

Prophylaxis of VTE in Surgical Patients

Supplement 3: Disclosure of Interests

Forms of Researchers Who Contributed to the Guidelines

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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

Yes, as described below:

Add rows as needed for each equity interest.

<i>Company</i>	<i>Description</i>	<i>Date Divested</i>	<i>For ASH Internal Use</i>

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.

<i>Company</i>	<i>Description</i>	<i>Date Divested</i>	<i>For ASH Internal Use</i>

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.

<i>Company</i>	<i>Description</i>	<i>End Date</i>	<i>For ASH Internal Use</i>

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.

<i>Company</i>	<i>Description of Research</i>	<i>My Role</i>	<i>End Date</i>	<i>For ASH Internal Use</i>

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.

<i>Company</i>	<i>Description</i>	<i>End Date</i>	<i>For ASH Internal Use</i>

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.

<i>Funder</i>	<i>Description of Research</i>	<i>My Role</i>	<i>End Date</i>

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?

There would likely be positive support to continue guideline development with ASH or other organizations in the future

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 master's of public health student and research assistant under the supervision of Dr. Holger Schunemann. My academic background is in microbiology and systematic reviews.

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:	Prevention of VTE in Surgical Hospitalized Patients (systematic reviews) Prevention of VTE in Medical Patients (systematic reviews) Thrombophilia (systematic reviews)
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<i>Approved to participate?</i>	<i>Reviewer name and date</i>	<i>Notes</i>
Yes	10/24/16 Alexander; 10/26/16 Kunkle	No material conflicts of interest
Yes	8/13/2018 Alexander	On 8/13/2018, Tejan Baldeh confirmed all information in this form.
Yes	7/24/2019 Alexander	On 6/21/2019, Tejan Baldeh confirmed all information in this form.

Summarize all current material interests in affected companies described above:

<i>Company</i>	<i>Description</i>	<i>Disclosure Date</i>	<i>ASH Notes</i>

Notes:



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

Yes, as described below:

Add rows as needed for each equity interest.

<i>Company</i>	<i>Description</i>	<i>Date Divested</i>	<i>For ASH Internal Use</i>

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.

<i>Company</i>	<i>Description</i>	<i>Date Divested</i>	<i>For ASH Internal Use</i>

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.

<i>Company</i>	<i>Description</i>	<i>End Date</i>	<i>For ASH Internal Use</i>

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.

<i>Company</i>	<i>Description of Research</i>	<i>My Role</i>	<i>End Date</i>	<i>For ASH Internal Use</i>

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.

<i>Company</i>	<i>Description</i>	<i>End Date</i>	<i>For ASH Internal Use</i>

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.

<i>Funder</i>	<i>Description of Research</i>	<i>My Role</i>	<i>End Date</i>

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 guess they would come back to me with the usual thoughtful support they usually show me.

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?

Statistician

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:	Prevention of VTE in Surgical Hospitalized Patients (systematic reviews) Prevention of VTE in Medical Patients (systematic reviews) Optimal Management of Anticoagulation Therapy (systematic reviews)
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Approved to participate?	Reviewer name and date	Notes
Yes	10/20/16 Alexander; 10/26/16 Kunkle	No material conflicts of interest
Yes	7/25/2019 Alexander	On 7/25/2019, Sara Balduzzi confirmed all information in this form.

Summarize all current material interests in affected companies described above:

Company	Description	Disclosure Date	ASH Notes

Notes:



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

Yes, as described below:

Add rows as needed for each equity interest.

<i>Company</i>	<i>Description</i>	<i>Date Divested</i>	<i>For ASH Internal Use</i>

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.

<i>Company</i>	<i>Description</i>	<i>Date Divested</i>	<i>For ASH Internal Use</i>

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.

