

ICMJE Form for Disclosure of Potential Conflicts of Interest

Instructions

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4. Intellectual Property.

This section asks about patents and copyrights, whether pending, issued, licensed and/or receiving royalties.

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)

Ana

2. Surname (Last Name)

Arias-Milla

3. Date

05-June-2020

4. Are you the corresponding author?

Yes No

Corresponding Author's Name

Manuel Rodríguez-Perálvarez

5. Manuscript Title

Epidemiological pattern, incidence and outcomes of Covid-19 in liver transplant patients.

6. Manuscript Identifying Number (if you know it)

JHEPAT-D-20-01099

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Dr. Arias-Milla has nothing to disclose.

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name) Aranzazu	2. Surname (Last Name) Caballero	3. Date 05-June-2020
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Manuel Rodríguez-Perálvarez
5. Manuscript Title Epidemiological pattern, incidence and outcomes of Covid-19 in liver transplant patients.		
6. Manuscript Identifying Number (if you know it) JHEPAT-D-20-01099		

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Are there any relevant conflicts of interest? Yes No

If yes, please fill out the appropriate information below.

Name of Entity	Grant?	Personal Fees?	Non-Financial Support?	Other?	Comments
Astellas	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Lecture Fee

Section 4. Intellectual Property -- Patents & Copyrights

Do you have any patents, whether planned, pending or issued, broadly relevant to the work? Yes No

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Dr. Caballero reports personal fees from Astellas, outside the submitted work; .

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Alba

2. Surname (Last Name)

Cachero

3. Date

05-June-2020

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Yes No

Corresponding Author's Name

Manuel Rodríguez-Perálvarez

5. Manuscript Title

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Dr. Cachero has nothing to disclose.

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Ainhoa

2. Surname (Last Name)

Fernández-Yunquera

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05-June-2020

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Yes No

Corresponding Author's Name

Manuel Rodríguez-Perálvarez

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Dr. Fernández-Yunquera has nothing to disclose.

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Alejandro

2. Surname (Last Name)

Muñoz-Serrano

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05-June-2020

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Yes No

Corresponding Author's Name

Manuel Rodríguez-Perálvarez

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Royalties: Funds are coming in to you or your institution due to your patent

ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)

Alejandra

2. Surname (Last Name)

Otero

3. Date

05-June-2020

4. Are you the corresponding author?

Yes No

Corresponding Author's Name

Manuel Rodríguez-Perálvarez

5. Manuscript Title

Epidemiological pattern, incidence and outcomes of Covid-19 in liver transplant patients.

6. Manuscript Identifying Number (if you know it)

JHEPAT-D-20-01099

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Are there any relevant conflicts of interest? Yes No

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Are there any relevant conflicts of interest? Yes No

Section 4. Intellectual Property -- Patents & Copyrights

Do you have any patents, whether planned, pending or issued, broadly relevant to the work? Yes No

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Dr. Otero has nothing to disclose.

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)
Constantino

2. Surname (Last Name)
Fondevilla

3. Date
05-June-2020

4. Are you the corresponding author? Yes No

Corresponding Author's Name
Manuel Rodríguez-Perálvarez

5. Manuscript Title
Epidemiological pattern, incidence and outcomes of Covid-19 in liver transplant patients.

6. Manuscript Identifying Number (if you know it)
JHEPAT-D-20-01099

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)

Carmelo

2. Surname (Last Name)

Loinaz

3. Date

05-June-2020

4. Are you the corresponding author?

Yes

No

Corresponding Author's Name

Manuel Rodríguez-Perálvarez

5. Manuscript Title

Epidemiological pattern, incidence and outcomes of Covid-19 in liver transplant patients.

6. Manuscript Identifying Number (if you know it)

JHEPAT-D-20-01099

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Yes

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Dr. Loinaz has nothing to disclose.

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name) Carmen 2. Surname (Last Name) Vinaixa 3. Date 05-June-2020

4. Are you the corresponding author? Yes No Corresponding Author's Name
Manuel Rodríguez-Perálvarez

5. Manuscript Title
Epidemiological pattern, incidence and outcomes of Covid-19 in liver transplant patients.

6. Manuscript Identifying Number (if you know it)
JHEPAT-D-20-01099

Section 2. The Work Under Consideration for Publication

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Are there any relevant conflicts of interest? Yes No

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Are there any relevant conflicts of interest? Yes No

If yes, please fill out the appropriate information below.

