

Instructions

The purpose of this form is to provide readers of your manuscript with information about your other interests that could influence how they receive and understand your work. The form is designed to be completed electronically and stored electronically. It contains programming that allows appropriate data display. Each author should submit a separate form and is responsible for the accuracy and completeness of the submitted information. The form is in six parts.

1. Identifying information.

2. The work under consideration for publication.

This section asks for information about the work that you have submitted for publication. The time frame for this reporting is that of the work itself, from the initial conception and planning to the present. The requested information is about resources that you received, either directly or indirectly (via your institution), to enable you to complete the work. Checking "No" means that you did the work without receiving any financial support from any third party -- that is, the work was supported by funds from the same institution that pays your salary and that institution did not receive third-party funds with which to pay you. If you or your institution received funds from a third party to support the work, such as a government granting agency, charitable foundation or commercial sponsor, check "Yes".

3. Relevant financial activities outside the submitted work.

This section asks about your financial relationships with entities in the bio-medical arena that could be perceived to influence, or that give the appearance of potentially influencing, what you wrote in the submitted work. You should disclose interactions with ANY entity that could be considered broadly relevant to the work. For example, if your article is about testing an epidermal growth factor receptor (EGFR) antagonist in lung cancer, you should report all associations with entities pursuing diagnostic or therapeutic strategies in cancer in general, not just in the area of EGFR or lung cancer.

Report all sources of revenue paid (or promised to be paid) directly to you or your institution on your behalf over the 36 months prior to submission of the work. This should include all monies from sources with relevance to the submitted work, not just monies from the entity that sponsored the research. Please note that your interactions with the work's sponsor that are outside the submitted work should also be listed here. If there is any question, it is usually better to disclose a relationship than not to do so.

For grants you have received for work outside the submitted work, you should disclose support ONLY from entities that could be perceived to be affected financially by the published work, such as drug companies, or foundations supported by entities that could be perceived to have a financial stake in the outcome. Public funding sources, such as government agencies, charitable foundations or academic institutions, need not be disclosed. For example, if a government agency sponsored a study in which you have been involved and drugs were provided by a pharmaceutical company, you need only list the pharmaceutical company.

4. Intellectual Property.

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

5. Relationships not covered above.

Use this section to report 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.

Definitions.

Entity: government agency, foundation, commercial sponsor, academic institution, etc.

Grant: A grant from an entity, generally [but not always] paid to your organization

Personal Fees: Monies paid to you for services rendered, generally honoraria, royalties, or fees for consulting, lectures, speakers bureaus, expert testimony, employment, or other affiliations

Non-Financial Support: Examples include drugs/equipment supplied by the entity, travel paid by the entity, writing assistance, administrative support, etc.

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



Section 1.					
	Identifying Inform	nation			
1. Given Name (Fir Donatella	st Name)	2. Surname (Last Name) Londero	3. Date 02-July-2020		
4. Are you the corr	esponding author?	Yes 🖌 No	Corresponding Author's Name Vincenzo De Angelis		
5. Manuscript Title Non-invasive Feta prophylaxis		lidation of the test and in	nplementation of a screening program to guide anti-D		
6. Manuscript Iden AOB-20-43	tifying Number (if you k	now it)			
Section 2.	The Work Under C	onsideration for Publ	cation		
any aspect of the su statistical analysis, e	ubmitted work (including	g but not limited to grants, d	n a third party (government, commercial, private foundation, etc.) for ata monitoring board, study design, manuscript preparation,		

If yes, please fill out the appropriate information below. If you have more than one entity press the "ADD" button to add a row. Excess rows can be removed by pressing the "X" button.

Name of Institution/Company	Grant?	Personal Fees	Non-Financial Support?	Other?	Comments	
Friuli Venezia Giulia Region	<				This work was supported by the regional grant GENIC – financed by contributions on clinical, translational, basic, epidemiological and organizational of Friuli Venezia Giulia region (art. 15, com. 2, let. b, Legge Regionale 17/2014 e Regolamento D.P.Reg. n. 0235/Pres. del 11/11/2015).	

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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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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. Londero reports grants from Friuli Venezia Giulia Region, during the conduct of the study.

Evaluation and Feedback

Please visit <u>http://www.icmje.org/cgi-bin/feedback</u> to provide feedback on your experience with completing this form.



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patent

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Section 1. Identifying Inform	ation		
1. Given Name (First Name) Vincenzo	2. Surname (Last Name) De Angelis		3. Date 02-July-2020
4. Are you the corresponding author?	✓ Yes No		
 Manuscript Title Non-invasive Fetal RHD genotyping: val prophylaxis Manuscript Identifying Number (if you kn AOB-20-43 		mplementation of a sc	reening program to guide anti-D
Section 2. The Work Under Co	onsideration for Pub	lication	
Did you or your institution at any time recei- any aspect of the submitted work (including statistical analysis, etc.)? Are there any relevant conflicts of intere	but not limited to grants,		nent, commercial, private foundation, etc.) for study design, manuscript preparation,
If yes, please fill out the appropriate info Excess rows can be removed by pressing		ave more than one en	tity press the "ADD" button to add a row.
Name of Institution/Company	Grant? Personal N	on-Financial Other	Comments

Friuli Venezia Giulia Region Friuli Venezia Giulia Region Image: A state of the	Name of Institution/Company	Grant?	Personal Fees?	Non-Financial Support	Other?	Comments	
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