or treatments that may be addressed by these guidelines?

☒ No
☐ Yes
If yes, please explain:
Expected Interests

11. Do you expect new financial or nonfinancial interests relevant to the topic of these guidelines not already declared in Part A or Part B of this form?

☒ No

☐ Yes

If yes, please describe:
## Part C. Summary (ASH Internal Use)

ASH will review your disclosures and summarize here interests that are judged to be current, material, and with an affected company. You will then be invited to review our determinations and to agree to make all parts of this form (A, B and C) publically available.

| Guideline topic: | Treatment of VTE (systematic reviews)  
|                 | Feasibility/Acceptability systematic review |

<table>
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<tr>
<th>Approved to participate?</th>
<th>Reviewer name and date</th>
<th>Notes</th>
</tr>
</thead>
<tbody>
<tr>
<td>Yes</td>
<td>10/27/16 Alexander; 10/31/16 Kunkle</td>
<td>No material conflicts of interest</td>
</tr>
<tr>
<td>Yes</td>
<td>Alexander 7/18/18</td>
<td>On 7/18/2018, Ivan Florez confirmed all information in this form.</td>
</tr>
</tbody>
</table>

Summarize all current material interests in affected companies described above:

<table>
<thead>
<tr>
<th>Company</th>
<th>Description</th>
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Notes:

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ASH Guidelines Researcher Declaration of Interests Form

Part A. Material Interests in Companies

Equity
1. Do you currently or in the past 24 months have you had equity in any for-profit company that develops, produces, markets, or distributes drugs, devices, services, or therapies used to diagnose, treat, monitor, manage, or alleviate health conditions? Equity includes stock, stock options, and other ownership interests but excludes diversified mutual fund shares.

☐ No  X
☐ Yes, as described below:

Add rows as needed for each equity interest.

<table>
<thead>
<tr>
<th>Company</th>
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</table>

Patents and Royalties
2. Do you currently or in the past 24 months have you owned patents for or received royalties from any intellectual property or product used to diagnose, treat, monitor, manage, or alleviate health conditions?

☐ No  X
☐ Yes, as described below:

Add rows as needed for each patent or royalty interest.

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Personal Income or Other Remuneration

3. Do you currently or in the past 24 months have you received personal income or other remuneration (e.g., reimbursement or financial support for the costs of travel) from any for-profit company that develops, produces, markets, or distributes drugs, devices, services, or therapies used to diagnose, treat, monitor, manage, or alleviate health conditions?

☐ No
☒ Yes, as described below:

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<tr>
<th>Company</th>
<th>Description</th>
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</thead>
<tbody>
<tr>
<td>Novartis</td>
<td>Evidence based medicine workshop (Expert testimony)</td>
<td>June 2016 (one day duration)</td>
<td>Not a COI. Novartis does not market any products used in the treatment or diagnosis of VTE.</td>
</tr>
<tr>
<td>Novartis</td>
<td>Evidence based medicine workshop (Expert testimony)</td>
<td>June 2015 (one day duration)</td>
<td>Not a COI. Novartis does not market any products used in the treatment or diagnosis of VTE.</td>
</tr>
<tr>
<td>Novartis</td>
<td>Health technology assessment about</td>
<td>May 2016</td>
<td>Not a COI. Novartis does not market any products used in the treatment or diagnosis of VTE.</td>
</tr>
</tbody>
</table>
Industry-Funded Research

4. Do you currently or in the past 24 months have you been involved in research funded or supported (e.g., in kind support) by any for-profit company that develops, produces, markets, or distributes drugs, devices, services, or therapies used to diagnose, treat, monitor, manage, or alleviate health conditions?

☐ No X
☐ Yes, as described below:

Column 1 Name the company funding or supporting the research.

Column 2 Briefly describe the research project. Indicate if funding or support goes to you directly or to your institution.

Column 3 Describe your role: (a) national or overall principal investigator, (b) member of a steering committee of a study that does not have a principal investigator, (c) site or local investigator. If other than these options, please describe.

Column 4 Indicate when your involvement ended, if applicable. (If your involvement has not yet ended, indicate “current” or “ongoing.”)

Add rows as needed for each research project.
### My Partner’s or Spouse’s Interests

5. Currently or in the past 24 months has *your partner or spouse* had any of the interests described in questions 1-4?

- [ ] No
- [x] Yes, as described below:

   Add rows as needed for each interest.
Part B. Interests That Are Not Mainly Financial

You have been invited to participate as a researcher on systematic evidence reviews that will inform clinical practice guidelines by the American Society of Hematology on the following topic:

Venous thromboembolism

The questions that follow are designed to elicit information about personal beliefs, intellectual positions or opinions, institutional relationships, and other interests that are not mainly financial and that may be relevant to guidelines on the above topic.

Personal Beliefs
1. Do you have strongly held beliefs related to the topic of these guidelines?
   ☐ No X
   ☐ Yes
   If yes, please explain:

Previously Published Opinions
2. Have you ever authored, coauthored, or publicly provided an opinion related to the topic of these guidelines, e.g., a clinical practice guideline, textbook, review article, meeting poster or presentation, grand rounds talk, letter to the editor?
   ☐ No
   ☐ Yes X
   If yes, what were those views and where were they made?

I coauthored a letter to the editor related to ticagrelor in ACS. In that letter we questioned the results of the PLATO trial based in a series of publications that suggest that there could have been misconduct. (Criniti JM, Izcovich A, Popoff F, Ruiz JI, Catalano HN. [Ticagrelor in acute coronary syndrome. Explaining the inexplicable]. Medicina (B Aires). 2014;74(3):239-44.)
Research
3. Currently or in the past 24 months, have you been involved in a leadership role in any research project not already reported under Part A, Question 4, relevant to the topic of these guidelines, e.g., a research project funded by a nonprofit or governmental organization?
☐ No X
☐ Yes, as described below:

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Institutional Relationships
4. Could your salary be affected by recommendations on this topic?

5. Do you generate revenues for your institution or employer by clinical activity, teaching, speaking, consulting, testifying, writing, or otherwise sharing your knowledge or opinions about this guideline topic?
☐ Don’t know
☐ No X
☐ Yes
If yes, please explain:

6. Could your institution benefit or be harmed by recommendations of guidelines on this topic?
Career Advancement
7. How would you characterize the support you would receive from your primary mentor, institution, or other entities if your contributions to guidelines on this topic generated a strong reaction from peers outside your institution?

Probably I will not receive any significant support beyond the congratulations.

Advocacy and Policy Positions
8. Do you work for or are you a member of an organization with a stated position related to the topic of these guidelines, e.g., position statement, editorial, blog, amicus brief, or legislature or legal testimony?

☐ No X
☐ Yes

If yes, are you involved in formulating or voting for positions?

☐ No X
☐ Yes

If yes, could recommendations of these guidelines conflict with policies you have promoted or are obligated to follow?

☐ Don’t know or not applicable X
☐ No
☐ Yes

If yes, please explain:

Professional Specialty
9. What is your primary profession? If you are a clinician, what is your clinical specialty or subspecialty?
10. Do you prescribe or otherwise recommend diagnostic tests or treatments that may be addressed by these guidelines?

☐ No
☐ Yes X

If yes, please explain:

As a clinician I treat patients with conditions that require antithrombotic treatment. Some of the most frequent examples are: patients with atrial fibrillation, patients with stroke, patients with thromboembolic disease.

Expected Interests

11. Do you expect new financial or nonfinancial interests relevant to the topic of these guidelines not already declared in Part A or Part B of this form?

☐ No X
☐ Yes

If yes, please describe:
Part C. Summary (ASH Internal Use)

ASH will review your disclosures and summarize here interests that are judged to be current, material, and with an affected company. You will then be invited to review our determinations and to agree to make all parts of this form (A, B and C) publically available.

Guideline topic: Treatment of VTE (systematic reviews)
Feasibility/Acceptability (systematic reviews)

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<tbody>
<tr>
<td>Yes</td>
<td>5/15/2018 Alexander</td>
<td>No material conflicts of interest.</td>
</tr>
<tr>
<td>Yes</td>
<td>8/13/2018 Alexander</td>
<td>On 8/10/2018, Ariel Izcovich confirmed all information in this form.</td>
</tr>
<tr>
<td>Yes</td>
<td>1/9/2020</td>
<td>On 1/7/2020, Ariel Izcovich confirmed all information in this form.</td>
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Summarize all current material interests in affected companies described above:

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Part A. Material Interests in Companies

**Equity**
1. Do you currently or in the past 24 months have you had equity in any for-profit company that develops, produces, markets, or distributes drugs, devices, services, or therapies used to diagnose, treat, monitor, manage, or alleviate health conditions? Equity includes stock, stock options, and other ownership interests but excludes diversified mutual fund shares.

☐ No

☐ Yes, as described below:

Add rows as needed for each equity interest.

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**Patents and Royalties**
2. Do you currently or in the past 24 months have you owned patents for or received royalties from any intellectual property or product used to diagnose, treat, monitor, manage, or alleviate health conditions?

☐ No

☐ Yes, as described below:

Add rows as needed for each patent or royalty interest.

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☒ No

☐ Yes, as described below:

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Industry-Funded Research

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☒ No

☐ Yes, as described below:

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My Partner’s or Spouse’s Interests

5. Currently or in the past 24 months has your partner or spouse had any of the interests described in questions 1-4?

☒ No

☐ Yes, as described below:

Add rows as needed for each interest.

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Part B. Interests That Are Not Mainly Financial

You have been invited to participate as a researcher on systematic evidence reviews that will inform clinical practice guidelines by the American Society of Hematology on the following topic:

Venous thromboembolism

The questions that follow are designed to elicit information about personal beliefs, intellectual positions or opinions, institutional relationships, and other interests that are not mainly financial and that may be relevant to guidelines on the above topic.

Personal Beliefs

1. Do you have strongly held beliefs related to the topic of these guidelines?
   - ☒ No
   - ☐ Yes
   
   If yes, please explain:

Previously Published Opinions

2. Have you ever authored, coauthored, or publicly provided an opinion related to the topic of these guidelines, e.g., a clinical practice guideline, textbook, review article, meeting poster or presentation, grand rounds talk, letter to the editor?
   - ☒ No
   - ☐ Yes
   
   If yes, what were those views and where were they made?