Name of Entity	Grant?	Personal Fees?	Non-Financial Support?	Other?	Comments
Abbie	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Lecture Fee
Novartis	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Lecture Fee
Gilead	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Lecture Fee

Section 4. Intellectual Property -- Patents & Copyrights

Do you have any patents, whether planned, pending or issued, broadly relevant to the work? Yes No

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Section 6. Disclosure Statement

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Dr. Vinaixa reports personal fees from Abbie, personal fees from Novartis, personal fees from Gilead, outside the submitted work; .

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)

Emilio

2. Surname (Last Name)

Fábrega

3. Date

05-June-2020

4. Are you the corresponding author?

Yes No

Corresponding Author's Name

Manuel Rodríguez-Perálvarez

5. Manuscript Title

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Dr. Fábrega has nothing to disclose.

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)
Fernando

2. Surname (Last Name)
García-Pajares

3. Date
05-June-2020

4. Are you the corresponding author? Yes No

Corresponding Author's Name
Manuel Rodríguez-Perálvarez

5. Manuscript Title
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6. Manuscript Identifying Number (if you know it)
JHEPAT-D-20-01099

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Section 6. Disclosure Statement

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Dr. García-Pajares has nothing to disclose.

Evaluation and Feedback

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)

Flor

2. Surname (Last Name)

Nogueras

3. Date

05-June-2020

4. Are you the corresponding author?

Yes No

Corresponding Author's Name

Manuel Rodríguez-Perálvarez

5. Manuscript Title

Epidemiological pattern, incidence and outcomes of Covid-19 in liver transplant patients.

6. Manuscript Identifying Number (if you know it)

JHEPAT-D-20-01099

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Are there any relevant conflicts of interest? Yes No

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Are there any relevant conflicts of interest? Yes No

Section 4. Intellectual Property -- Patents & Copyrights

Do you have any patents, whether planned, pending or issued, broadly relevant to the work? Yes No

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Dr. Nogueras has nothing to disclose.

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)
Gerardo

2. Surname (Last Name)
Blanco-Fernandez

3. Date
05-June-2020

4. Are you the corresponding author? Yes No
Corresponding Author's Name
Manuel Rodríguez-Perálvarez

5. Manuscript Title
Epidemiological pattern, incidence and outcomes of Covid-19 in liver transplant patients.

6. Manuscript Identifying Number (if you know it)
JHEPAT-D-20-01099

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Are there any relevant conflicts of interest? Yes No

If yes, please fill out the appropriate information below.

Name of Entity	Grant?	Personal Fees?	Non-Financial Support?	Other?	Comments
Astellas	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Lecture Fee
Bayer	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Lecture Fee

Section 4. Intellectual Property -- Patents & Copyrights

Do you have any patents, whether planned, pending or issued, broadly relevant to the work? Yes No

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Dr. Blanco-Fernandez reports personal fees from Astellas, personal fees from Bayer, outside the submitted work; .

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)

Gloria

2. Surname (Last Name)

De la Rosa

3. Date

05-June-2020

4. Are you the corresponding author?

Yes No

Corresponding Author's Name

Manuel Rodríguez-Perálvarez

5. Manuscript Title

Epidemiological pattern, incidence and outcomes of Covid-19 in liver transplant patients.

6. Manuscript Identifying Number (if you know it)

JHEPAT-D-20-01099

Section 2. The Work Under Consideration for Publication

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Are there any relevant conflicts of interest? Yes No

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Are there any relevant conflicts of interest? Yes No

Section 4. Intellectual Property -- Patents & Copyrights

Do you have any patents, whether planned, pending or issued, broadly relevant to the work? Yes No

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Dr. De la Rosa has nothing to disclose.

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)

Inmaculada

2. Surname (Last Name)

Fernández

3. Date

05-June-2020

4. Are you the corresponding author?

Yes No

Corresponding Author's Name

Manuel Rodríguez-Perálvarez

5. Manuscript Title

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6. Manuscript Identifying Number (if you know it)

JHEPAT-D-20-01099

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Are there any relevant conflicts of interest? Yes No

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Are there any relevant conflicts of interest? Yes No

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Dr. Fernández has nothing to disclose.

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)

Javier

2. Surname (Last Name)

Bustamante-Schneider

3. Date

05-June-2020

4. Are you the corresponding author?

Yes No

Corresponding Author's Name

Manuel Rodríguez-Perálvarez

5. Manuscript Title

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6. Manuscript Identifying Number (if you know it)

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Dr. Bustamante-Schneider has nothing to disclose.

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4. Intellectual Property.

