

## ICMJE DISCLOSURE FORM

Date: 11/16/21  
 Your Name: Glenn Ramsey, MD  
 Manuscript Title: Transfusion in Solid Organ Transplantation  
 Manuscript number (if known): AOB-21-72

In the interest of transparency, we ask you to disclose all relationships/activities/interests listed below that are related to the content of your manuscript. "Related" means any relation with for-profit or not-for-profit third parties whose interests may be affected by the content of the manuscript. Disclosure represents a commitment to transparency and does not necessarily indicate a bias. If you are in doubt about whether to list a relationship/activity/interest, it is preferable that you do so.

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In item #1 below, report all support for the work reported in this manuscript without time limit. For all other items, the time frame for disclosure is the past 36 months.

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<b>Time frame: Since the initial planning of the work</b>			
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2	Grants or contracts from any entity (if not indicated in item #1 above).	X None	
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6	Payment for expert testimony	X None	
7	Support for attending meetings and/or travel	X None	
8	Patents planned, issued or pending	X None	
9	Participation on a Data Safety Monitoring Board or Advisory Board	X None	
10	Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid	None Yes: Chair, College of American Pathologists Transfusion, Apheresis and Cellular Therapy Committee	No payments
11	Stock or stock options	X None	
12	Receipt of equipment, materials, drugs, medical writing, gifts or other services	X None	
13	Other financial or non-financial interests	X None	

**Please summarize the above conflict of interest in the following box:**

The author is the chair of the College of American Pathologists Transfusion, Apheresis and Cellular Therapy Committee. This committee oversees CAP proficiency testing programs for ABO subgroups and ABO antibody titers which are used in organ transplants and are mentioned in this article.

**Please place an "X" next to the following statement to indicate your agreement:**

**X I certify that I have answered every question and have not altered the wording of any of the questions on this form.**