Date:	6/11/2024
Your Name:	Joan Clària
Manuscript Title:	Albumin Reprograms the B cell Transcriptional Landscape and Rescues Neutrophil Dysfunction in Immunocompromised Patients with Advanced Cirrhosis.
Manuscript Number (if known):	JHEPR-D-23-01336

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		Time frame: Since the initial planning	of the work
1	All support for the present manuscript (e.g., funding, provision of study materials, medical writing, article processing charges, etc.)  No time limit for this item.	None  Time frame: past 36 month	Click the tab key to add additional rows.
2	Grants or contracts from any entity (if not indicated in item #1 above).	None	
3	Royalties or licenses	None None	

		Name all entities with whom you have this relationship or indicate none (add rows as needed)	Specifications/Comments (e.g., if payments were made to you or to your institution)
4	Consulting fees	None None	
5	Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or educational events	None	
6	Payment for expert testimony	None	
7	Support for attending meetings and/or travel	None	
8	Patents planned, issued or pending	Use of albumin for the treatment of defective B cell function. European patent. Reference: EP21382248.9 World patent: WO 2022/200663 Al Use of albumin for regulating immune cells. European patent. Reference: EP23382639.5	Inventor
9	Participation on a Data Safety Monitoring Board or Advisory Board	None	
10	Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid	None	

		Name all entities with whom you have this relationship or indicate none (add rows as needed)	Specifications/Comments (e.g., if payments were made to you or to your institution)
11	Stock or stock options	None	
12	Receipt of equipment, materials, drugs, medical writing, gifts or other services	None	
13	Other financial or non-financial interests	None	
Plea	Please place an "X" next to the following statement to indicate your agreement:  I certify that I have answered every question and have not altered the wording of any of the questions on this form.		

Date:	6/13/2024
Your Name:	Vicente Arroyo
Manuscript Title:	Albumin Reprograms the B cell Transcriptional Landscape and Rescues Neutrophil Dysfunction in Immunocompromised Patients with Advanced Cirrhosis.
Manuscript Number (if known):	JHEPR-D-23-01336

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Date:	6/13/2024
Your Name:	Javier Fernandez
Manuscript Title:	Albumin Reprograms the B cell Transcriptional Landscape and Rescues Neutrophil Dysfunction in Immunocompromised Patients with Advanced Cirrhosis.
Manuscript Number (if known):	JHEPR-D-23-01336

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4	Consulting fees	None	
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6	Payment for expert testimony	None	
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6/14/2024
JRichard Moreau
Albumin Reprograms the B cell Transcriptional Landscape and Rescues Neutrophil Dysfunction in Immunocompromised Patients with Advanced Cirrhosis.
JHEPR-D-23-01336

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13	Other financial or non-financial interests	None	
Plea	Please place an "X" next to the following statement to indicate your agreement:    I certify that I have answered every question and have not altered the wording of any of the questions on this form.		

Date:	6/13/2024
Your Name:	Juan José Lozano Salvatierra
Manuscript Title:	Albumin Reprograms the B cell Transcriptional Landscape and Rescues Neutrophil Dysfunction in Immunocompromised Patients with Advanced Cirrhosis.
Manuscript Number (if known):	JHEPR-D-23-01336

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5	Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or educational events	None None	
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7	Support for attending meetings and/or travel	None	
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Plea 🖂	Please place an "X" next to the following statement to indicate your agreement:    I certify that I have answered every question and have not altered the wording of any of the questions on this form.		

Date: Your Name: Manuscript Title:			6/13/2024		
			Laura Jiménez-Gracia		
				Albumin Reprograms the B cell Transcriptional Landscape and Rescues Neutrophil Dysfunction in Immunocompromised Patients with Advanced Cirrhosis.	
Ма	nuscript Number (if	known	: _JHEPR-D-23-01336		
cor affe ind The epi	ntent of your manusc ected by the content icate a bias. If you ar e author's relationshi demiology of hyperte	ript. "F of the I re in do ps/activension,	related" means any relation with for-profit or no manuscript. Disclosure represents a commitme what about whether to list a relationship/activity writies/interests should be defined broadly. For	//interest, it is preferable that you do so.	
	tem #1 below, report me for disclosure is tl			vithout time limit. For all other items, the time	
			all entities with whom you have this onship or indicate none (add rows as ed)	Specifications/Comments (e.g., if payments were made to you or to your institution)	
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			Time frame: past 36 mo	onths	
2	Grants or contracts from any entity (if not indicated in item #1 above).		None		