This section asks about patents and copyrights, whether pending, issued, licensed and/or receiving royalties.

5. Relationships not covered above.

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Other: Anything not covered under the previous three boxes

Pending: The patent has been filed but not issued

Issued: The patent has been issued by the agency

Licensed: The patent has been licensed to an entity, whether earning royalties or not

Royalties: Funds are coming in to you or your institution due to your patent

ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name) Jordi 2. Surname (Last Name) Colmenero 3. Date 05-June-2020

4. Are you the corresponding author? Yes No Corresponding Author's Name
Manuel Rodríguez-Perálvarez

5. Manuscript Title
Epidemiological pattern, incidence and outcomes of Covid-19 in liver transplant patients.

6. Manuscript Identifying Number (if you know it)
JHEPAT-D-20-01099

Section 2. The Work Under Consideration for Publication

Did you or your institution **at any time** receive payment or services from a third party (government, commercial, private foundation, etc.) for any aspect of the submitted work (including but not limited to grants, data monitoring board, study design, manuscript preparation, statistical analysis, etc.)?

Are there any relevant conflicts of interest? Yes No

Section 3. Relevant financial activities outside the submitted work.

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Are there any relevant conflicts of interest? Yes No

If yes, please fill out the appropriate information below.

Name of Entity	Grant?	Personal Fees?	Non-Financial Support?	Other?	Comments
Astellas	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Lecture Fee and advisory
Novartis	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Lecture Fee
Chiesi	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Lecture Fee

Section 4. Intellectual Property -- Patents & Copyrights

Do you have any patents, whether planned, pending or issued, broadly relevant to the work? Yes No

ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 5. Relationships not covered above

Are there other relationships or activities that readers could perceive to have influenced, or that give the appearance of potentially influencing, what you wrote in the submitted work?

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Section 6. Disclosure Statement

Based on the above disclosures, this form will automatically generate a disclosure statement, which will appear in the box below.

Dr. Colmenero reports personal fees from Astellas, personal fees from Novartis, personal fees from Chiesi, outside the submitted work; .

Evaluation and Feedback

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)

Javier

2. Surname (Last Name)

Graus

3. Date

05-June-2020

4. Are you the corresponding author?

Yes No

Corresponding Author's Name

Manuel Rodríguez-Perálvarez

5. Manuscript Title

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Section 4. Intellectual Property -- Patents & Copyrights

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Dr. Graus has nothing to disclose.

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Royalties: Funds are coming in to you or your institution due to your patent

ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name) José Luis	2. Surname (Last Name) Montero	3. Date 05-June-2020
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Manuel Rodríguez-Perálvarez
5. Manuscript Title Epidemiological pattern, incidence and outcomes of Covid-19 in liver transplant patients.		
6. Manuscript Identifying Number (if you know it) JHEPAT-D-20-01099		

Section 2. The Work Under Consideration for Publication

Did you or your institution **at any time** receive payment or services from a third party (government, commercial, private foundation, etc.) for any aspect of the submitted work (including but not limited to grants, data monitoring board, study design, manuscript preparation, statistical analysis, etc.)?

Are there any relevant conflicts of interest? Yes No

Section 3. Relevant financial activities outside the submitted work.

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Are there any relevant conflicts of interest? Yes No

If yes, please fill out the appropriate information below.

Name of Entity	Grant?	Personal Fees?	Non-Financial Support?	Other?	Comments
Bayer	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Lecture Fee
Gilead	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Lecture Fee

Section 4. Intellectual Property -- Patents & Copyrights

Do you have any patents, whether planned, pending or issued, broadly relevant to the work? Yes No

ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 5. Relationships not covered above

Are there other relationships or activities that readers could perceive to have influenced, or that give the appearance of potentially influencing, what you wrote in the submitted work?

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Section 6. Disclosure Statement

Based on the above disclosures, this form will automatically generate a disclosure statement, which will appear in the box below.

Dr. Montero reports personal fees from Bayer, personal fees from Gilead, outside the submitted work; .

Evaluation and Feedback

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Royalties: Funds are coming in to you or your institution due to your patent

ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)

Jose María

2. Surname (Last Name)

Álamo

3. Date

05-June-2020

4. Are you the corresponding author?

Yes

No

Corresponding Author's Name

Manuel Rodríguez-Perálvarez

5. Manuscript Title

Epidemiological pattern, incidence and outcomes of Covid-19 in liver transplant patients.

6. Manuscript Identifying Number (if you know it)

JHEPAT-D-20-01099

Section 2. The Work Under Consideration for Publication

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Are there any relevant conflicts of interest?