<i>Company</i>	<i>Description of Research</i>	<i>My Role</i>	<i>End Date</i>	<i>For ASH Internal Use</i>
Octapharma	Non-randomized trial to assess efficacy and safety of prophylaxis with Human-cl rhFVIII in previously treated adult patients with severe haemophilia A Funding went directly to McMaster University	Research coordinator	Ended 2016 Dec 31	Not a COI. Octapharma markets a warfarin reversal agent, however the subject of the research is unrelated to the guideline topic, Ms. Barbara did not have a leadership role and all funding went to her institution. Additionally, Ms. Barbara did not serve in a leadership role as a member of the systematic review team.
CSL Behring	Observational study to study the safety and efficacy of Fibrinogen Concentrate, Human (FCH) in patients with	Research coordinator	Ended 2016 Dec 31	Not a COI. CSL Behring markets a warfarin reversal agent, however the subject of the

<i>Company</i>	<i>Description of Research</i>	<i>My Role</i>	<i>End Date</i>	<i>For ASH Internal Use</i>
	congenital fibrinogen deficiency Funding went directly to McMaster University			research is unrelated to the guideline topic, Ms. Barbara did not have a leadership role and all funding went to her institution. Additionally, Ms. Barbara did not serve in a leadership role as a member of the systematic review team.
Octapharma	Observational study to study the safety and efficacy of wilate® concentrate in patients with von Willebrand Disease Funding went directly to McMaster University	Research coordinator	Ended 2016 Dec 31	Not a COI. Octapharma markets a warfarin reversal agent, however the subject of the research is unrelated to the guideline topic, Ms. Barbara did not have a leadership role and all funding went to her institution. Additionally, Ms. Barbara did not serve in a leadership role as a member of the systematic review team.
Pfizer Canada Inc	Case series to study the natural history and characteristics of new inhibitors in in previously treated patients with haemophilia A Funding went directly to McMaster University	Research Coordinator	Ended 2016 Sept 29	Not a COI. Pfizer markets a apixaban, however the subject of the research is unrelated to the guideline topic, Ms. Barbara did not have a leadership role and all funding went to her institution. Additionally, Ms. Barbara did not serve in a leadership role as a member of the systematic review

<i>Company</i>	<i>Description of Research</i>	<i>My Role</i>	<i>End Date</i>	<i>For ASH Internal Use</i>
				team.

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.

<i>Company</i>	<i>Description</i>	<i>End Date</i>	<i>For ASH Internal Use</i>

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.

<i>Funder</i>	<i>Description of Research</i>	<i>My Role</i>	<i>End Date</i>

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? Not applicable. There would be no change to my career.

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

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:	Optimal Management of Anticoagulation Therapy (systematic reviews) Feasibility/acceptability systematic review
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<i>Approved to participate?</i>	<i>Reviewer Name and Date</i>	<i>Notes</i>
Yes	5/15/2018 Alexander	No material conflicts of interest.
Yes	9/16/2018 Alexander	On 7/16/2018, Angela Barbara confirmed all information in this form.
Yes	7/24/2019 Alexander	On 6/17/2019, Angela Barbara confirmed all information in this form.

Summarize all current material interests in affected companies described above:

<i>Company</i>	<i>Description</i>	<i>Disclosure Date</i>	<i>ASH Notes</i>

Notes:



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

Yes, as described below:

Add rows as needed for each equity interest.

<i>Company</i>	<i>Description</i>	<i>Date Divested</i>	<i>For ASH Internal Use</i>

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.

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.

<i>Company</i>	<i>Description of Research</i>	<i>My Role</i>	<i>End Date</i>	<i>For ASH Internal Use</i>

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.

<i>Company</i>	<i>Description</i>	<i>End Date</i>	<i>For ASH Internal Use</i>

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.

<i>Funder</i>	<i>Description of Research</i>	<i>My Role</i>	<i>End Date</i>

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?

Research Assistant

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:	Prevention of VTE in Surgical Hospitalized Patients (systematic review) Prevention of VTE in Medical Patients (systematic review) Heparin Induced Thrombocytopenia (systematic review) Thrombophilia (systematic review) Diagnosis of VTE (systematic review) Feasibility/Acceptability systematic review
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<i>Approved to participate?</i>	<i>Date reviewed by ASH staff</i>	<i>Notes</i>
Yes	10/25/2016 Alexander	No material conflicts of interest.
Yes	7/16/2018 Alexander	On 7/16/2018, Dr. Begum confirmed all information in this form.
Yes	7/24/2019 Alexander	On 6/17/2019, Dr. Begum confirmed all information in this form.