1 12/13/2021 ICMJE Disclosure Form

		Name all entities with whom you have this relationship or indicate none (add rows as needed)	Specifications/Comments (e.g., if payments were made to you or to your institution)
3	Royalties or licenses	□ None	
4	Consulting fees	□ None	
5	Payment or honoraria for lectures, presentations , speakers bureaus, manuscript writing or educational events	□ None	
6	Payment for expert testimony	□ None	
7	Support for attending meetings and/or travel	□ None	
8	Patents planned, issued or pending	□ None	
9	Participation on a Data Safety Monitoring Board or Advisory Board	□ None	
10	Leadership or fiduciary role in other board,	□ None	

		Name all entities with whom you have this relationship or indicate none (add rows as needed)	Specifications/Comments (e.g., if payments were made to you or to your institution)
	society, committee or advocacy group, paid or unpaid		
11	Stock or stock options	□ None	
12	Receipt of equipment, materials, drugs, medical writing, gifts or other services	None	
13	Other financial or non-financial interests	□ None	
Plea X	Please place an "X" next to the following statement to indicate your agreement:  X I certify that I have answered every question and have not altered the wording of any of the questions on this form.		

Signature

3 12/13/2021 ICMJE Disclosure Form

Date:	6/13/2024
Your Name:	JUAN CAMILO NIETO SÁCHICA
Manuscript Title:	[Albumin Reprograms the B cell Transcriptional Landscape and Rescues Neutrophil Dysfunction in Immunocompromised Patients with Advanced Cirrhosis.
Manuscript Number (if known):	JHEPR-D-23-01336

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4	Consulting fees	□ None  OMNISCOPE	Payments were made to me
5	Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or educational events	None	
6	Payment for expert testimony	[⊠] None	
7	Support for attending meetings and/or travel	[⊠] None	
8	Patents planned, issued or pending	[⊠] None	
9	Participation on a Data Safety Monitoring Board or Advisory Board	None	
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Date:	6/14/2024
Your Name:	Xavi Marcos-Fa
Manuscript Title:	Albumin Reprograms the B cell Transcriptional Landscape and Rescues Neutrophil Dysfunction in Immunocompromised Patients with Advanced Cirrhosis.
Manuscript Number (if known):	JHEPR-D-23-01336

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Date:	6/14/2024
Your Name:	Emma Giarracco
Manuscript Title:	Albumin Reprograms the B cell Transcriptional Landscape and Rescues Neutrophil Dysfunction in Immunocompromised Patients with Advanced Cirrhosis.
Manuscript Number (if known):	JHEPR-D-23-01336
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Date:	6/14/2024
Your Name:	Emmanuel Weiss
Manuscript Title:	Albumin Reprograms the B cell Transcriptional Landscape and Rescues Neutrophil Dysfunction in Immunocompromised Patients with Advanced Cirrhosis.
Manuscript Number (if known):	JHEPR-D-23-01336

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

		Name all entities with whom you have this relationship or indicate none (add rows as needed)	Specifications/Comments (e.g., if payments were made to you or to your institution)
4	Consulting fees	None	
5	Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or educational events	None	
6	Payment for expert testimony	None	
7	Support for attending meetings and/or travel	None	
8	Patents planned, issued or pending	None	
9	Participation on a Data Safety Monitoring Board or Advisory Board	None	
10	Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid	None	

		Name all entities with whom you have this relationship or indicate none (add rows as needed)	Specifications/Comments (e.g., if payments were made to you or to your institution)
11	Stock or stock options	None	
12	Receipt of equipment, materials, drugs, medical writing, gifts or other services	None	
13	Other financial or non-financial interests	None	
Plea	Please place an "X" next to the following statement to indicate your agreement:    I certify that I have answered every question and have not altered the wording of any of the questions on this form.		

Date:	6/14/2024
Your Name:	Jonel Trebicka
Manuscript Title:	Albumin Reprograms the B cell Transcriptional Landscape and Rescues Neutrophil Dysfunction in Immunocompromised Patients with Advanced Cirrhosis.
Manuscript Number (if known):	JHEPR-D-23-01336

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Plea	Please place an "X" next to the following statement to indicate your agreement:    I certify that I have answered every question and have not altered the wording of any of the questions on this form.		

Date:	6/14/2024	
Your Name:	Inmaculada Hernández	
Manuscript Title:	Albumin Reprograms the B cell Transcriptional Landscape and Rescues Neutrophil Dysfunction in Immunocompromised Patients with Advanced Cirrhosis.	
Manuscript Number (if known):	JHEPR-D-23-01336	
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3	Royalties or licenses	None	

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Plea	Please place an "X" next to the following statement to indicate your agreement:    I certify that I have answered every question and have not altered the wording of any of the questions on this form.		