Research

3. Currently or in the past 24 months, have you been involved in a leadership role in any research project not already reported under Part A, Question 4, relevant to the topic of these guidelines, e.g., a research project funded by a nonprofit or governmental organization?
   - ☒ No
☐ Yes, as described below:

Column 1  Name the entity funding the research.

Column 2  Describe the research project.

Column 3  Describe your role: (a) national or overall principal investigator, (b) member of a
steering committee of a study that does not have a principal investigator, (c) site or local
investigator. If other than these options, please describe.

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Institutional Relationships

4. Could your salary be affected by recommendations on this topic?
   ☒ No

5. Do you generate revenues for your institution or employer by clinical activity, teaching, speaking, consulting, testifying, writing, or otherwise sharing your knowledge or opinions about this guideline topic?
   ☐ Don’t know
   ☒ No
   ☐ Yes
   
   If yes, please explain:

6. Could your institution benefit or be harmed by recommendations of guidelines on this topic?
   ☐ Don’t know
   ☒ No
   ☐ Yes
   
   If yes, please explain:
Career Advancement
7. How would you characterize the support you would receive from your primary mentor, institution, or other entities if your contributions to guidelines on this topic generated a strong reaction from peers outside your institution?
   No impact.

Advocacy and Policy Positions
8. Do you work for or are you a member of an organization with a stated position related to the topic of these guidelines, e.g., position statement, editorial, blog, amicus brief, or legislature or legal testimony?
   ☒ No
   ☐ Yes. Name of organization(s): ___
   If yes, are you involved in formulating or voting for positions?
   ☐ No
   ☐ Yes
   If yes, could recommendations of these guidelines conflict with policies you have promoted or are obligated to follow?
   ☐ Don’t know or not applicable
   ☐ No
   ☐ Yes
   If yes, please explain:

Professional Specialty
9. What is your primary profession? If you are a clinician, what is your clinical specialty or subspecialty?
   Diagnostic radiology resident.
10. Do you prescribe or otherwise recommend diagnostic tests or treatments that may be addressed by these guidelines?
    ☒ No
    ☐ Yes
    If yes, please explain:
Expected Interests

11. Do you expect new financial or nonfinancial interests relevant to the topic of these guidelines not already declared in Part A or Part B of this form?

☒ No
☐ Yes

If yes, please describe:
Part C. Summary (ASH Internal Use)

ASH will review your disclosures and summarize here interests that are judged to be current, material, and with an affected company. You will then be invited to review our determinations and to agree to make all parts of this form (A, B and C) publically available.

<table>
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<th>Guideline topic:</th>
<th>Treatment of VTE (systematic reviews)</th>
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<tr>
<th>Approved to participate?</th>
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<tbody>
<tr>
<td>Yes</td>
<td>10/20/16 Alexander; 10/26/16 Kunkle</td>
<td>No material conflicts of interest</td>
</tr>
<tr>
<td>Yes</td>
<td>1/9/2020 Alexander</td>
<td>On 1/8/2020, Sean Kennedy confirmed all information in this form.</td>
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Summarize all current material interests in affected companies described above:

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Notes:

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Sean Alexander Kennedy
Part A. Material Interests in Companies

**Equity**
1. Do you currently or in the past 24 months have you had equity in any for-profit company that develops, produces, markets, or distributes drugs, devices, services, or therapies used to diagnose, treat, monitor, manage, or alleviate health conditions? Equity includes stock, stock options, and other ownership interests but excludes diversified mutual fund shares.

☒ No
☐ Yes, as described below:

Add rows as needed for each equity interest.

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**Patents and Royalties**
2. Do you currently or in the past 24 months have you owned patents for or received royalties from any intellectual property or product used to diagnose, treat, monitor, manage, or alleviate health conditions?

☒ No
☐ Yes, as described below:

Add rows as needed for each patent or royalty interest.

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</table>
Personal Income or Other Remuneration
3. Do you currently or in the past 24 months have you received personal income or other remuneration (e.g., reimbursement or financial support for the costs of travel) from any for-profit company that develops, produces, markets, or distributes drugs, devices, services, or therapies used to diagnose, treat, monitor, manage, or alleviate health conditions?

☒ No
☐ Yes, as described below:

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Industry-Funded Research
4. Do you currently or in the past 24 months have you been involved in research funded or supported (e.g., in kind support) by any for-profit company that develops, produces, markets, or distributes drugs, devices, services, or therapies used to diagnose, treat, monitor, manage, or alleviate health conditions?

☒ No
☐ Yes, as described below:

Column 1 Name the company funding or supporting the research.

Column 2 Briefly describe the research project. Indicate if funding or support goes to you directly or to your institution.

Column 3 Describe your role: (a) national or overall principal investigator, (b) member of a steering committee of a study that does not have a principal investigator, (c) site or local investigator. If other than these options, please describe.
Column 4  Indicate when your involvement ended, if applicable. (If your involvement has not yet ended, indicate “current” or “ongoing.”)

Add rows as needed for each research project.

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My Partner’s or Spouse’s Interests

5. Currently or in the past 24 months has your partner or spouse had any of the interests described in questions 1-4?

☒ No

☐ Yes, as described below:

Add rows as needed for each interest.

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</table>
Part B. Interests That Are Not Mainly Financial

You have been invited to participate as a researcher on systematic evidence reviews that will inform clinical practice guidelines by the American Society of Hematology on the following topic:

**Venous thromboembolism**

The questions that follow are designed to elicit information about personal beliefs, intellectual positions or opinions, institutional relationships, and other interests that are not mainly financial and that may be relevant to guidelines on the above topic.

**Personal Beliefs**

1. Do you have strongly held beliefs related to the topic of these guidelines?

   ☒ No
   
   ☐ Yes
   
   If yes, please explain:

**Previously Published Opinions**

2. Have you ever authored, coauthored, or publicly provided an opinion related to the topic of these guidelines, e.g., a clinical practice guideline, textbook, review article, meeting poster or presentation, grand rounds talk, letter to the editor?

   ☒ No
   
   ☐ Yes
   
   If yes, what were those views and where were they made?

**Research**

3. Currently or in the past 24 months, have you been involved in a leadership role in any research project not already reported under Part A, Question 4, relevant to the topic of these guidelines, e.g., a research project funded by a nonprofit or governmental organization?

   ☒ No
☐ Yes, as described below:

Column 1  Name the entity funding the research.

Column 2  Describe the research project.

Column 3  Describe your role: (a) national or overall principal investigator, (b) member of a steering committee of a study that does not have a principal investigator, (c) site or local investigator. If other than these options, please describe.

Column 4  Indicate when your involvement ended, if applicable. (If your involvement has not yet ended, indicate “current” or “ongoing.”)

Add rows as needed for each research project.

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</thead>
</table>

Institutional Relationships

4. Could your salary be affected by recommendations on this topic?
   No.

5. Do you generate revenues for your institution or employer by clinical activity, teaching, speaking, consulting, testifying, writing, or otherwise sharing your knowledge or opinions about this guideline topic?
   ☒ Don’t know
   ☐ No
   ☐ Yes
   
   If yes, please explain:

6. Could your institution benefit or be harmed by recommendations of guidelines on this topic?
   ☐ Don’t know
   ☒ No
   ☐ Yes
   
   If yes, please explain:
Career Advancement
7. How would you characterize the support you would receive from your primary mentor, institution, or other entities if your contributions to guidelines on this topic generated a strong reaction from peers outside your institution?

They will support wherever. This doesn’t affect my professional life.

Advocacy and Policy Positions
8. Do you work for or are you a member of an organization with a stated position related to the topic of these guidelines, e.g., position statement, editorial, blog, amicus brief, or legislature or legal testimony?

☒ No
☐ Yes. Name of organization(s): ___

If yes, are you involved in formulating or voting for positions?

☐ No
☐ Yes

If yes, could recommendations of these guidelines conflict with policies you have promoted or are obligated to follow?

☒ Don’t know or not applicable
☐ No
☐ Yes

If yes, please explain:

Professional Specialty
9. What is your primary profession? If you are a clinician, what is your clinical specialty or subspecialty?

Clinical Pharmacology Professor-Researcher

10. Do you prescribe or otherwise recommend diagnostic tests or treatments that may be addressed by these guidelines?

☒ No
☐ Yes

If yes, please explain:
Expected Interests

11. Do you expect new financial or nonfinancial interests relevant to the topic of these guidelines not already declared in Part A or Part B of this form?

☒ No
☐ Yes

If yes, please describe:
Part C. Summary (ASH Internal Use)

ASH will review your disclosures and summarize here interests that are judged to be current, material, and with an affected company. You will then be invited to review our determinations and to agree to make all parts of this form (A, B and C) publically available.

Guideline topic: Treatment of VTE (systematic reviews)

<table>
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<tr>
<th>Approved to participate?</th>
<th>Reviewer name and date</th>
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<tr>
<td>Yes</td>
<td>10/27/16 Alexander; 10/31/16 Kunkle</td>
<td>No material conflicts of interest.</td>
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<tr>
<td>Yes</td>
<td>1/13/2020 Alexander</td>
<td>On 1/10/2020 Luciane Lopes confirmed all information in this form.</td>
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</table>

Summarize all current material interests in affected companies described above:

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<th>ASH Notes</th>
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Notes:

...
Part A. Material Interests in Companies

**Equity**

1. Do you currently or in the past 24 months have you had equity in any for-profit company that develops, produces, markets, or distributes drugs, devices, services, or therapies used to diagnose, treat, monitor, manage, or alleviate health conditions? Equity includes stock, stock options, and other ownership interests but excludes diversified mutual fund shares.

   ☒ No

   ☐ Yes, as described below:

   Add rows as needed for each equity interest.

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**Patents and Royalties**

2. Do you currently or in the past 24 months have you owned patents for or received royalties from any intellectual property or product used to diagnose, treat, monitor, manage, or alleviate health conditions?

   ☒ No

   ☐ Yes, as described below:

   Add rows as needed for each patent or royalty interest.