Summarize all current material interests in affected companies described above:

<i>Company</i>	<i>Description</i>	<i>Disclosure Date</i>	<i>ASH Notes</i>

Notes:



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

Yes, as described below:

Add rows as needed for each equity interest.

<i>Company</i>	<i>Description</i>	<i>Date Divested</i>	<i>For ASH Internal Use</i>

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.

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.

<i>Company</i>	<i>Description of Research</i>	<i>My Role</i>	<i>End Date</i>	<i>For ASH Internal Use</i>

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.

<i>Company</i>	<i>Description</i>	<i>End Date</i>	<i>For ASH Internal Use</i>

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.

<i>Funder</i>	<i>Description of Research</i>	<i>My Role</i>	<i>End Date</i>

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 think I would be supported.

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 immunology and allergy

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:	Prevention of VTE in Surgical Patients
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<i>Approved to participate?</i>	<i>Reviewer Name and Date</i>	<i>Notes</i>
Yes	7/10/2019 Alexander	No material conflicts of interest. On 7/10/2019 Jan Brozek confirmed all information in this form.

Summarize all current material interests in affected companies described above:

<i>Company</i>	<i>Description</i>	<i>Disclosure Date</i>	<i>ASH Notes</i>

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

Yes, as described below:

Add rows as needed for each equity interest.

<i>Company</i>	<i>Description</i>	<i>Date Divested</i>	<i>For ASH Internal Use</i>

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.

<i>Company</i>	<i>Description</i>	<i>Date Divested</i>	<i>For ASH Internal Use</i>

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.

<i>Company</i>	<i>Description of Research</i>	<i>My Role</i>	<i>End Date</i>	<i>For ASH Internal Use</i>

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.

<i>Company</i>	<i>Description</i>	<i>End Date</i>	<i>For ASH Internal Use</i>

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.

<i>Funder</i>	<i>Description of Research</i>	<i>My Role</i>	<i>End Date</i>

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
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<i>Approved to participate?</i>	<i>Reviewer name and date</i>	<i>Notes</i>
Yes	7/26/2018 Alexander	No material conflicts of interest.
Yes	7/24/2019 Alexander	On 6/17/2019, Rachel Couban confirmed all information in this form.

Summarize all current material interests in affected companies described above:

<i>Company</i>	<i>Description</i>	<i>Disclosure Date</i>	<i>ASH Notes</i>

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

Yes, as described below:

Add rows as needed for each equity interest.

<i>Company</i>	<i>Description</i>	<i>Date Divested</i>	<i>For ASH Internal Use</i>

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.

<i>Company</i>	<i>Description</i>	<i>Date Divested</i>	<i>For ASH Internal Use</i>

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.

<i>Company</i>	<i>Description</i>	<i>End Date</i>	<i>For ASH Internal Use</i>

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.

<i>Company</i>	<i>Description of Research</i>	<i>My Role</i>	<i>End Date</i>	<i>For ASH Internal Use</i>

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.

<i>Company</i>	<i>Description</i>	<i>End Date</i>	<i>For ASH Internal Use</i>

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.

<i>Funder</i>	<i>Description of Research</i>	<i>My Role</i>	<i>End Date</i>
European Association of Urology	Series of systematic reviews of the risk of thrombosis and bleeding in urological surgeries	Review lead (screening, extraction, analysis, interpretation, manuscript drafting)	October 2016

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 applicable.

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?

Researcher/clinical 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:	Prevention of VTE in Surgical Hospitalized Patients (systematic reviews) Prevention of VTE in Medical Patients (systematic reviews) Optimal Management of Anticoagulation Therapy (systematic reviews)
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Approved to participate?	Reviewer name and date	Notes
Yes	10/24/16 Alexander; 10/26/16 Kunkle	No material conflicts of interest
Yes	7/24/2018 Alexander	On 7/20/2018, Samantha Craigie confirmed all information in this form.
Yes	7/24/2019 Alexander	On 7/24/2019, Samantha Craigie confirmed all information in this form.

Summarize all current material interests in affected companies described above:

Company	Description	Disclosure Date	ASH Notes

Notes:



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

Yes, as described below:

Add rows as needed for each equity interest.

