

ICMJE Form for Disclosure of Potential Conflicts of Interest

Instructions

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)

Jeh-han

2. Surname (Last Name)

Omarjee

3. Date

09-January-2018

4. Are you the corresponding author?

Yes No

Corresponding Author's Name

Andre Germishuizen

5. Manuscript Title

Plasma Fractionation in South Africa: challenges and successes in meeting international standards

6. Manuscript Identifying Number (if you know it)

AOB-17-38

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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Dr. Omarjee has nothing to disclose.

Evaluation and Feedback

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Section 1. Identifying Information

1. Given Name (First Name)
Willem

2. Surname (Last Name)
Germishuizen

3. Date
09-January-2018

4. Are you the corresponding author? Yes No

5. Manuscript Title
Plasma fractionation in South Africa: challenges and successes in meeting international standards

6. Manuscript Identifying Number (if you know it)
AOB-17-38

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Dr. Germishuizen has nothing to disclose.

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1. Given Name (First Name) Rangini	2. Surname (Last Name) Chetty	3. Date 09-January-2018
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Willem Germishuizen
5. Manuscript Title Plasma fractionation in South Africa: challenges and successes in meeting international standards		
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