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### Personal Income or Other Remuneration

3. Do you currently or in the past 24 months have you received personal income or other remuneration (e.g., reimbursement or financial support for the costs of travel) from any for-profit company that develops, produces, markets, or distributes drugs, devices, services, or therapies used to diagnose, treat, monitor, manage, or alleviate health conditions?

- [X] No
- [ ] Yes, as described below:

| Column 1 | Name the company. |
| Column 2 | Describe the activity for which you received income or other remuneration, e.g., employment, consultancy, speakers bureau involvement, service on an advisory committee or board, expert testimony. |
| Column 3 | Indicate when the activity ended, if applicable. (If the activity has not yet ended, indicate “current” or “ongoing.”) |

Add rows as needed for each activity.

To report activities that generate revenues for your institution, see Part B, Question 5.

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Industry-Funded Research

4. Do you currently or in the past 24 months have you been involved in research funded or supported (e.g., in kind support) by any for-profit company that develops, produces, markets, or distributes drugs, devices, services, or therapies used to diagnose, treat, monitor, manage, or alleviate health conditions?

☒ No
☐ Yes, as described below:

Column 1 Name the company funding or supporting the research.

Column 2 Briefly describe the research project. Indicate if funding or support goes to you directly or to your institution.

Column 3 Describe your role: (a) national or overall principal investigator, (b) member of a steering committee of a study that does not have a principal investigator, (c) site or local investigator. If other than these options, please describe.

Column 4 Indicate when your involvement ended, if applicable. (If your involvement has not yet ended, indicate “current” or “ongoing.”)

Add rows as needed for each research project.

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My Partner’s or Spouse’s Interests

5. Currently or in the past 24 months has your partner or spouse had any of the interests described in questions 1-4?

☒ No
☐ Yes, as described below:
Add rows as needed for each interest.

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</table>
Part B. Interests That Are Not Mainly Financial

You have been invited to participate as a researcher on systematic evidence reviews that will inform clinical practice guidelines by the American Society of Hematology on the following topic:

Venous thromboembolism

The questions that follow are designed to elicit information about personal beliefs, intellectual positions or opinions, institutional relationships, and other interests that are not mainly financial and that may be relevant to guidelines on the above topic.

Personal Beliefs
1. Do you have strongly held beliefs related to the topic of these guidelines?

☒ No
☐ Yes

If yes, please explain:

Previously Published Opinions
2. Have you ever authored, coauthored, or publicly provided an opinion related to the topic of these guidelines, e.g., a clinical practice guideline, textbook, review article, meeting poster or presentation, grand rounds talk, letter to the editor?

☒ No
☐ Yes

If yes, what were those views and where were they made?

Research
3. Currently or in the past 24 months, have you been involved in a leadership role in any research project not already reported under Part A, Question 4, relevant to the topic of these guidelines, e.g., a research project funded by a nonprofit or governmental organization?

☒ No
Yes, as described below:

Column 1  Name the entity funding the research.
Column 2  Describe the research project.
Column 3  Describe your role: (a) national or overall principal investigator, (b) member of a steering committee of a study that does not have a principal investigator, (c) site or local investigator. If other than these options, please describe.
Column 4  Indicate when your involvement ended, if applicable. (If your involvement has not yet ended, indicate “current” or “ongoing.”)

Add rows as needed for each research project.

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Institutional Relationships

4. Could your salary be affected by recommendations on this topic?
   - NO

5. Do you generate revenues for your institution or employer by clinical activity, teaching, speaking, consulting, testifying, writing, or otherwise sharing your knowledge or opinions about this guideline topic?
   - □ Don’t know
   - ☒ No
   - □ Yes
   If yes, please explain:

6. Could your institution benefit or be harmed by recommendations of guidelines on this topic?
   - □ Don’t know
   - ☒ No
   - □ Yes
Career Advancement
7. How would you characterize the support you would receive from your primary mentor, institution, or other entities if your contributions to guidelines on this topic generated a strong reaction from peers outside your institution?

Advocacy and Policy Positions
8. Do you work for or are you a member of an organization with a stated position related to the topic of these guidelines, e.g., position statement, editorial, blog, amicus brief, or legislature or legal testimony?

☒ No
☐ Yes. Name of organization(s): ___

If yes, are you involved in formulating or voting for positions?

☐ No
☐ Yes

If yes, could recommendations of these guidelines conflict with policies you have promoted or are obligated to follow?

☐ Don’t know or not applicable
☐ No
☐ Yes

If yes, please explain:

Professional Specialty
9. What is your primary profession? If you are a clinician, what is your clinical specialty or subspecialty?

10. Do you prescribe or otherwise recommend diagnostic tests or treatments that may be addressed by these guidelines?

☒ No
Expected Interests

11. Do you expect new financial or nonfinancial interests relevant to the topic of these guidelines not already declared in Part A or Part B of this form?

☒ No

☐ Yes

If yes, please describe:
Part C. Summary (ASH Internal Use)

ASH will review your disclosures and summarize here interests that are judged to be current, material, and with an affected company. You will then be invited to review our determinations and to agree to make all parts of this form (A, B and C) publically available.

Guideline topic: Venous thromboembolism

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<tr>
<th>Approved to participate?</th>
<th>Date reviewed by ASH staff</th>
<th>Notes</th>
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<td>Yes</td>
<td>10/26/2016 Kunkle, Alexander</td>
<td>No material conflicts of interest.</td>
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<td>Yes</td>
<td>1/31/2020 Alexander</td>
<td>On 1/14/2020, Liming Lu confirmed all information in this form.</td>
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Summarize all current material interests in affected companies described above:

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ASH Guideline Panel
Declarations of Interest Form

Part A. Material Interests in Companies

**Equity**

1. Do you currently or in the past 24 months have you had equity in any for-profit company that develops, produces, markets, or distributes drugs, devices, services, or therapies used to diagnose, treat, monitor, manage, or alleviate health conditions? Equity includes stock, stock options, and other ownership interests but excludes diversified mutual fund shares.

☒ No

☐ Yes, as described below:

Add rows as needed for each equity interest.

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**Patents and Royalties**

2. Do you currently or in the past 24 months have you owned patents for or received royalties from any intellectual property or product used to diagnose, treat, monitor, manage, or alleviate health conditions?

☒ No

☐ Yes, as described below:

Add rows as needed for each patent or royalty interest.
### Personal Income or Other Remuneration

3. Do you currently or in the past 24 months have you received personal income or other remuneration (e.g., reimbursement or financial support for the costs of travel) from any for-profit company that develops, produces, markets, or distributes drugs, devices, services, or therapies used to diagnose, treat, monitor, manage, or alleviate health conditions?

- [x] No
- [ ] Yes, as described below:

**Column 1** Name the company.

**Column 2** Describe the activity for which you received income or other remuneration, e.g., employment, consultancy, speakers bureau involvement, service on an advisory committee or board, expert testimony.

**Column 3** Indicate when the activity ended, if applicable. (If the activity has not yet ended, indicate “current” or “ongoing.”)

Add rows as needed for each activity.

To report activities that generate revenues for your institution, see Part B, Question 4.
Industry-Funded Research

4. Do you currently or in the past 24 months have you been involved in research funded or supported (e.g., in kind support) by any for-profit company that develops, produces, markets, or distributes drugs, devices, services, or therapies used to diagnose, treat, monitor, manage, or alleviate health conditions?

☒ No
☐ Yes, as described below:

| Column 1 | Name the company funding or supporting the research. |
| Column 2 | Briefly describe the research project. Indicate if funding or support goes to you directly or to your institution. |
| Column 3 | Describe your role: (a) national or overall principal investigator, (b) member of a steering committee of a study that does not have a principal investigator, (c) site or local investigator. If other than these options, please describe. |
| Column 4 | Indicate when your involvement ended, if applicable. (If your involvement has not yet ended, indicate “current” or “ongoing.”) |

Add rows as needed for each research project.

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My Partner’s or Spouse’s Interests

5. Currently or in the past 24 months has your partner or spouse had any of the interests described in questions 1-4?

☒ No
☐ Yes, as described below:
Add rows as needed for each interest.

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Part B. Interests That Are Not Mainly Financial

You have been invited by ASH to participate in the development of clinical practice guidelines on the following topic(s):

**Treatment of Acute VTE (DVT and PE)**

The questions that follow are designed to elicit information about personal beliefs, intellectual positions or opinions, institutional relationships, and other interests that are not mainly financial and that may be relevant to guidelines on the above topic(s).

**Personal Beliefs**
1. Do you have strongly held beliefs related to the topic of these guidelines?
   - ☒ No
   - ☐ Yes
   
   If yes, please explain:

**Previously Published Opinions**
2. Have you ever authored, coauthored, or publicly provided an opinion related to the topic of these guidelines, e.g., a clinical practice guideline, textbook, review article, meeting poster or presentation, grand rounds talk, letter to the editor?
   - ☒ No
   - ☐ Yes

   If yes, what were those views and where were they made?

**Research**
3. Currently or in the past 24 months, have you been involved in a leadership role in any research project not already reported under Part A, Question 4, relevant to the topic of these guidelines, e.g., a research project funded by a nonprofit or governmental organization?
   - ☒ No
☐ Yes, as described below:

Column 1  Name the entity funding the research.

Column 2  Describe the research project.

Column 3  Describe your role: (a) national or overall principal investigator, (b) member of a steering committee of a study that does not have a principal investigator, (c) site or local investigator. If other than these options, please describe.

Column 4  Indicate when your involvement ended, if applicable. (If your involvement has not yet ended, indicate “current” or “ongoing.”)

Add rows as needed for each research project.

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</tbody>
</table>

Institutional Relationships

4. Do you generate revenues or nonfinancial benefits for your institution by teaching, speaking, consulting, testifying, writing, or otherwise sharing your knowledge or opinions about this guideline topic?

☐ Don’t know

☒ No

☐ Yes

If yes, please explain:

5. Could your institution benefit or be harmed by recommendations of guidelines on this topic?

☐ Don’t know

☒ No

☐ Yes

If yes, please explain:
Career Advancement
6. How would you characterize the support you would receive from your primary mentor, institution, or other entities if your work on this panel or authorship of these guidelines generated a strong reaction from peers outside your institution?

No real issue I think.