Yes

No

Section 3. Relevant financial activities outside the submitted work.

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Are there any relevant conflicts of interest?

Yes

No

Section 4. Intellectual Property -- Patents & Copyrights

Do you have any patents, whether planned, pending or issued, broadly relevant to the work?

Yes

No

ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 5. Relationships not covered above

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Section 6. Disclosure Statement

Based on the above disclosures, this form will automatically generate a disclosure statement, which will appear in the box below.

Dr. Álamo has nothing to disclose.

Evaluation and Feedback

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)

Javier

2. Surname (Last Name)

Nuño

3. Date

05-June-2020

4. Are you the corresponding author?

Yes No

Corresponding Author's Name

Manuel Rodríguez-Perálvarez

5. Manuscript Title

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Are there any relevant conflicts of interest? Yes No

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Are there any relevant conflicts of interest? Yes No

Section 4. Intellectual Property -- Patents & Copyrights

Do you have any patents, whether planned, pending or issued, broadly relevant to the work? Yes No

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Dr. Nuño has nothing to disclose.

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Other: Anything not covered under the previous three boxes

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Issued: The patent has been issued by the agency

Licensed: The patent has been licensed to an entity, whether earning royalties or not

Royalties: Funds are coming in to you or your institution due to your patent

ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)
José Antonio

2. Surname (Last Name)
Pons

3. Date
05-June-2020

4. Are you the corresponding author? Yes No
Corresponding Author's Name
Manuel Rodríguez-Perálvarez

5. Manuscript Title
Epidemiological pattern, incidence and outcomes of Covid-19 in liver transplant patients.

6. Manuscript Identifying Number (if you know it)
JHEPAT-D-20-01099

Section 2. The Work Under Consideration for Publication

Did you or your institution **at any time** receive payment or services from a third party (government, commercial, private foundation, etc.) for any aspect of the submitted work (including but not limited to grants, data monitoring board, study design, manuscript preparation, statistical analysis, etc.)?

Are there any relevant conflicts of interest? Yes No

Section 3. Relevant financial activities outside the submitted work.

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Are there any relevant conflicts of interest? Yes No

If yes, please fill out the appropriate information below.

Name of Entity	Grant?	Personal Fees?	Non-Financial Support?	Other?	Comments
Astellas	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Lecture Fee
Gilead	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Lecture Fee
Chiesi	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Lecture Fee

Section 4. Intellectual Property -- Patents & Copyrights

Do you have any patents, whether planned, pending or issued, broadly relevant to the work? Yes No

ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 5. Relationships not covered above

Are there other relationships or activities that readers could perceive to have influenced, or that give the appearance of potentially influencing, what you wrote in the submitted work?

- Yes, the following relationships/conditions/circumstances are present (explain below):
- No other relationships/conditions/circumstances that present a potential conflict of interest

At the time of manuscript acceptance, journals will ask authors to confirm and, if necessary, update their disclosure statements. On occasion, journals may ask authors to disclose further information about reported relationships.

Section 6. Disclosure Statement

Based on the above disclosures, this form will automatically generate a disclosure statement, which will appear in the box below.

Dr. Pons reports personal fees from Astellas, personal fees from Gilead, personal fees from Chiesi, outside the submitted work; .

Evaluation and Feedback

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)

Lluis

2. Surname (Last Name)

Castells

3. Date

05-June-2020

4. Are you the corresponding author?

Yes No

Corresponding Author's Name

Manuel Rodríguez-Perálvarez

5. Manuscript Title

Epidemiological pattern, incidence and outcomes of Covid-19 in liver transplant patients.

6. Manuscript Identifying Number (if you know it)

JHEPAT-D-20-01099

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Are there any relevant conflicts of interest? Yes No

Section 4. Intellectual Property -- Patents & Copyrights

Do you have any patents, whether planned, pending or issued, broadly relevant to the work? Yes No

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Dr. Castells has nothing to disclose.

Evaluation and Feedback

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)

Loreto

2. Surname (Last Name)

Hierro

3. Date

05-June-2020

4. Are you the corresponding author?

Yes

No

Corresponding Author's Name

Manuel Rodríguez-Perálvarez

5. Manuscript Title

Epidemiological pattern, incidence and outcomes of Covid-19 in liver transplant patients.

6. Manuscript Identifying Number (if you know it)

JHEPAT-D-20-01099

Section 2. The Work Under Consideration for Publication

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Are there any relevant conflicts of interest?

Yes

No

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Are there any relevant conflicts of interest?