Date:	6/14/2024
Your Name:	Mireia Casulleras
Manuscript Title:	Albumin Reprograms the B cell Transcriptional Landscape and Rescues Neutrophil Dysfunction in Immunocompromised Patients with Advanced Cirrhosis.
Manuscript Number (if known):	JHEPR-D-23-01336

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3	Royalties or licenses	None None	

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9	Participation on a Data Safety Monitoring Board or Advisory Board	None	
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11	Stock or stock options	None	
12	Receipt of equipment, materials, drugs, medical writing, gifts or other services	None	
13	Other financial or non-financial interests	None	
Plea	Please place an "X" next to the following statement to indicate your agreement:    I certify that I have answered every question and have not altered the wording of any of the questions on this form.		

Date:	6/13/2024	
Your Name:	Cristina López-Vicario	
Manuscript Title:	Albumin Reprograms the B cell Transcriptional Landscape and Rescues Neutrophil Dysfunction in Immunocompromised Patients with Advanced Cirrhosis.	
Manuscript Number (if known):	JHEPR-D-23-01336	
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In item #1 below, report all support for the work reported in this manuscript without time limit. For all other items, the time frame for disclosure is the past 36 months.

that medication is not mentioned in the manuscript.

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		Time frame: past 36 month	ns
2	Grants or contracts from any entity (if not indicated in item #1 above).	None None	
3	Royalties or licenses	None	

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4	Consulting fees	None	
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6	Payment for expert testimony	None	
7	Support for attending meetings and/or travel	None	
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10	Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid	None	

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11	Stock or stock options	None	
12	Receipt of equipment, materials, drugs, medical writing, gifts or other services	None	
13	Other financial or non-financial interests	None	
Plea [⊠]	Please place an "X" next to the following statement to indicate your agreement:    I certify that I have answered every question and have not altered the wording of any of the questions on this form.		

3 12/13/2021 ICMJE Disclosure Form

Date:	6/13/2024
Your Name:	Sinan MULDUR
Manuscript Title:	Albumin Reprograms the B cell Transcriptional Landscape and Rescues Neutrophil Dysfunction in Immunocompromised Patients with Advanced Cirrhosis.
Manuscript Number (if known):	JHEPR-D-23-01336

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		Time frame: past 36 month	is
2	Grants or contracts from any entity (if not indicated in item #1 above).	■ None	
3	Royalties or licenses	None None	



		Name all entities with whom you have this elationship or indicate none (add rows as needed)  Specifications/Comments (e.g., if payments were made to you or to your institution)
4	Consulting fees	None None
5	Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or educational events	None None □
6	Payment for expert testimony	None
7	Support for attending meetings and/or travel	None
8	Patents planned, issued or pending	None None
9	Participation on a Data Safety Monitoring Board or Advisory Board	[⊠] None
10	Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid	None



		Name all entities with whom you have this relationship or indicate none (add rows as needed)	Specifications/Comments (e.g., if payments were made to you or to your institution)
11	Stock or stock options	None	
12	Receipt of equipment, materials, drugs, medical writing, gifts or other services	None None	
13	Other financial or non-financial interests	None	
Plea	Please place an "X" next to the following statement to indicate your agreement:    I certify that I have answered every question and have not altered the wording of any of the questions on this form.		

500-14-2024 Sinon mulden

Date:	6/13/2024
Your Name:	Alex Hopke
Manuscript Title:	Albumin Reprograms the B cell Transcriptional Landscape and Rescues Neutrophil Dysfunction in Immunocompromised Patients with Advanced Cirrhosis.
Manuscript Number (if known):	JHEPR-D-23-01336

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		Time frame: past 36 months	
2	Grants or contracts from any entity (if not indicated in item #1 above).		This grant was awarded to me after becoming faculty at my new institution of ETSU Quillen College of medicine. Payments are made to the institution which are then used by me to support my research.