<i>Company</i>	<i>Description</i>	<i>Date Divested</i>	<i>For ASH Internal Use</i>

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.

<i>Company</i>	<i>Description</i>	<i>Date Divested</i>	<i>For ASH Internal Use</i>

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.

<i>Company</i>	<i>Description</i>	<i>End Date</i>	<i>For ASH Internal Use</i>

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.

<i>Company</i>	<i>Description of Research</i>	<i>My Role</i>	<i>End Date</i>	<i>For ASH Internal Use</i>

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.

<i>Company</i>	<i>Description</i>	<i>End Date</i>	<i>For ASH Internal Use</i>

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.

<i>Funder</i>	<i>Description of Research</i>	<i>My Role</i>	<i>End Date</i>

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'd expect a total 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

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 methodological technician in guideline development, with background and PhD in pharmacy.

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:	Thrombophilia (systematic reviews) Optimal Management of Anticoagulation Therapy (systematic reviews)
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<i>Approved to participate?</i>	<i>Reviewer name and date</i>	<i>Notes</i>
Yes	10/20/16 Alexander; 10/27/16 Kunkle	No material conflicts of interest
Yes	7/18/2018 Alexander	On 7/18/2018, Itziar Etxeandia-Ikobaltzeta confirmed all information in this form.
Yes	7/24/2019 Alexander	On 6/17/2019, Itziar Etxeandia-Ikobaltzeta confirmed all information in this form.

Summarize all current material interests in affected companies described above:

<i>Company</i>	<i>Description</i>	<i>Disclosure Date</i>	<i>ASH Notes</i>

Notes:



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

Yes, as described below:

Add rows as needed for each equity interest.

<i>Company</i>	<i>Description</i>	<i>Date Divested</i>	<i>For ASH Internal Use</i>

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.

<i>Company</i>	<i>Description</i>	<i>Date Divested</i>	<i>For ASH Internal Use</i>

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.

<i>Company</i>	<i>Description of Research</i>	<i>My Role</i>	<i>End Date</i>	<i>For ASH Internal Use</i>

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.

<i>Company</i>	<i>Description</i>	<i>End Date</i>	<i>For ASH Internal Use</i>

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.

<i>Funder</i>	<i>Description of Research</i>	<i>My Role</i>	<i>End Date</i>

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? It will be fine.

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?

PhD Student

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
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<i>Approved to participate?</i>	<i>Reviewer Name and Date</i>	<i>Notes</i>
Yes	6/1/2018 Alexander	No material conflicts of interest.
Yes	8/13/2018 Alexander	On 8/13/2018, Farid Foroutan confirmed all information in this form.
Yes	7/24/2019 Alexander	On 6/17/2019, Farid Foroutan confirmed all information in this form.

Summarize all current material interests in affected companies described above:

<i>Company</i>	<i>Description</i>	<i>Disclosure Date</i>	<i>ASH Notes</i>

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

Yes, as described below:

Add rows as needed for each equity interest.

<i>Company</i>	<i>Description</i>	<i>Date Divested</i>	<i>For ASH Internal Use</i>

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.

<i>Company</i>	<i>Description</i>	<i>Date Divested</i>	<i>For ASH Internal Use</i>

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.

<i>Company</i>	<i>Description of Research</i>	<i>My Role</i>	<i>End Date</i>	<i>For ASH Internal Use</i>

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.

<i>Company</i>	<i>Description</i>	<i>End Date</i>	<i>For ASH Internal Use</i>

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.

<i>Funder</i>	<i>Description of Research</i>	<i>My Role</i>	<i>End Date</i>

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'd expect a total 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

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 methodological technician in guideline development, with background and PhD in health sciences.

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
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<i>Approved to participate?</i>	<i>Date reviewed by ASH staff</i>	<i>Notes</i>
Yes	7/16/2018	No material conflicts of interest.
Yes	7/24/2019 Alexander	On 6/19/2019, Nora Ibargoyen Pertsonala confirmed all information in this form.

Summarize all current material interests in affected companies described above:

<i>Company</i>	<i>Description</i>	<i>Disclosure Date</i>	<i>ASH Notes</i>

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

Yes, as described below:

Add rows as needed for each equity interest.