Yes

No

Section 4. Intellectual Property -- Patents & Copyrights

Do you have any patents, whether planned, pending or issued, broadly relevant to the work?

Yes

No

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Section 6. Disclosure Statement

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Dr. Hierro has nothing to disclose.

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)

Laura

2. Surname (Last Name)

Lladó

3. Date

05-June-2020

4. Are you the corresponding author?

Yes No

Corresponding Author's Name

Manuel Rodríguez-Perálvarez

5. Manuscript Title

Epidemiological pattern, incidence and outcomes of Covid-19 in liver transplant patients.

6. Manuscript Identifying Number (if you know it)

JHEPAT-D-20-01099

Section 2. The Work Under Consideration for Publication

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Are there any relevant conflicts of interest? Yes No

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Are there any relevant conflicts of interest? Yes No

Section 4. Intellectual Property -- Patents & Copyrights

Do you have any patents, whether planned, pending or issued, broadly relevant to the work? Yes No

ICMJE Form for Disclosure of Potential Conflicts of Interest

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Section 6. Disclosure Statement

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Dr. Lladó has nothing to disclose.

Evaluation and Feedback

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name) Mikel	2. Surname (Last Name) Gastaca	3. Date 05-June-2020
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Manuel Rodríguez-Perálvarez
5. Manuscript Title Epidemiological pattern, incidence and outcomes of Covid-19 in liver transplant patients.		
6. Manuscript Identifying Number (if you know it) JHEPAT-D-20-01099		

Section 2. The Work Under Consideration for Publication

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Are there any relevant conflicts of interest? Yes No

If yes, please fill out the appropriate information below.

Name of Entity	Grant?	Personal Fees?	Non-Financial Support?	Other?	Comments
Astellas	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Lecture Fee and advisory
Novartis	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Lecture Fee
Chiesi	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Lecture Fee
Baxter	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Advisory
Medtronic	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Advisory

ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 4. Intellectual Property -- Patents & Copyrights

Do you have any patents, whether planned, pending or issued, broadly relevant to the work? Yes No

Section 5. Relationships not covered above

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Dr. Gastaca reports personal fees from Astellas, personal fees from Novartis, personal fees from Chiesi, personal fees from Baxter, personal fees from Medtronic, outside the submitted work; .

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)

María Luisa

2. Surname (Last Name)

Muñoz-Serrano

3. Date

05-June-2020

4. Are you the corresponding author?

Yes

No

Corresponding Author's Name

Manuel Rodríguez-Perálvarez

5. Manuscript Title

Epidemiological pattern, incidence and outcomes of Covid-19 in liver transplant patients.

6. Manuscript Identifying Number (if you know it)

JHEPAT-D-20-01099

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Are there any relevant conflicts of interest?

Yes

No

Section 3. Relevant financial activities outside the submitted work.

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Are there any relevant conflicts of interest?

Yes

No

Section 4. Intellectual Property -- Patents & Copyrights

Do you have any patents, whether planned, pending or issued, broadly relevant to the work?

Yes

No

ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 5. Relationships not covered above

Are there other relationships or activities that readers could perceive to have influenced, or that give the appearance of potentially influencing, what you wrote in the submitted work?

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Section 6. Disclosure Statement

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Dr. Muñoz-Serrano has nothing to disclose.

Evaluation and Feedback

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ICMJE Form for Disclosure of Potential Conflicts of Interest

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Royalties: Funds are coming in to you or your institution due to your patent

ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name) Mercedes	2. Surname (Last Name) Iñarrairaegui	3. Date 05-June-2020
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Manuel Rodríguez-Perálvarez
5. Manuscript Title Epidemiological pattern, incidence and outcomes of Covid-19 in liver transplant patients.		
6. Manuscript Identifying Number (if you know it) JHEPAT-D-20-01099		

Section 2. The Work Under Consideration for Publication

Did you or your institution **at any time** receive payment or services from a third party (government, commercial, private foundation, etc.) for any aspect of the submitted work (including but not limited to grants, data monitoring board, study design, manuscript preparation, statistical analysis, etc.)?

Are there any relevant conflicts of interest? Yes No

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Are there any relevant conflicts of interest? Yes No

If yes, please fill out the appropriate information below.

Name of Entity	Grant?	Personal Fees?	Non-Financial Support?	Other?	Comments
BMS	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Lecture Fee

Section 4. Intellectual Property -- Patents & Copyrights

Do you have any patents, whether planned, pending or issued, broadly relevant to the work? Yes No

ICMJE Form for Disclosure of Potential Conflicts of Interest

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Dr. Iñarrairaegui reports personal fees from BMS, outside the submitted work; .