		Name all entities with whom you have this relationship or indicate none (add rows as needed)	Specifications/Comments (e.g., if payments were made to you or to your institution)
æ	Royalties or licenses	None	
4	Consulting fees	None	
5	Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or educational events	None None	
6	Payment for expert testimony	⊠  None	
7	Support for attending meetings and/or travel	None  American Association of Immunology	I was awarded a 2024 AAI Early Career Faculty Travel Grant to defray costs with my attendance to the AAI Immunology 2024 meeting. This award was paid to me.
8	Patents planned, issued or pending	None	
9	Participation on a Data Safety Monitoring Board or Advisory Board	None	

			e all entities with whom you have this onship or indicate none (add rows as needed)	Specifications/Comments (e.g., if payments were made to you or to your institution)
10	Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid		None	
11	Stock or stock options		None	
12	Receipt of equipment, materials, drugs, medical writing, gifts or other services		None	
13	Other financial or non-financial interests		None	
	Please place an "X" next to the following statement to indicate your agreement:			
	I certify that I have answered every question and have not altered the wording of any of the questions on this form.			

Date:	6/14/2024	
Your Name:	Alexandru Vlagea	
Manuscript Title:	Albumin Reprograms the B cell Transcriptional Landscape and Rescues Neutrophil Dysfunction in Immunocompromised Patients with Advanced Cirrhosis.	
Manuscript Number (if known):	JHEPR-D-23-01336	
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Plea	Please place an "X" next to the following statement to indicate your agreement:  I certify that I have answered every question and have not altered the wording of any of the questions on this form.		

Date:	6/13/2024
Your Name:	Ana M. Aransay
Manuscript Title:	Albumin Reprograms the B cell Transcriptional Landscape and Rescues Neutrophil Dysfunction in Immunocompromised Patients with Advanced Cirrhosis.
Manuscript Number (if known):	JHEPR-D-23-01336

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3	Royalties or licenses	None	

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4	Consulting fees	None None	
5	Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or educational events	None None	
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11	Stock or stock options	Image: square of the property o	
12	Receipt of equipment, materials, drugs, medical writing, gifts or other services	None	
13	Other financial or non-financial interests	⊠ None	
Plea [⊠]	Please place an "X" next to the following statement to indicate your agreement:     Certify that I have answered every question and have not altered the wording of any of the questions on this form.		

1	/

Ana M. Aransay CIC bioGUNE

Date:	6/13/2024
Your Name:	Domenica Marchese
-	Albumin Reprograms the B cell Transcriptional Landscape and Rescues Neutrophil Dysfunction in Immunocompromised Patients with Advanced Cirrhosis.
Manuscript Number (if known):	JHEPR-D-23-01336

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12	Receipt of equipment, materials, drugs, medical writing, gifts or other services	None	
13	Other financial or non-financial interests	None	
Plea	Please place an "X" next to the following statement to indicate your agreement:    I certify that I have answered every question and have not altered the wording of any of the questions on this form.		

6/13/2024
Mauro Bernardi
Albumin Reprograms the B cell Transcriptional Landscape and Rescues Neutrophil Dysfunction in Immunocompromised Patients with Advanced Cirrhosis.
JHEPR-D-23-01336

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3	indicated in item #1 above).	None	
	licenses		

		Name all entities with whom you have this relationship or indicate none (add rows as needed)	Specifications/Comments (e.g., if payments were made to you or to your institution)
4	Consulting fees	□ None  CSL Behring GmbH	Payments to me
		Grifols SA	Payments to me
5	Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or educational events	CSL Behring GmbH Grifols SA Takeda Octapharma SA	Payments to me Payments to me Payments to me Payments to me
6	Payment for expert testimony	None	
7	Support for attending meetings and/or travel	None	
8	Patents planned, issued or pending	None	
9	Participation on a Data Safety Monitoring Board or Advisory Board	None	
10	Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid	None None	

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11	Stock or stock options	⊠ None	
12	Receipt of equipment, materials, drugs, medical writing, gifts or other services	None	
13	Other financial or non-financial interests	⊠ None	
Plea	Please place an "X" next to the following statement to indicate your agreement:  I certify that I have answered every question and have not altered the wording of any of the questions on this form.		

Date:	6/14/2024	
Your Name:	Rajiv Jalan	
Manuscript Title:	Albumin Reprograms the B cell Transcriptional Landscape and Rescues Neutrophil Dysfunction in Immunocompromised Patients with Advanced Cirrhosis.	
Manuscript Number (if known):	JHEPR-D-23-01336	
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The author's relationships/activities/interests should be defined broadly. For example, if your manuscript pertains to the epidemiology of hypertension, you should declare all relationships with manufacturers of antihypertensive medication, even if that medication is not mentioned in the manuscript.