<i>Company</i>	<i>Description</i>	<i>Date Divested</i>	<i>For ASH Internal Use</i>

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.

<i>Company</i>	<i>Description</i>	<i>Date Divested</i>	<i>For ASH Internal Use</i>

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.

<i>Company</i>	<i>Description</i>	<i>End Date</i>	<i>For ASH Internal Use</i>

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.

<i>Company</i>	<i>Description of Research</i>	<i>My Role</i>	<i>End Date</i>	<i>For ASH Internal Use</i>

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.

<i>Company</i>	<i>Description</i>	<i>End Date</i>	<i>For ASH Internal Use</i>

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.

<i>Funder</i>	<i>Description of Research</i>	<i>My Role</i>	<i>End Date</i>

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?

Neutral

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?

Orthopaedic trauma surgeon and clinical scholar

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 routinely use VTE prophylaxis in my practice and order diagnostic tests looking for VTE.

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:	Prevention of VTE in Surgical Hospitalized Patients (systematic reviews) Prevention of VTE in Medical Patients (systematic reviews)
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<i>Approved to participate?</i>	<i>Reviewer name and date</i>	<i>Notes</i>
Yes	10/24/16 Alexander; 10/26/16 Kunkle	No material conflicts of interest
Yes	7/18/2018 Alexander	On 7/18/2018, Herman Johal confirmed all information in this form.
Yes	8/1/2019 Alexander	On 8/2/2019, Herman Johal confirmed all information in this form.

Summarize all current material interests in affected companies described above:

<i>Company</i>	<i>Description</i>	<i>Disclosure Date</i>	<i>ASH Notes</i>

Notes:



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

Yes, as described below:

Add rows as needed for each equity interest.

<i>Company</i>	<i>Description</i>	<i>Date Divested</i>	<i>For ASH Internal Use</i>

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.

<i>Company</i>	<i>Description</i>	<i>Date Divested</i>	<i>For ASH Internal Use</i>

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.

<i>Company</i>	<i>Description</i>	<i>End Date</i>	<i>For ASH Internal Use</i>

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.

<i>Company</i>	<i>Description of Research</i>	<i>My Role</i>	<i>End Date</i>	<i>For ASH Internal Use</i>

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.

<i>Company</i>	<i>Description</i>	<i>End Date</i>	<i>For ASH Internal Use</i>

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.

<i>Funder</i>	<i>Description of Research</i>	<i>My Role</i>	<i>End Date</i>

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?

Other than reaction to methodology of the guidelines, there would be no impact on the support I would receive.

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?

PhD Student in Health Research Methodolgy

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: prevention in surgical patients (systematic reviews) Venous thromboembolism: prevention in nonsurgical patients (systematic reviews) Optimal management of anticoagulation therapy (systematic reviews)
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Approved to participate?	Reviewer name and date	Notes
Yes	10/25/16 Alexander; 10/28/16 Kunkle	No material conflicts of interest
Yes	7/18/2018 Alexander	On 7/17/2018, Gian Paolo Morgano confirmed all information in this form.
Yes	7/24/2019 Alexander	On 6/19/2019, Gian Paolo Morgano confirmed all information in this form.

Summarize all current material interests in affected companies described above:

Company	Description	Disclosure Date	ASH Notes

Notes:



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

Yes, as described below:

Add rows as needed for each equity interest.

<i>Company</i>	<i>Description</i>	<i>Date Divested</i>	<i>For ASH Internal Use</i>

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.

<i>Company</i>	<i>Description</i>	<i>Date Divested</i>	<i>For ASH Internal Use</i>

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.

<i>Company</i>	<i>Description</i>	<i>End Date</i>	<i>For ASH Internal Use</i>

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.

<i>Company</i>	<i>Description of Research</i>	<i>My Role</i>	<i>End Date</i>	<i>For ASH Internal Use</i>

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.

<i>Company</i>	<i>Description</i>	<i>End Date</i>	<i>For ASH Internal Use</i>

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.

<i>Funder</i>	<i>Description of Research</i>	<i>My Role</i>	<i>End Date</i>

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 Applicable.

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?