Advocacy and Policy Positions
7. Do you work for or are you a member of an organization with a stated position related to the topic of these guidelines, e.g., position statement, editorial, blog, amicus brief, or legislature or legal testimony?

☒ No
☐ Yes

If yes, are you involved in formulating or voting for positions?

☐ No
☐ Yes

If yes, could recommendations of these guidelines conflict with policies you have promoted or are obligated to follow?

☐ Don’t know or not applicable
☐ No
☐ Yes

If yes, please explain:

Professional Specialty
8. What is your primary clinical specialty or subspecialty?
   General Internal Medicine

9. Do you prescribe or otherwise recommend diagnostic tests or treatments that may be addressed by these guidelines?

☐ No
☒ Yes

If yes, please explain:

DVT/PEs are diagnosed and treated by internists in my setting.

**Expected Interests**

10. Do you expect new financial or nonfinancial interests relevant to the topic of these guidelines not already declared in Part A or Part B of this form?

☒ No

☐ Yes

If yes, please describe:
Part C. Summary (ASH Internal Use)
ASH will review your disclosures and summarize here interests that are judged to be current, material, and with an affected company. You will then be invited to review our determinations and to agree to make all parts of this form (A, B and C) publically available.

<table>
<thead>
<tr>
<th>Name of guideline panel(s)</th>
<th>Treatment of Acute VTE (DVT and PE)</th>
</tr>
</thead>
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<tr>
<td><strong>Yes</strong></td>
<td><strong>Unconflicted minority</strong></td>
</tr>
<tr>
<td><strong>Status</strong></td>
<td><strong>Recusal may be required?</strong></td>
</tr>
<tr>
<td><strong>Yes</strong></td>
<td><strong>Unconflicted minority</strong></td>
</tr>
<tr>
<td><strong>Status</strong></td>
<td><strong>Recusal may be required?</strong></td>
</tr>
<tr>
<td><strong>Notes</strong></td>
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</tr>
</tbody>
</table>

If status is conflicted minority, summarize all current material interests in affected companies:

<table>
<thead>
<tr>
<th>Company</th>
<th>Description</th>
<th>Disclosure Date</th>
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<tbody>
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</tbody>
</table>

Notes:
Part A. Material Interests in Companies

**Equity**

1. Do you currently or in the past 24 months have you had equity in any for-profit company that develops, produces, markets, or distributes drugs, devices, services, or therapies used to diagnose, treat, monitor, manage, or alleviate health conditions? Equity includes stock, stock options, and other ownership interests but excludes diversified mutual fund shares.

☐ No

☐ Yes, as described below:

Add rows as needed for each equity interest.

<table>
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<tr>
<th>Company</th>
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<tr>
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</tbody>
</table>

**Patents and Royalties**

2. Do you currently or in the past 24 months have you owned patents for or received royalties from any intellectual property or product used to diagnose, treat, monitor, manage, or alleviate health conditions?

☐ No

☐ Yes, as described below:

Add rows as needed for each patent or royalty interest.

<table>
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<tr>
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</table>
Personal Income or Other Remuneration

3. Do you currently or in the past 24 months have you received personal income or other remuneration (e.g., reimbursement or financial support for the costs of travel) from any for-profit company that develops, produces, markets, or distributes drugs, devices, services, or therapies used to diagnose, treat, monitor, manage, or alleviate health conditions?

☒ No

☐ Yes, as described below:

Column 1 Name the company.

Column 2 Describe the activity for which you received income or other remuneration, e.g., employment, consultancy, speakers bureau involvement, service on an advisory committee or board, expert testimony.

Column 3 Indicate when the activity ended, if applicable. (If the activity has not yet ended, indicate “current” or “ongoing.”)

Add rows as needed for each activity.

To report activities that generate revenues for your institution, see Part B, Question 5.

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<tr>
<th>Company</th>
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Industry-Funded Research

4. Do you currently or in the past 24 months have you been involved in research funded or supported (e.g., in kind support) by any for-profit company that develops, produces, markets, or distributes drugs, devices, services, or therapies used to diagnose, treat, monitor, manage, or alleviate health conditions?

☒ No

☐ Yes, as described below:

Column 1 Name the company funding or supporting the research.

Column 2 Briefly describe the research project. Indicate if funding or support goes to you directly or to your institution.

Column 3 Describe your role: (a) national or overall principal investigator, (b) member of a steering committee of a study that does not have a principal investigator, (c) site or local investigator. If other than these options, please describe.
Column 4  Indicate when your involvement ended, if applicable. (If your involvement has not yet ended, indicate “current” or “ongoing.”)

Add rows as needed for each research project.

<table>
<thead>
<tr>
<th>Company</th>
<th>Description of Research</th>
<th>My Role</th>
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My Partner’s or Spouse’s Interests

5. Currently or in the past 24 months has your partner or spouse had any of the interests described in questions 1-4?

☒ No

☐ Yes, as described below:

Add rows as needed for each interest.

<table>
<thead>
<tr>
<th>Company</th>
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</thead>
</table>
Part B. Interests That Are Not Mainly Financial

You have been invited to participate as a researcher on systematic evidence reviews that will inform clinical practice guidelines by the American Society of Hematology on the following topic:

Venous thromboembolism

The questions that follow are designed to elicit information about personal beliefs, intellectual positions or opinions, institutional relationships, and other interests that are not mainly financial and that may be relevant to guidelines on the above topic.

Personal Beliefs

1. Do you have strongly held beliefs related to the topic of these guidelines?

☒ No
☐ Yes

If yes, please explain:

Previously Published Opinions

2. Have you ever authored, coauthored, or publicly provided an opinion related to the topic of these guidelines, e.g., a clinical practice guideline, textbook, review article, meeting poster or presentation, grand rounds talk, letter to the editor?

☒ No
☐ Yes

If yes, what were those views and where were they made?

Research

3. Currently or in the past 24 months, have you been involved in a leadership role in any research project not already reported under Part A, Question 4, relevant to the topic of these guidelines, e.g., a research project funded by a nonprofit or governmental organization?

☒ No
☐ Yes, as described below:

**Column 1** Name the entity funding the research.

**Column 2** Describe the research project.

**Column 3** Describe your role: (a) national or overall principal investigator, (b) member of a steering committee of a study that does not have a principal investigator, (c) site or local investigator. If other than these options, please describe.

**Column 4** Indicate when your involvement ended, if applicable. (If your involvement has not yet ended, indicate “current” or “ongoing.”)

Add rows as needed for each research project.

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**Institutional Relationships**

4. **Could your salary be affected by recommendations on this topic?**

   No

5. **Do you generate revenues for your institution or employer by clinical activity, teaching, speaking, consulting, testifying, writing, or otherwise sharing your knowledge or opinions about this guideline topic?**

   ☒ No

   ☐ Yes

   If yes, please explain:

6. **Could your institution benefit or be harmed by recommendations of guidelines on this topic?**

   ☒ No

   ☐ Yes

   If yes, please explain:
Career Advancement

7. How would you characterize the support you would receive from your primary mentor, institution, or other entities if your contributions to guidelines on this topic generated a strong reaction from peers outside your institution?

There would be no difference in the support that I would receive if my contributions to guidelines on this topic generated a strong reaction from peers outside my institution.

Advocacy and Policy Positions

8. Do you work for or are you a member of an organization with a stated position related to the topic of these guidelines, e.g., position statement, editorial, blog, amicus brief, or legislature or legal testimony?

☒ No

☐ Yes. Name of organization(s): ___

If yes, are you involved in formulating or voting for positions?

☐ No

☐ Yes

If yes, could recommendations of these guidelines conflict with policies you have promoted or are obligated to follow?

☐ Don’t know or not applicable

☐ No

☐ Yes

If yes, please explain:

Professional Specialty

9. What is your primary profession? If you are a clinician, what is your clinical specialty or subspecialty?

I am an undergraduate student at McMaster University.

10. Do you prescribe or otherwise recommend diagnostic tests or treatments that may be addressed by these guidelines?

☒ No

☐ Yes

If yes, please explain:
Expected Interests

11. Do you expect new financial or nonfinancial interests relevant to the topic of these guidelines not already declared in Part A or Part B of this form?

☒ No

☐ Yes

If yes, please describe:
Part C. Summary (ASH Internal Use)

ASH will review your disclosures and summarize here interests that are judged to be current, material, and with an affected company. You will then be invited to review our determinations and to agree to make all parts of this form (A, B and C) publically available.

<table>
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<tr>
<th>Guideline topic:</th>
<th>Treatment of VTE (systematic reviews)</th>
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<table>
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<tr>
<th>Approved to participate?</th>
<th>Reviewer name and date</th>
<th>Notes</th>
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<tbody>
<tr>
<td>Yes</td>
<td>10/20/16 Alexander; 10/26/16 Kunkle</td>
<td></td>
</tr>
<tr>
<td>Yes</td>
<td>1/9/2020 Alexander</td>
<td>On 1/7/2020 Sureka Pavalagantharajah confirmed all information in this form.</td>
</tr>
</tbody>
</table>

Summarize all current material interests in affected companies described above:

<table>
<thead>
<tr>
<th>Company</th>
<th>Description</th>
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</table>

Notes:

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Part D. New Declarations

The following interests were disclosed after appointment:

<table>
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<tr>
<th>Company</th>
<th>Description</th>
<th>Disclosure Date</th>
<th>ASH Internal Notes</th>
</tr>
</thead>
<tbody>
<tr>
<td>N/A</td>
<td>Sureka Pavalagantharajah is now a medical student at McMaster University</td>
<td>1/7/2020</td>
<td>Not a COI. This is an update to Part B, Question 9.</td>
</tr>
</tbody>
</table>
Part A. Material Interests in Companies

**Equity**

1. Do you currently or in the past 24 months have you had equity in any for-profit company that develops, produces, markets, or distributes drugs, devices, services, or therapies used to diagnose, treat, monitor, manage, or alleviate health conditions? Equity includes stock, stock options, and other ownership interests but excludes diversified mutual fund shares.

   ☒ No

   ☐ Yes, as described below:

   Add rows as needed for each equity interest.

