

## 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)  
John

2. Surname (Last Name)  
Olson

3. Date  
12-September-2019

4. Are you the corresponding author?  Yes  No

5. Manuscript Title  
External quality assurance in thrombosis and hemostasis: an update

6. Manuscript Identifying Number (if you know it)  
AOB-2019-EQA-004

### 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. Olson 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) Richard	2. Surname (Last Name) Marlar	3. Date 12-September-2019
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name John Olson
5. Manuscript Title External quality assurance in thrombosis and hemostasis: an update		
6. Manuscript Identifying Number (if you know it) AOB-2019-EQA-004		

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Are there any relevant conflicts of interest?  Yes  No

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

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Dr. Marlar has nothing to disclose.

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1. Given Name (First Name) Ian	2. Surname (Last Name) Jennings	3. Date 12-September-2019
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name John Olson
5. Manuscript Title External quality assurance in thrombosis and hemostasis: an update		
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1. Given Name (First Name) WILLIAM	2. Surname (Last Name) NICHOLS	3. Date 12-September-2019
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name JOHN D. OLSON
5. Manuscript Title External Quality Assurance in Thrombosis and Hemostasis: An Update		
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Dr. NICHOLS has nothing to disclose.

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