Student

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:	Prevention and Treatment of VTE in Surgical Patients (systematic reviews) Prevention and Treatment of VTE in Medical Patients (systematic reviews)
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<i>Approved to participate?</i>	<i>Reviewer name and date</i>	<i>Notes</i>
Yes	10/24/16 Alexander; 10/26/16 Kunkle	No material conflicts of interest
Yes	7/18/2018 Alexander	On 7/18/2018, Rana Qadeer confirmed all information in this form.
Yes	7/24/2019 Alexander	On 7/24/2019, Rana Qadeer confirmed all information in this form.

Summarize all current material interests in affected companies described above:

<i>Company</i>	<i>Description</i>	<i>Disclosure Date</i>	<i>ASH Notes</i>

Notes:

Part D. New Declarations

The following interests were disclosed after appointment:

<i>Company</i>	<i>Description</i>	<i>Disclosure Date</i>	<i>ASH Internal Notes</i>
Cornerstone Research Group	I am currently employed at a pharmaceutical consulting firm. However, I am not allowed to disclose the names of clients.	7/18/18	Not a COI. Employment began after Mr. Qadeer's work on the systematic reviews concluded.



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

Yes, as described below:

Add rows as needed for each equity interest.

<i>Company</i>	<i>Description</i>	<i>Date Divested</i>	<i>For ASH Internal Use</i>

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.

<i>Company</i>	<i>Description</i>	<i>Date Divested</i>	<i>For ASH Internal Use</i>

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.

<i>Company</i>	<i>Description</i>	<i>End Date</i>	<i>For ASH Internal Use</i>

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.

<i>Company</i>	<i>Description of Research</i>	<i>My Role</i>	<i>End Date</i>	<i>For ASH Internal Use</i>

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.

<i>Company</i>	<i>Description</i>	<i>End Date</i>	<i>For ASH Internal Use</i>

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.

<i>Funder</i>	<i>Description of Research</i>	<i>My Role</i>	<i>End Date</i>
McMaster University	Observational study looking at DOACs decay in in perioperative period	Principal Investigator	Ongoing

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?

My involvement in this guidelines will reflect on my ability to work efficiently within in a group and also reflect my ability to do systematic reviews. I cannot comment on how much support I will receive in case a strong reaction is met from peers outside of 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 clinician specialized in internal medicine and hematology – I am also a fellow in thrombosis and bleeding disorder and a completing Masters in Epidemiology

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

No

Yes

If yes, please explain:

As a clinician, I diagnose and treat VTE patients in various circumstances (outpatient and inpatient, surgical, medical or patients with cancer). I follow recommendation from guidelines and scientific conclusions/ opinions of expert. Hence, yes I do prescribe diagnostic test and treatments that may be addresses by guidelines.

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:	Prevention of VTE in Surgical Hospitalized Patients (systematic reviews) Prevention of VTE in Medical Patients (systematic reviews)
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<i>Approved to participate?</i>	<i>Reviewer name and date</i>	<i>Notes</i>
Yes	10/25/16 Alexander; 10/26/16 Kunkle	No material conflicts of interest
Yes	8/13/2018 Alexander	On 8/12/2018, Mansoor Radwi confirmed all information in this form.
Yes	8/2/2019 Alexander	On 8/1/2019, Mansoor Radwi confirmed all information in this form.

Summarize all current material interests in affected companies described above:

<i>Company</i>	<i>Description</i>	<i>Disclosure Date</i>	<i>ASH Notes</i>

Notes:



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

Yes, as described below:

Add rows as needed for each equity interest.

<i>Company</i>	<i>Description</i>	<i>Date Divested</i>	<i>For ASH Internal Use</i>

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.

<i>Company</i>	<i>Description</i>	<i>Date Divested</i>	<i>For ASH Internal Use</i>

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.

<i>Company</i>	<i>Description</i>	<i>End Date</i>	<i>For ASH Internal Use</i>

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.

<i>Company</i>	<i>Description of Research</i>	<i>My Role</i>	<i>End Date</i>	<i>For ASH Internal Use</i>

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.

<i>Company</i>	<i>Description</i>	<i>End Date</i>	<i>For ASH Internal Use</i>

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

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.