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name) Mikel	2. Surname (Last Name) Navasa	3. Date 05-June-2020
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Manuel Rodríguez-Perálvarez
5. Manuscript Title Epidemiological pattern, incidence and outcomes of Covid-19 in liver transplant patients.		
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Section 2. The Work Under Consideration for Publication

Did you or your institution **at any time** receive payment or services from a third party (government, commercial, private foundation, etc.) for any aspect of the submitted work (including but not limited to grants, data monitoring board, study design, manuscript preparation, statistical analysis, etc.)?

Are there any relevant conflicts of interest? Yes No

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Are there any relevant conflicts of interest? Yes No

If yes, please fill out the appropriate information below.

Name of Entity	Grant?	Personal Fees?	Non-Financial Support?	Other?	Comments
Astellas	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Lecture Fee

Section 4. Intellectual Property -- Patents & Copyrights

Do you have any patents, whether planned, pending or issued, broadly relevant to the work? Yes No

ICMJE Form for Disclosure of Potential Conflicts of Interest

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Dr. Navasa reports personal fees from Astellas, outside the submitted work; .

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4. Intellectual Property.

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Royalties: Funds are coming in to you or your institution due to your patent

ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)
Manuel

2. Surname (Last Name)
Rodríguez-Perálvarez

3. Date
05-June-2020

4. Are you the corresponding author? Yes No

5. Manuscript Title
Epidemiological pattern, incidence and outcomes of Covid-19 in liver transplant patients.

6. Manuscript Identifying Number (if you know it)
JHEPAT-D-20-01099

Section 2. The Work Under Consideration for Publication

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Are there any relevant conflicts of interest? Yes No

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Name of Entity	Grant?	Personal Fees?	Non-Financial Support?	Other?	Comments
Astellas	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Lecture Fee
Novartis	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Lecture Fee
Intercept pharma	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Lecture Fee

Section 4. Intellectual Property -- Patents & Copyrights

Do you have any patents, whether planned, pending or issued, broadly relevant to the work? Yes No

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Dr. Rodríguez-Perálvarez reports personal fees from Astellas, personal fees from Novartis, personal fees from Intercept pharma, outside the submitted work; .

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)
Magdalena

2. Surname (Last Name)
Salcedo

3. Date
05-June-2020

4. Are you the corresponding author? Yes No
Corresponding Author's Name
Manuel Rodríguez-Perálvarez

5. Manuscript Title
Epidemiological pattern, incidence and outcomes of Covid-19 in liver transplant patients.

6. Manuscript Identifying Number (if you know it)
JHEPAT-D-20-01099

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Are there any relevant conflicts of interest? Yes No

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Novartis	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Lecture Fee and advisory
Chiesi	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Lecture Fee
Jazz	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Advisory

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Dr. Salcedo reports personal fees from Astellas, personal fees from Novartis, personal fees from Chiesi, personal fees from Jazz, outside the submitted work; .

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)

Pablo

2. Surname (Last Name)

Ramírez

3. Date

05-June-2020

4. Are you the corresponding author?

Yes No

Corresponding Author's Name

Manuel Rodríguez-Perálvarez

5. Manuscript Title

Epidemiological pattern, incidence and outcomes of Covid-19 in liver transplant patients.

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Dr. Ramírez has nothing to disclose.

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1. Given Name (First Name)

Rocío

2. Surname (Last Name)

González-Grande

3. Date

05-June-2020

4. Are you the corresponding author?

Yes No

Corresponding Author's Name

Manuel Rodríguez-Perálvarez

5. Manuscript Title

Epidemiological pattern, incidence and outcomes of Covid-19 in liver transplant patients.

6. Manuscript Identifying Number (if you know it)

JHEPAT-D-20-01099

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Are there any relevant conflicts of interest? Yes No

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Are there any relevant conflicts of interest? Yes No

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1. Given Name (First Name)

Sonia

2. Surname (Last Name)

Pascual

3. Date

05-June-2020

4. Are you the corresponding author?

Yes

No

Corresponding Author's Name

Manuel Rodríguez-Perálvarez

5. Manuscript Title

Epidemiological pattern, incidence and outcomes of Covid-19 in liver transplant patients.

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Santiago

2. Surname (Last Name)

Tomé

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05-June-2020

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Yes No

Corresponding Author's Name

Manuel Rodríguez-Perálvarez

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