		Name all and the could be a large and the	Consideration (Constant)
		Name all entities with whom you have this relationship or indicate none (add rows as needed)	Specifications/Comments (e.g., if payments were made to you or to your institution)
		Time frame: Since the initial planning o	of the work
1	All support for the present manuscript (e.g., funding, provision of study materials, medical writing, article processing charges, etc.)  No time limit for this item.		Click the tab key to add additional rows.
		Time frame: past 36 months	5
2	Grants or contracts from any entity (if not indicated in item #1 above).	None	
3	Royalties or licenses	None	

		Name all entities with whom you have this relationship or indicate none (add rows as needed)	Specifications/Comments (e.g., if payments were made to you or to your institution)
4	Consulting fees	None	
5	Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or educational events	None None	
6	Payment for expert testimony	⊠ None	
7	Support for attending meetings and/or travel	None	
8	Patents planned, issued or pending	None	
9	Participation on a Data Safety Monitoring Board or Advisory Board	⊠ None	
10	Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid	☐ None  Yaqrit, Ltd  Takeda	research collaborations Research collaborations

		Name all entities with whom you have this relationship or indicate none (add rows as needed)	Specifications/Comments (e.g., if payments were made to you or to your institution)
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12	Receipt of equipment, materials, drugs, medical writing, gifts or other services	None	
13	Other financial or	□ None	
	interests	Yaqrit Ltd	founder, a spin out company from University College London
		Thoeris Ltd	founder Detected by USI and France II.
		OPA	Inventor. Patented by UCL and licensed to Mallinckrodt Pharma
	Please place an "X" next to the following statement to indicate your agreement:		
	I certify that I have answered every question and have not altered the wording of any of the questions on this form.		

Date:	6/14/2024
Your Name:	Paolo Angeli
Manuscript Title:	Albumin Reprograms the B cell Transcriptional Landscape and Rescues Neutrophil Dysfunction in Immunocompromised Patients with Advanced Cirrhosis.
Manuscript Number (if known):	JHEPR-D-23-01336
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13	Other financial or non-financial interests	None	
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Date:	6/13/2024	
Your Name:	Giuliana Magri	
Manuscript Title:	Albumin Reprograms the B cell Transcriptional Landscape and Rescues Neutrophil Dysfunction in Immunocompromised Patients with Advanced Cirrhosis.	
Manuscript Number (if known):	JHEPR-D-23-01336	

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5	Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or educational events	None	
6	Payment for expert testimony	None	
7	Support for attending meetings and/or travel	None	
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Date:	6/13/2024
Your Name:	Andrea Cerutti
Manuscript Title:	Albumin Reprograms the B cell Transcriptional Landscape and Rescues Neutrophil Dysfunction in Immunocompromised Patients with Advanced Cirrhosis.
Manuscript Number (if known):	JHEPR-D-23-01336

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3	Royalties or licenses	None None	

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Date:	6/14/2024
Your Name:	Daniel Irimia
Manuscript Title:	Albumin Reprograms the B cell Transcriptional Landscape and Rescues Neutrophil Dysfunction in Immunocompromised Patients with Advanced Cirrhosis.
Manuscript Number (if known):	JHEPR-D-23-01336

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3	Royalties or licenses	None	

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4	Consulting fees	None	
5	Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or educational events	None	
6	Payment for expert testimony	None	
7	Support for attending meetings and/or travel	None	
8	Patents planned, issued or pending	None	
9	Participation on a Data Safety Monitoring Board or Advisory Board	None	
10	Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid	None	

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12	Receipt of equipment, materials, drugs, medical writing, gifts or other services	None	
13	Other financial or non-financial interests	None	
Plea	Please place an "X" next to the following statement to indicate your agreement:  I certify that I have answered every question and have not altered the wording of any of the questions on this form.		

Date:	6/14/2024	
Your Name:	Holger Heyn	
Manuscript Title:	Albumin Reprograms the B cell Transcriptional Landscape and Rescues Neutrophil Dysfunction in Immunocompromised Patients with Advanced Cirrhosis.	
Manuscript Number (if known):	JHEPR-D-23-01336	

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3	Royalties or licenses	None None		

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4	Consulting fees	□ None    Moderna	
5	Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or educational events	None None	
6	Payment for expert testimony	⊠ None	
7	Support for attending meetings and/or travel	None	
8	Patents planned, issued or pending	None	
9	Participation on a Data Safety Monitoring Board or Advisory Board	None   MiRXES	Advisory Board Member
10	Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid	None None	

		Name all entities with whom you have this relationship or indicate none (add rows as needed)	Specifications/Comments (e.g., if payments were made to you or to your institution)	
11	Stock or stock options	None		
		Omniscope	Shareholder	
Receipt of equipment, None				
	materials, drugs, medical writing,			
	gifts or other services			
13	Other financial or None			
	interests	Omniscope	Co-founder Co-founder	
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