<i>Funder</i>	<i>Description of Research</i>	<i>My Role</i>	<i>End Date</i>

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, it is up to you to decide , I would say "NO"**
 - No
 - Yes

If yes, please explain:

ASH Internal Note: Agree that McMaster University will not benefit or be harmed by the recommendations of these ASH guidelines.

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 Applicable

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?

PhD 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.

Guideline topic:	Prevention of VTE in Surgical Hospitalized Patients (systematic reviews) Prevention of VTE in Medical Patients (systematic reviews)
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<i>Approved to participate?</i>	<i>Reviewer name and date</i>	<i>Notes</i>
Yes	10/20/16 Alexander; 10/26/16 Kunkle	No material conflicts of interest
Yes	7/18/2018 Alexander	On 7/18/2018, Yasir Rehman confirmed all information in this form.
Yes	8/2/2019 Alexander	On 6/18/2019, Yasir Rehman confirmed all information in this form.

Summarize all current material interests in affected companies described above:

<i>Company</i>	<i>Description</i>	<i>Disclosure Date</i>	<i>ASH Notes</i>

Notes:



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

Yes, as described below:

Add rows as needed for each equity interest.

<i>Company</i>	<i>Description</i>	<i>Date Divested</i>	<i>For ASH Internal Use</i>

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.

<i>Company</i>	<i>Description</i>	<i>Date Divested</i>	<i>For ASH Internal Use</i>

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.

<i>Company</i>	<i>Description</i>	<i>End Date</i>	<i>For ASH Internal Use</i>

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.

<i>Company</i>	<i>Description of Research</i>	<i>My Role</i>	<i>End Date</i>	<i>For ASH Internal Use</i>

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.

<i>Company</i>	<i>Description</i>	<i>End Date</i>	<i>For ASH Internal Use</i>

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.

<i>Funder</i>	<i>Description of Research</i>	<i>My Role</i>	<i>End Date</i>

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?

That would depend on the positive or negative nature of the strong reactions towards my specific work. I think any affiliate of mine would be happy and think positively of me if peer reaction was positive and the opposite if peer reaction was negative. This assumes that the peer reaction is towards the quality of my work, not the results.

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 coordinator.

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:	Prevention of VTE in Surgical Hospitalized Patients (systematic reviews) Prevention of VTE in Medical Patients (systematic reviews) Thrombophilia (systematic reviews)
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<i>Approved to participate?</i>	<i>Reviewer name and date</i>	<i>Notes</i>
Yes	10/25/16 Alexander; 10/26/16 Kunkle	No material conflicts of interest
Yes	7/16/2018 Alexander	On 7/16/2018, Matthew Ventresca confirmed all information in this form.
Yes	7/24/2019 Alexander	On 6/18/2019, Matthew Ventresca confirmed all information in this form.

Summarize all current material interests in affected companies described above:

<i>Company</i>	<i>Description</i>	<i>Disclosure Date</i>	<i>ASH Notes</i>

Notes:



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

Yes, as described below:

Add rows as needed for each equity interest.

<i>Company</i>	<i>Description</i>	<i>Date Divested</i>	<i>For ASH Internal Use</i>

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.

<i>Company</i>	<i>Description</i>	<i>Date Divested</i>	<i>For ASH Internal Use</i>

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.

<i>Company</i>	<i>Description</i>	<i>End Date</i>	<i>For ASH Internal Use</i>

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.

<i>Company</i>	<i>Description of Research</i>	<i>My Role</i>	<i>End Date</i>	<i>For ASH Internal Use</i>

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.

<i>Company</i>	<i>Description</i>	<i>End Date</i>	<i>For ASH Internal Use</i>

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?

Guideline Adaptation: Contributed to systematic review and guideline development for VTE guideline; did not participate as voting member for formulation of recommendations.

The Saudi Clinical Practice Guideline for the treatment of venous thromboembolism - Outpatient versus inpatient management. Saudi Med J. 2015 Aug; 36(8): 1004–1010.

Prophylaxis and treatment of venous thromboembolism in patients with cancer: the Saudi clinical practice guideline. Ann Saudi Med. 2015 Mar-Apr;35(2):95-106.

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.