<table>
<thead>
<tr>
<th>Company</th>
<th>Description</th>
<th>Date Divested</th>
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</table>

**Patents and Royalties**

2. Do you currently or in the past 24 months have you owned patents for or received royalties from any intellectual property or product used to diagnose, treat, monitor, manage, or alleviate health conditions?

   ☒ No

   ☐ Yes, as described below:

   Add rows as needed for each patent or royalty interest.

<table>
<thead>
<tr>
<th>Company</th>
<th>Description</th>
<th>Date Divested</th>
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</tr>
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Personal Income or Other Remuneration

3. Do you currently or in the past 24 months have you received personal income or other remuneration (e.g., reimbursement or financial support for the costs of travel) from any for-profit company that develops, produces, markets, or distributes drugs, devices, services, or therapies used to diagnose, treat, monitor, manage, or alleviate health conditions?

☒ No

☐ Yes, as described below:

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<td>Describe the activity for which you received income or other remuneration, e.g., employment, consultancy, speakers bureau involvement, service on an advisory committee or board, expert testimony.</td>
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<td>Column 3</td>
<td>Indicate when the activity ended, if applicable. (If the activity has not yet ended, indicate “current” or “ongoing.”)</td>
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</table>

Add rows as needed for each activity.

To report activities that generate revenues for your institution, see Part B, Question 5.

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<tr>
<th>Company</th>
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Industry-Funded Research

4. Do you currently or in the past 24 months have you been involved in research funded or supported (e.g., in kind support) by any for-profit company that develops, produces, markets, or distributes drugs, devices, services, or therapies used to diagnose, treat, monitor, manage, or alleviate health conditions?

☒ No

☐ Yes, as described below:

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<th>Column 1</th>
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<tbody>
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<td>Briefly describe the research project. Indicate if funding or support goes to you directly or to your institution.</td>
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<td>Column 3</td>
<td>Describe your role: (a) national or overall principal investigator, (b) member of a steering committee of a study that does not have a principal investigator, (c) site or local investigator. If other than these options, please describe.</td>
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</table>
Column 4  Indicate when your involvement ended, if applicable. (If your involvement has not yet ended, indicate “current” or “ongoing.”)

Add rows as needed for each research project.

<table>
<thead>
<tr>
<th>Company</th>
<th>Description of Research</th>
<th>My Role</th>
<th>End Date</th>
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My Partner’s or Spouse’s Interests

5. Currently or in the past 24 months has your partner or spouse had any of the interests described in questions 1-4?

☒ No

☐ Yes, as described below:

Add rows as needed for each interest.

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</table>
Part B. Interests That Are Not Mainly Financial

You have been invited to participate as a researcher on systematic evidence reviews that will inform clinical practice guidelines by the American Society of Hematology on the following topic:

Venous thromboembolism

The questions that follow are designed to elicit information about personal beliefs, intellectual positions or opinions, institutional relationships, and other interests that are not mainly financial and that may be relevant to guidelines on the above topic.

Personal Beliefs
1. Do you have strongly held beliefs related to the topic of these guidelines?
   ☒ No
   ☐ Yes
   If yes, please explain:

Previously Published Opinions
2. Have you ever authored, coauthored, or publicly provided an opinion related to the topic of these guidelines, e.g., a clinical practice guideline, textbook, review article, meeting poster or presentation, grand rounds talk, letter to the editor?
   ☒ No
   ☐ Yes
   If yes, what were those views and where were they made?

Research
3. Currently or in the past 24 months, have you been involved in a leadership role in any research project not already reported under Part A, Question 4, relevant to the topic of these guidelines, e.g., a research project funded by a nonprofit or governmental organization?
   ☒ No
☐ Yes, as described below:

Column 1 Name the entity funding the research.
Column 2 Describe the research project.
Column 3 Describe your role: (a) national or overall principal investigator, (b) member of a steering committee of a study that does not have a principal investigator, (c) site or local investigator. If other than these options, please describe.
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Add rows as needed for each research project.

<table>
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<th>Funder</th>
<th>Description of Research</th>
<th>My Role</th>
<th>End Date</th>
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</thead>
</table>

Institutional Relationships

4. Could your salary be affected by recommendations on this topic?

☐ Don’t know

☒ No

5. Do you generate revenues for your institution or employer by clinical activity, teaching, speaking, consulting, testifying, writing, or otherwise sharing your knowledge or opinions about this guideline topic?

☐ Don’t know

☒ No

☐ Yes

If yes, please explain:

6. Could your institution benefit or be harmed by recommendations of guidelines on this topic?

☐ Don’t know

☒ No

☐ Yes

If yes, please explain:
Career Advancement

7. How would you characterize the support you would receive from your primary mentor, institution, or other entities if your contributions to guidelines on this topic generated a strong reaction from peers outside your institution?

   I don’t know

Advocacy and Policy Positions

8. Do you work for or are you a member of an organization with a stated position related to the topic of these guidelines, e.g., position statement, editorial, blog, amicus brief, or legislature or legal testimony?

   ☒ No
   ☐ Yes. Name of organization(s): ___

   If yes, are you involved in formulating or voting for positions?

   ☒ No
   ☐ Yes

   If yes, could recommendations of these guidelines conflict with policies you have promoted or are obligated to follow?

   ☒ Don’t know or not applicable
   ☐ No
   ☐ Yes

   If yes, please explain:

Professional Specialty

9. What is your primary profession? If you are a clinician, what is your clinical specialty or subspecialty?

   Medical Doctor, Public Health (M.P.H)

10. Do you prescribe or otherwise recommend diagnostic tests or treatments that may be addressed by these guidelines?

    ☒ No
    ☐ Yes

    If yes, please explain:
Expected Interests

11. Do you expect new financial or nonfinancial interests relevant to the topic of these guidelines not already declared in Part A or Part B of this form?

☐ No

☐ Yes

If yes, please describe:
Part C. Summary (ASH Internal Use)

ASH will review your disclosures and summarize here interests that are judged to be current, material, and with an affected company. You will then be invited to review our determinations and to agree to make all parts of this form (A, B and C) publically available.

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<th>Guideline topic:</th>
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<tbody>
<tr>
<td></td>
<td>Values and preferences (systematic review)</td>
</tr>
</tbody>
</table>

<table>
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<tr>
<th>Approved to participate?</th>
<th>Reviewer name and date</th>
<th>Notes</th>
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<tbody>
<tr>
<td>Yes</td>
<td>10/27/16 Alexander; 10/31/16 Kunkle</td>
<td></td>
</tr>
<tr>
<td>Yes</td>
<td>8/16/2018 Alexander</td>
<td>On 8/16/2018, Ignacio Pineda confirmed all information in this form.</td>
</tr>
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</table>

Summarize all current material interests in affected companies described above:

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Notes:

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Notes:
Part A. Material Interests in Companies

Equity
1. Do you currently or in the past 24 months have you had equity in any for-profit company that develops, produces, markets, or distributes drugs, devices, services, or therapies used to diagnose, treat, monitor, manage, or alleviate health conditions? Equity includes stock, stock options, and other ownership interests but excludes diversified mutual fund shares.
   ☒ No
   ☐ Yes, as described below:

Add rows as needed for each equity interest.

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Patents and Royalties
2. Do you currently or in the past 24 months have you owned patents for or received royalties from any intellectual property or product used to diagnose, treat, monitor, manage, or alleviate health conditions?
   ☒ No
   ☐ Yes, as described below:

Add rows as needed for each patent or royalty interest.

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3. Do you currently or in the past 24 months have you received personal income or other remuneration (e.g., reimbursement or financial support for the costs of travel) from any for-profit company that develops, produces, markets, or distributes drugs, devices, services, or therapies used to diagnose, treat, monitor, manage, or alleviate health conditions?

☒ No
☐ Yes, as described below:

| Column 1 | Name the company. |
| Column 2 | Describe the activity for which you received income or other remuneration, e.g., employment, consultancy, speakers bureau involvement, service on an advisory committee or board, expert testimony. |
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Add rows as needed for each activity.

To report activities that generate revenues for your institution, see Part B, Question 5.
Industry-Funded Research

4. Do you currently or in the past 24 months have you been involved in research funded or supported (e.g., in kind support) by any for-profit company that develops, produces, markets, or distributes drugs, devices, services, or therapies used to diagnose, treat, monitor, manage, or alleviate health conditions?

☒ No

☐ Yes, as described below:

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Add rows as needed for each research project.

My Partner’s or Spouse’s Interests

5. Currently or in the past 24 months has your partner or spouse had any of the interests described in questions 1-4?

☒ No

☐ Yes, as described below:
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Part B. Interests That Are Not Mainly Financial

You have been invited to participate as a researcher on systematic evidence reviews that will inform clinical practice guidelines by the American Society of Hematology on the following topic:

Venous thromboembolism

The questions that follow are designed to elicit information about personal beliefs, intellectual positions or opinions, institutional relationships, and other interests that are not mainly financial and that may be relevant to guidelines on the above topic.

Personal Beliefs

1. Do you have strongly held beliefs related to the topic of these guidelines?

☐ No
☐ Yes

If yes, please explain:

Previously Published Opinions

2. Have you ever authored, coauthored, or publicly provided an opinion related to the topic of these guidelines, e.g., a clinical practice guideline, textbook, review article, meeting poster or presentation, grand rounds talk, letter to the editor?

☐ No
☐ Yes

If yes, what were those views and where were they made?

Research

3. Currently or in the past 24 months, have you been involved in a leadership role in any research project not already reported under Part A, Question 4, relevant to the topic of these guidelines, e.g., a research project funded by a nonprofit or governmental organization?

☐ No
Yes, as described below:

Column 1  Name the entity funding the research.

Column 2  Describe the research project.

Column 3  Describe your role: (a) national or overall principal investigator, (b) member of a steering committee of a study that does not have a principal investigator, (c) site or local investigator. If other than these options, please describe.

Column 4  Indicate when your involvement ended, if applicable. (If your involvement has not yet ended, indicate “current” or “ongoing.”)

Add rows as needed for each research project.

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Institutional Relationships

4.  Could your salary be affected by recommendations on this topic?

   No

5.  Do you generate revenues for your institution or employer by clinical activity, teaching, speaking, consulting, testifying, writing, or otherwise sharing your knowledge or opinions about this guideline topic?

   ☐ Don’t know
   ☒ No
   ☐ Yes

If yes, please explain:

6.  Could your institution benefit or be harmed by recommendations of guidelines on this topic?

   ☐ Don’t know
   ☒ No
☐ Yes

If yes, please explain:

Career Advancement
7. How would you characterize the support you would receive from your primary mentor, institution, or other entities if your contributions to guidelines on this topic generated a strong reaction from peers outside your institution?

Not related

Advocacy and Policy Positions
8. Do you work for or are you a member of an organization with a stated position related to the topic of these guidelines, e.g., position statement, editorial, blog, amicus brief, or legislature or legal testimony?

☒ No

☐ Yes. Name of organization(s): ___

If yes, are you involved in formulating or voting for positions?

☐ No

☐ Yes

If yes, could recommendations of these guidelines conflict with policies you have promoted or are obligated to follow?

☐ Don’t know or not applicable

☐ No

☐ Yes

If yes, please explain:

Professional Specialty
9. What is your primary profession? If you are a clinician, what is your clinical specialty or subspecialty?
Clinician (no subspeciality)

10. Do you prescribe or otherwise recommend diagnostic tests or treatments that may be addressed by these guidelines?

☐ No
☒ Yes

If yes, please explain:

I prescribe post-surgical thromboprophylaxis

Expected Interests
11. Do you expect new financial or nonfinancial interests relevant to the topic of these guidelines not already declared in Part A or Part B of this form?

☒ No
☐ Yes

If yes, please describe:
Part C. Summary (ASH Internal Use)

ASH will review your disclosures and summarize here interests that are judged to be current, material, and with an affected company. You will then be invited to review our determinations and to agree to make all parts of this form (A, B and C) publically available.

Guideline topic: Venous thromboembolism

<table>
<thead>
<tr>
<th>Approved to participate?</th>
<th>Reviewer name and date</th>
<th>Notes</th>
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<tr>
<td>Yes</td>
<td>10/26/16 Alexander</td>
<td>No material conflicts of interest.</td>
</tr>
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<td>Yes</td>
<td>9/24/2018 Alexander</td>
<td>On 9/24/2018, Federico Popoff confirmed all information in this form.</td>
</tr>
<tr>
<td>Yes</td>
<td>1/9/2020 Alexander</td>
<td>On 1/8/2020, Federico Popoff confirmed all information in this form.</td>
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Summarize all current material interests in affected companies described above:

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</table>

Notes:
Part A. Material Interests in Companies

**Equity**

1. Do you currently or in the past 24 months have you had equity in any for-profit company that develops, produces, markets, or distributes drugs, devices, services, or therapies used to diagnose, treat, monitor, manage, or alleviate health conditions? Equity includes stock, stock options, and other ownership interests but excludes diversified mutual fund shares.

    ☒ No

    ☐ Yes, as described below:

    Add rows as needed for each equity interest.

<table>
<thead>
<tr>
<th>Company</th>
<th>Description</th>
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</table>

**Patents and Royalties**

2. Do you currently or in the past 24 months have you owned patents for or received royalties from any intellectual property or product used to diagnose, treat, monitor, manage, or alleviate health conditions?

    ☒ No

    ☐ Yes, as described below:

    Add rows as needed for each patent or royalty interest.

<table>
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<tr>
<th>Company</th>
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</table>
### Personal Income or Other Remuneration

3. Do you currently or in the past 24 months have you received personal income or other remuneration (e.g., reimbursement or financial support for the costs of travel) from any for-profit company that develops, produces, markets, or distributes drugs, devices, services, or therapies used to diagnose, treat, monitor, manage, or alleviate health conditions?

☐ No

☒ Yes, as described below:

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<tr>
<th>Company</th>
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<tr>
<td>Roche</td>
<td>Expert testimony - Guideline development methods</td>
<td>October 2016</td>
<td>Not a COI. See Part C.</td>
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### Industry-Funded Research

4. Do you currently or in the past 24 months have you been involved in research funded or supported (e.g., in kind support) by any for-profit company that develops, produces, markets, or distributes drugs, devices, services, or therapies used to diagnose, treat, monitor, manage, or alleviate health conditions?

☒ No

☐ Yes, as described below:

<table>
<thead>
<tr>
<th>Column 1</th>
<th>Name the company funding or supporting the research.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Column 2</td>
<td>Briefly describe the research project. Indicate if funding or support goes to you directly or to your institution.</td>
</tr>
</tbody>
</table>
Column 3  Describe your role: (a) national or overall principal investigator, (b) member of a steering committee of a study that does not have a principal investigator, (c) site or local investigator. If other than these options, please describe.

Column 4  Indicate when your involvement ended, if applicable. (If your involvement has not yet ended, indicate “current” or “ongoing.”)

Add rows as needed for each research project.

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My Partner’s or Spouse’s Interests

5. Currently or in the past 24 months has your partner or spouse had any of the interests described in questions 1-4?

☒ No

☐ Yes, as described below:

Add rows as needed for each interest.

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Part B. Interests That Are Not Mainly Financial

You have been invited to participate as a researcher on systematic evidence reviews that will inform clinical practice guidelines by the American Society of Hematology on the following topic:

Venous thromboembolism

The questions that follow are designed to elicit information about personal beliefs, intellectual positions or opinions, institutional relationships, and other interests that are not mainly financial and that may be relevant to guidelines on the above topic.

Personal Beliefs

1. Do you have strongly held beliefs related to the topic of these guidelines?
   - ☒ No
   - ☐ Yes
   If yes, please explain:

Previously Published Opinions

2. Have you ever authored, coauthored, or publicly provided an opinion related to the topic of these guidelines, e.g., a clinical practice guideline, textbook, review article, meeting poster or presentation, grand rounds talk, letter to the editor?
   - ☒ No
   - ☐ Yes
   If yes, what were those views and where were they made?

Research

3. Currently or in the past 24 months, have you been involved in a leadership role in any research project not already reported under Part A, Question 4, relevant to the topic of these guidelines, e.g., a research project funded by a nonprofit or governmental organization?
   - ☒ No
☐ Yes, as described below:

Column 1 Name the entity funding the research.

Column 2 Describe the research project.

Column 3 Describe your role: (a) national or overall principal investigator, (b) member of a steering committee of a study that does not have a principal investigator, (c) site or local investigator. If other than these options, please describe.

Column 4 Indicate when your involvement ended, if applicable. (If your involvement has not yet ended, indicate “current” or “ongoing.”)

Add rows as needed for each research project.

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Institutional Relationships

4. Could your salary be affected by recommendations on this topic? no

5. Do you generate revenues for your institution or employer by clinical activity, teaching, speaking, consulting, testifying, writing, or otherwise sharing your knowledge or opinions about this guideline topic?

☐ Don’t know

☒ No

☐ Yes

If yes, please explain:

6. Could your institution benefit or be harmed by recommendations of guidelines on this topic?

☐ Don’t know

☒ No

☐ Yes

If yes, please explain:
Career Advancement
7. How would you characterize the support you would receive from your primary mentor, institution, or other entities if your contributions to guidelines on this topic generated a strong reaction from peers outside your institution?

Advocacy and Policy Positions
8. Do you work for or are you a member of an organization with a stated position related to the topic of these guidelines, e.g., position statement, editorial, blog, amicus brief, or legislature or legal testimony?
☐ No
☐ Yes. Name of organization(s): ___
If yes, are you involved in formulating or voting for positions?
☐ No
☐ Yes
If yes, could recommendations of these guidelines conflict with policies you have promoted or are obligated to follow?
☐ Don’t know or not applicable
☐ No
☐ Yes
If yes, please explain:

Professional Specialty
9. What is your primary profession? If you are a clinician, what is your clinical specialty or subspecialty?
Medical doctor, epidemiologist

10. Do you prescribe or otherwise recommend diagnostic tests or treatments that may be addressed by these guidelines?
☐ No
☐ Yes
If yes, please explain:
Expected Interests

11. Do you expect new financial or nonfinancial interests relevant to the topic of these guidelines not already declared in Part A or Part B of this form?

☒  No

☐  Yes

If yes, please describe:
## Part C. Summary (ASH Internal Use)

ASH will review your disclosures and summarize here interests that are judged to be current, material, and with an affected company. You will then be invited to review our determinations and to agree to make all parts of this form (A, B and C) publically available.

### Guideline topic:

<table>
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<th>Values and preferences (systematic review)</th>
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<th>Approved to participate?</th>
<th>Reviewer name and date</th>
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| Yes                      | 9/24/18 Alexander, Kunkle, Rajasekhar | For the ASH VTE guidelines project, Dr. Rodriguez screened titles and abstracts for a systematic review on patient values and preferences. This review informed all of the ASH VTE guidelines (prevention in medical patients, prevention in surgical patients, diagnosis, treatment, optimal management of anticoagulation, thrombophilia, pediatric VTE, VTE in the context of pregnancy, HIT, and VTE in patients with cancer).

During her work on the review, Dr. Rodriguez received direct payments from Roche for expert testimony about guideline development methods. Roche markets thrombolysis drugs and diagnostic assays, reagents and instruments used for anticoagulation monitoring and testing.

In our opinion, this is not a conflict because the review did not address any specific interventions by Roche or any for-profit company; instead, the review examined patient values around outcomes such as thrombosis and bleeding that are common to many interventions used to manage VTE.

Nevertheless, to address possible concerns about perceived conflict, the following management strategies have been used:

- Dr. Rodriguez did not have a leadership role on the review.
- Her work on the review has been supervised by an individual without conflicts (Yuan Zhang). Other individuals...
without conflicts are also contributing to the review.

- Dr. Rodriguez did not attend any in-person or online meetings of any of the ASH guideline panels. She was not permitted and did not contribute to any of the deliberations of the panels or to the writing of the guideline manuscripts.

On 9/24/2018, Dr. Rodriguez confirmed all information in this form.

Summarize all current material interests in affected companies described above:

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Notes:
Part A. Material Interests in Companies

Equity
1. Do you currently or in the past 24 months have you had equity in any for-profit company that develops, produces, markets, or distributes drugs, devices, services, or therapies used to diagnose, treat, monitor, manage, or alleviate health conditions? Equity includes stock, stock options, and other ownership interests but excludes diversified mutual fund shares.

☒ No
☐ Yes, as described below:

Add rows as needed for each equity interest.

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Patents and Royalties
2. Do you currently or in the past 24 months have you owned patents for or received royalties from any intellectual property or product used to diagnose, treat, monitor, manage, or alleviate health conditions?

☒ No
☐ Yes, as described below:

Add rows as needed for each patent or royalty interest.

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3. Do you currently or in the past 24 months have you received personal income or other remuneration (e.g., reimbursement or financial support for the costs of travel) from any for-profit company that develops, produces, markets, or distributes drugs, devices, services, or therapies used to diagnose, treat, monitor, manage, or alleviate health conditions?

☐ No
☐ Yes, as described below:

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**Column 1** Name the company.

**Column 2** Describe the activity for which you received income or other remuneration, e.g., employment, consultancy, speakers bureau involvement, service on an advisory committee or board, expert testimony.

**Column 3** Indicate when the activity ended, if applicable. (If the activity has not yet ended, indicate “current” or “ongoing.”)

Add rows as needed for each activity.

To report activities that generate revenues for your institution, see Part B, Question 5.
Industry-Funded Research

4. Do you currently or in the past 24 months have you been involved in research funded or supported (e.g., in kind support) by any for-profit company that develops, produces, markets, or distributes drugs, devices, services, or therapies used to diagnose, treat, monitor, manage, or alleviate health conditions?

☒ No

☐ Yes, as described below:

Column 1 Name the company funding or supporting the research.

Column 2 Briefly describe the research project. Indicate if funding or support goes to you directly or to your institution.

Column 3 Describe your role: (a) national or overall principal investigator, (b) member of a steering committee of a study that does not have a principal investigator, (c) site or local investigator. If other than these options, please describe.

Column 4 Indicate when your involvement ended, if applicable. (If your involvement has not yet ended, indicate “current” or “ongoing.”)

Add rows as needed for each research project.

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My Partner’s or Spouse’s Interests

5. Currently or in the past 24 months has your partner or spouse had any of the interests described in questions 1-4?

☒ No

☐ Yes, as described below:
Add rows as needed for each interest.

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</table>
Part B. Interests That Are Not Mainly Financial

You have been invited to participate as a researcher on systematic evidence reviews that will inform clinical practice guidelines by the American Society of Hematology on the following topic:

Venous thromboembolism

The questions that follow are designed to elicit information about personal beliefs, intellectual positions or opinions, institutional relationships, and other interests that are not mainly financial and that may be relevant to guidelines on the above topic.

Personal Beliefs
1. Do you have strongly held beliefs related to the topic of these guidelines?
   - ☒ No
   - ☐ Yes

   If yes, please explain:

Previously Published Opinions
2. Have you ever authored, coauthored, or publicly provided an opinion related to the topic of these guidelines, e.g., a clinical practice guideline, textbook, review article, meeting poster or presentation, grand rounds talk, letter to the editor?
   - ☒ No
   - ☐ Yes

   If yes, what were those views and where were they made?

Research
3. Currently or in the past 24 months, have you been involved in a leadership role in any research project not already reported under Part A, Question 4, relevant to the topic of these guidelines, e.g., a research project funded by a nonprofit or governmental organization?
   - ☒ No
☐ Yes, as described below:

Column 1 Name the entity funding the research.

Column 2 Describe the research project.

Column 3 Describe your role: (a) national or overall principal investigator, (b) member of a steering committee of a study that does not have a principal investigator, (c) site or local investigator. If other than these options, please describe.

Column 4 Indicate when your involvement ended, if applicable. (If your involvement has not yet ended, indicate “current” or “ongoing.”)

Add rows as needed for each research project.

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Institutional Relationships

4. Could your salary be affected by recommendations on this topic?
   No

5. Do you generate revenues for your institution or employer by clinical activity, teaching, speaking, consulting, testifying, writing, or otherwise sharing your knowledge or opinions about this guideline topic?
   ☐ Don’t know
   ☒ No
   ☐ Yes

If yes, please explain:

6. Could your institution benefit or be harmed by recommendations of guidelines on this topic?
   ☐ Don’t know
   ☒ No
   ☐ Yes

If yes, please explain:
Career Advancement

7. How would you characterize the support you would receive from your primary mentor, institution, or other entities if your contributions to guidelines on this topic generated a strong reaction from peers outside your institution?

- Strong support and guidance

Advocacy and Policy Positions

8. Do you work for or are you a member of an organization with a stated position related to the topic of these guidelines, e.g., position statement, editorial, blog, amicus brief, or legislature or legal testimony?

- No
- Yes. Name of organization(s): ___

If yes, are you involved in formulating or voting for positions?

- No
- Yes

If yes, could recommendations of these guidelines conflict with policies you have promoted or are obligated to follow?

- Don’t know or not applicable
- No
- Yes

If yes, please explain:

Professional Specialty

9. What is your primary profession? If you are a clinician, what is your clinical specialty or subspecialty?

- Epidemiologist

10. Do you prescribe or otherwise recommend diagnostic tests or treatments that may be addressed by these guidelines?

- No
- Yes
If yes, please explain:

**Expected Interests**

11. Do you expect new financial or nonfinancial interests relevant to the topic of these guidelines not already declared in Part A or Part B of this form?

☒ No

☐ Yes

If yes, please describe:
Part C. Summary (ASH Internal Use)

ASH will review your disclosures and summarize here interests that are judged to be current, material, and with an affected company. You will then be invited to review our determinations and to agree to make all parts of this form (A, B and C) publically available.

Guideline topic:
Venous thromboembolism: Treatment (systematic reviews)
Venous thromboembolism: Nonsurgical (systematic reviews)

<table>
<thead>
<tr>
<th>Approved to participate?</th>
<th>Reviewer name and date</th>
<th>Notes</th>
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<tbody>
<tr>
<td>Yes</td>
<td>Alexander, 2/22/2017</td>
<td>No material conflicts of interest.</td>
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<tr>
<td>Yes</td>
<td>Alexander 7/18/2018</td>
<td>On 7/18/2018, Stephanie Ross confirmed all information in this form.</td>
</tr>
<tr>
<td>Yes</td>
<td>Alexander 1/9/2020</td>
<td>On 1/8/2020, Stephanie Ross confirmed all information in this form.</td>
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Summarize all current material interests in affected companies described above:

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</table>

Notes:
Part A. Material Interests in Companies

**Equity**

1. Do you currently or in the past 24 months have you had equity in any for-profit company that develops, produces, markets, or distributes drugs, devices, services, or therapies used to diagnose, treat, monitor, manage, or alleviate health conditions? Equity includes stock, stock options, and other ownership interests but excludes diversified mutual fund shares.

☐ No
☐ Yes, as described below:

Add rows as needed for each equity interest.

<table>
<thead>
<tr>
<th>Company</th>
<th>Description</th>
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**Patents and Royalties**

2. Do you currently or in the past 24 months have you owned patents for or received royalties from any intellectual property or product used to diagnose, treat, monitor, manage, or alleviate health conditions?

☐ No
☐ Yes, as described below:

Add rows as needed for each patent or royalty interest.

<table>
<thead>
<tr>
<th>Company</th>
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</table>
3. Do you currently or in the past 24 months have you received personal income or other remuneration (e.g., reimbursement or financial support for the costs of travel) from any for-profit company that develops, produces, markets, or distributes drugs, devices, services, or therapies used to diagnose, treat, monitor, manage, or alleviate health conditions?

☒ No

☐ Yes, as described below:

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</table>

**Personal Income or Other Remuneration**

Add rows as needed for each activity.

To report activities that generate revenues for your institution, see Part B, Question 5.
Industry-Funded Research

4. Do you currently or in the past 24 months have you been involved in research funded or supported (e.g., in kind support) by any for-profit company that develops, produces, markets, or distributes drugs, devices, services, or therapies used to diagnose, treat, monitor, manage, or alleviate health conditions?

☒ No
☐ Yes, as described below:

Column 1 Name the company funding or supporting the research.
Column 2 Briefly describe the research project. Indicate if funding or support goes to you directly or to your institution.
Column 3 Describe your role: (a) national or overall principal investigator, (b) member of a steering committee of a study that does not have a principal investigator, (c) site or local investigator. If other than these options, please describe.
Column 4 Indicate when your involvement ended, if applicable. (If your involvement has not yet ended, indicate “current” or “ongoing.”)

Add rows as needed for each research project.

<table>
<thead>
<tr>
<th>Company</th>
<th>Description of Research</th>
<th>My Role</th>
<th>End Date</th>
<th>For ASH Internal Use</th>
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My Partner’s or Spouse’s Interests

5. Currently or in the past 24 months has your partner or spouse had any of the interests described in questions 1-4?

☒ No
☐ Yes, as described below:
Add rows as needed for each interest.

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</table>
Part B. Interests That Are Not Mainly Financial

You have been invited to participate as a researcher on systematic evidence reviews that will inform clinical practice guidelines by the American Society of Hematology on the following topic:

Venous thromboembolism

The questions that follow are designed to elicit information about personal beliefs, intellectual positions or opinions, institutional relationships, and other interests that are not mainly financial and that may be relevant to guidelines on the above topic.

Personal Beliefs
1. Do you have strongly held beliefs related to the topic of these guidelines?
   ☒ No
   ☐ Yes
   If yes, please explain:

Previously Published Opinions
2. Have you ever authored, coauthored, or publicly provided an opinion related to the topic of these guidelines, e.g., a clinical practice guideline, textbook, review article, meeting poster or presentation, grand rounds talk, letter to the editor?
   ☒ No
   ☐ Yes
   If yes, what were those views and where were they made?

Research
3. Currently or in the past 24 months, have you been involved in a leadership role in any research project not already reported under Part A, Question 4, relevant to the topic of these guidelines, e.g., a research project funded by a nonprofit or governmental organization?
   ☒ No
☐ Yes, as described below:

**Column 1** Name the entity funding the research.

**Column 2** Describe the research project.

**Column 3** Describe your role: (a) national or overall principal investigator, (b) member of a steering committee of a study that does not have a principal investigator, (c) site or local investigator. If other than these options, please describe.

**Column 4** Indicate when your involvement ended, if applicable. (If your involvement has not yet ended, indicate “current” or “ongoing.”)

Add rows as needed for each research project.

<table>
<thead>
<tr>
<th>Funder</th>
<th>Description of Research</th>
<th>My Role</th>
<th>End Date</th>
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</table>

**Institutional Relationships**

4. Could your salary be affected by recommendations on this topic?  
   ☐ Don’t know  
   ✒ No  
   ☐ Yes

If yes, please explain:

5. Do you generate revenues for your institution or employer by clinical activity, teaching, speaking, consulting, testifying, writing, or otherwise sharing your knowledge or opinions about this guideline topic?
   ☐ Don’t know  
   ✒ No  
   ☐ Yes

If yes, please explain:

6. Could your institution benefit or be harmed by recommendations of guidelines on this topic?
   ☐ Don’t know  
   ✒ No  
   ☐ Yes
Career Advancement
7. How would you characterize the support you would receive from your primary mentor, institution, or other entities if your contributions to guidelines on this topic generated a strong reaction from peers outside your institution?

Advocacy and Policy Positions
8. Do you work for or are you a member of an organization with a stated position related to the topic of these guidelines, e.g., position statement, editorial, blog, amicus brief, or legislature or legal testimony?

☒ No
☐ Yes. Name of organization(s): ___
If yes, are you involved in formulating or voting for positions?

☐ No
☐ Yes
If yes, could recommendations of these guidelines conflict with policies you have promoted or are obligated to follow?

☐ Don’t know or not applicable
☐ No
☐ Yes
If yes, please explain:

Professional Specialty
9. What is your primary profession? If you are a clinician, what is your clinical specialty or subspecialty?

10. Do you prescribe or otherwise recommend diagnostic tests or treatments that may be addressed by these guidelines?

☒ No
☐ Yes
If yes, please explain:

Expected Interests

11. Do you expect new financial or nonfinancial interests relevant to the topic of these guidelines not already declared in Part A or Part B of this form?
   ☒ No
   ☐ Yes

   If yes, please describe:
Part C. Summary (ASH Internal Use)

ASH will review your disclosures and summarize here interests that are judged to be current, material, and with an affected company. You will then be invited to review our determinations and to agree to make all parts of this form (A, B and C) publicly available.

Guideline topic: Venous thromboembolism

<table>
<thead>
<tr>
<th>Approved to participate?</th>
<th>Reviewer Name and Date</th>
<th>Notes</th>
</tr>
</thead>
<tbody>
<tr>
<td>Yes</td>
<td>5/31/2018 Alexander</td>
<td>No material conflicts of interest.</td>
</tr>
<tr>
<td>Yes</td>
<td>2/3/2020 Alexander</td>
<td>On 2/3/2020, Jaiming Wu confirmed all information in this form.</td>
</tr>
</tbody>
</table>

Summarize all current material interests in affected companies described above:

<table>
<thead>
<tr>
<th>Company</th>
<th>Description</th>
<th>Disclosure Date</th>
<th>ASH Notes</th>
</tr>
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</table>

Notes:
Part A. Material Interests in Companies

Equity
1. Do you currently or in the past 24 months have you had equity in any for-profit company that develops, produces, markets, or distributes drugs, devices, services, or therapies used to diagnose, treat, monitor, manage, or alleviate health conditions? Equity includes stock, stock options, and other ownership interests but excludes diversified mutual fund shares.

☒ No

☐ Yes, as described below:

Add rows as needed for each equity interest.

<table>
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<th>Company</th>
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Patents and Royalties
2. Do you currently or in the past 24 months have you owned patents for or received royalties from any intellectual property or product used to diagnose, treat, monitor, manage, or alleviate health conditions?

☒ No

☐ Yes, as described below:

Add rows as needed for each patent or royalty interest.

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Personal Income or Other Remuneration

3. Do you currently or in the past 24 months have you received personal income or other remuneration (e.g., reimbursement or financial support for the costs of travel) from any for-profit company that develops, produces, markets, or distributes drugs, devices, services, or therapies used to diagnose, treat, monitor, manage, or alleviate health conditions?

☒ No

☐ Yes, as described below:

Column 1 Name the company.

Column 2 Describe the activity for which you received income or other remuneration, e.g., employment, consultancy, speakers bureau involvement, service on an advisory committee or board, expert testimony.

Column 3 Indicate when the activity ended, if applicable. (If the activity has not yet ended, indicate “current” or “ongoing.”)

Add rows as needed for each activity.

To report activities that generate revenues for your institution, see Part B, Question 5.

<table>
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Industry-Funded Research

4. Do you currently or in the past 24 months have you been involved in research funded or supported (e.g., in kind support) by any for-profit company that develops, produces, markets, or distributes drugs, devices, services, or therapies used to diagnose, treat, monitor, manage, or alleviate health conditions?

☒ No

☐ Yes, as described below:

Column 1 Name the company funding or supporting the research.

Column 2 Briefly describe the research project. Indicate if funding or support goes to you directly or to your institution.

Column 3 Describe your role: (a) national or overall principal investigator, (b) member of a steering committee of a study that does not have a principal investigator, (c) site or local investigator. If other than these options, please describe.
Column 4  Indicate when your involvement ended, if applicable. (If your involvement has not yet ended, indicate “current” or “ongoing.”)

Add rows as needed for each research project.

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My Partner’s or Spouse’s Interests

5. Currently or in the past 24 months has your partner or spouse had any of the interests described in questions 1-4?

☒ No

☐ Yes, as described below:

Add rows as needed for each interest.

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Part B. Interests That Are Not Mainly Financial

You have been invited to participate as a researcher on systematic evidence reviews that will inform clinical practice guidelines by the American Society of Hematology on the following topic:

**Venous thromboembolism**

The questions that follow are designed to elicit information about personal beliefs, intellectual positions or opinions, institutional relationships, and other interests that are not mainly financial and that may be relevant to guidelines on the above topic.

**Personal Beliefs**

1. Do you have strongly held beliefs related to the topic of these guidelines?
   - ☒ No
   - ☐ Yes

   If yes, please explain:

**Previously Published Opinions**

2. Have you ever authored, coauthored, or publicly provided an opinion related to the topic of these guidelines, e.g., a clinical practice guideline, textbook, review article, meeting poster or presentation, grand rounds talk, letter to the editor?
   - ☐ No
   - ☒ Yes

   If yes, what were those views and where were they made?

   1. Making Decisions about Thromboprophylaxis in Pregnancy: Women's Values and Preferences
   2. Women's values and preferences for thromboprophylaxis during pregnancy: a comparison of direct-choice and decision analysis using patient specific utilities.
Research

3. Currently or in the past 24 months, have you been involved in a leadership role in any research project not already reported under Part A, Question 4, relevant to the topic of these guidelines, e.g., a research project funded by a nonprofit or governmental organization?

☒ No

☐ Yes, as described below:

<table>
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<tr>
<th>Column 1</th>
<th>Name the entity funding the research.</th>
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<td>Column 2</td>
<td>Describe the research project.</td>
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<tr>
<td>Column 3</td>
<td>Describe your role: (a) national or overall principal investigator, (b) member of a steering committee of a study that does not have a principal investigator, (c) site or local investigator. If other than these options, please describe.</td>
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<td>Column 4</td>
<td>Indicate when your involvement ended, if applicable. (If your involvement has not yet ended, indicate “current” or “ongoing.”)</td>
</tr>
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</table>

Add rows as needed for each research project.

Institutional Relationships

4. Could your salary be affected by recommendations on this topic?

NO

5. Do you generate revenues for your institution or employer by clinical activity, teaching, speaking, consulting, testifying, writing, or otherwise sharing your knowledge or opinions about this guideline topic?

☐ Don’t know

☒ No

☐ Yes

If yes, please explain:

6. Could your institution benefit or be harmed by recommendations of guidelines on this topic?

☐ Don’t know
No

If yes, please explain:

Career Advancement

7. How would you characterize the support you would receive from your primary mentor, institution, or other entities if your contributions to guidelines on this topic generated a strong reaction from peers outside your institution?

I would receive lots of support from my mentor and institution on this.

Advocacy and Policy Positions

8. Do you work for or are you a member of an organization with a stated position related to the topic of these guidelines, e.g., position statement, editorial, blog, amicus brief, or legislature or legal testimony?

No

If yes, Name of organization(s): ___

If yes, are you involved in formulating or voting for positions?

No

Yes

If yes, could recommendations of these guidelines conflict with policies you have promoted or are obligated to follow?

Don’t know or not applicable

No

Yes

If yes, please explain:

Professional Specialty

9. What is your primary profession? If you are a clinician, what is your clinical specialty or subspecialty?

Researcher and clinician; Physician.
10. Do you prescribe or otherwise recommend diagnostic tests or treatments that may be addressed by these guidelines?

☒ No

☐ Yes

If yes, please explain:

Expected Interests

11. Do you expect new financial or nonfinancial interests relevant to the topic of these guidelines not already declared in Part A or Part B of this form?

☒ No

☐ Yes

If yes, please describe:
Part C. Summary (ASH Internal Use)

ASH will review your disclosures and summarize here interests that are judged to be current, material, and with an affected company. You will then be invited to review our determinations and to agree to make all parts of this form (A, B and C) publically available.

<table>
<thead>
<tr>
<th>Guideline topic:</th>
<th>Treatment of VTE (systematic reviews)</th>
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<tr>
<th>Approved to participate?</th>
<th>Reviewer name and date</th>
<th>Notes</th>
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<tr>
<td>Yes</td>
<td>10/27/16 Alexander; 10/31/16 Kunkle</td>
<td>No material conflicts of interest</td>
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<tr>
<td>Yes</td>
<td>8/31/2018 Alexander</td>
<td>On 8/30/2018, Yuqing Zhang confirmed all information in this form.</td>
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<tr>
<td>Yes</td>
<td>1/9/2020 Alexander</td>
<td>On 1/8/2020, Yuqing Zhang confirmed all information in this form.</td>
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Summarize all current material interests in affected companies described above:

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