<i>Funder</i>	<i>Description of Research</i>	<i>My Role</i>	<i>End Date</i>

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?

Other than reaction to methodology of the guidelines, there would be no impact on the support I would receive.

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 methodologist.

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:	Prevention of VTE in Surgical Hospitalized Patients (systematic reviews) Prevention of VTE in Medical Patients (systematic reviews) Pediatric VTE (systematic reviews)
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<i>Approved to participate?</i>	<i>Reviewer name and date</i>	<i>Notes</i>
Yes	10/20/16 Alexander; 10/26/16 Kunkle	No material conflicts of interest
Yes	7/7/2018 Alexander	On 7/7/2018, Wojtek Wiercioch confirmed all information in this form.
Yes	8/6/2019 Alexander	On 8/6/2019, Wojtek Wiercioch confirmed all information in this form.

Summarize all current material interests in affected companies described above:

<i>Company</i>	<i>Description</i>	<i>Disclosure Date</i>	<i>ASH Notes</i>

Notes:



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

Yes, as described below:

Add rows as needed for each equity interest.

<i>Company</i>	<i>Description</i>	<i>Date Divested</i>	<i>For ASH Internal Use</i>

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.

<i>Company</i>	<i>Description</i>	<i>Date Divested</i>	<i>For ASH Internal Use</i>

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.

<i>Company</i>	<i>Description</i>	<i>End Date</i>	<i>For ASH Internal Use</i>

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.

<i>Company</i>	<i>Description of Research</i>	<i>My Role</i>	<i>End Date</i>	<i>For ASH Internal Use</i>

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.

<i>Company</i>	<i>Description</i>	<i>End Date</i>	<i>For ASH Internal Use</i>

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.

<i>Funder</i>	<i>Description of Research</i>	<i>My Role</i>	<i>End Date</i>

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 would expect the normal support as always I have received

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 assistant and PhD candidate at Health Research Methodology 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.

Guideline topic:	Prevention of VTE in Surgical Hospitalized Patients (systematic reviews) Prevention of VTE in Medical Patients (systematic reviews) Optimal Management of Anticoagulation Therapy (systematic reviews)
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Approved to participate?	Reviewer name and date	Notes
Yes	10/20/16 Alexander; 10/26/16 Kunkle	No material conflicts of interest
Yes	8/9/2018 Alexander	On 8/9/2018, Juan José Yepes-Nuñez confirmed all information in this form.
Yes	7/24/2019 Alexander	On 6/17/2019, Juan José Yepes-Nuñez confirmed all information in this form.

Summarize all current material interests in affected companies described above:

Company	Description	Disclosure Date	ASH Notes

Notes:



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

Yes, as described below:

Add rows as needed for each equity interest.

<i>Company</i>	<i>Description</i>	<i>Date Divested</i>	<i>For ASH Internal Use</i>

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.

<i>Company</i>	<i>Description</i>	<i>Date Divested</i>	<i>For ASH Internal Use</i>

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.

<i>Company</i>	<i>Description</i>	<i>End Date</i>	<i>For ASH Internal Use</i>

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.

<i>Company</i>	<i>Description of Research</i>	<i>My Role</i>	<i>End Date</i>	<i>For ASH Internal Use</i>

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.

<i>Company</i>	<i>Description</i>	<i>End Date</i>	<i>For ASH Internal Use</i>

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.

<i>Funder</i>	<i>Description of Research</i>	<i>My Role</i>	<i>End Date</i>

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 or little influence.

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?

Methodologist, not a clinician.

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:	Systematic reviews on patient values and preferences, cost effectiveness Prevention of VTE in Surgical Hospitalized Patients (systematic reviews) Optimal Management of Anticoagulation Therapy (systematic reviews)
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Approved to participate?	Reviewer name and date	Notes
Yes	10/24/16 Alexander; 10/27/16 Kunkle	No material conflicts of interest
Yes	8/13/2018 Alexander	On 8/11/2018, Yuan Zhang confirmed all information in this form.
Yes	7/24/2019 Alexander	On 6/17/2019, Yuan Zhang confirmed all information in this form.

Summarize all current material interests in affected companies described above:

Company	Description	Disclosure Date	ASH Notes

Notes: