

# Supplement 2. Disclosure of Interest Forms of the panel for the ASH 2022 Guidelines for Prevention of Venous Thromboembolism in Latin America

Ricardo Aguilar

Guillermo León Basantes

Patricia Casais

Cecilia C. Colorio

Pedro P. García Lázaro

María Cecilia Guillermo Esposito

Luis A. Meillon-García

Ignacio Neumann

Jaime Pereira

Suely Meireles Rezende

Juan Carlos Serrano

Mario L. Tejerina Valle



# ASH Guideline Panel Declaration of Interests Form

## Part A. Direct Financial Interests in or Relationships With Companies

### Employment

1. Are you currently or in the past 24 months have you been an employee of any for-profit company that develops, produces, markets, or distributes drugs, devices, services, or therapies used to diagnose, treat, monitor, manage, or alleviate health conditions?

☒ No

☐ Yes, as described below:

Add rows as needed for each employment relationship.

Company	Description	End Date	For ASH Internal Use

### Equity

2. Do you currently or in the past 24 months have you had equity in any for-profit company that develops, produces, markets, or distributes drugs, devices, services, or therapies used to diagnose, treat, monitor, manage, or alleviate health conditions? Equity includes stock, stock options, and other ownership interests but excludes diversified mutual fund shares.

☒ No

☐ Yes, as described below:

Add rows as needed for each equity interest.

<i>Company</i>	<i>Description</i>	<i>Date Divested</i>	<i>For ASH Internal Use</i>

## Patents, Royalties, and Other Intellectual Property

3. Do you currently or in the past 24 months have you owned patents for or received royalties from any intellectual property or product used to diagnose, treat, monitor, manage, or alleviate health conditions?

☒ No

☐ Yes, as described below:

Add rows as needed for each patent or royalty interest.

<i>Company</i>	<i>Description</i>	<i>Date Divested</i>	<i>For ASH Internal Use</i>

## Personal Income or Other Direct Transfers of Value

4. Do you currently or in the past 24 months have you received any personal income or other direct transfers of value (e.g., honoraria, gifts, travel support, meeting registration, meals) from any for-profit company that develops, produces, markets, or distributes drugs, devices, services, or therapies used to diagnose, treat, monitor, manage, or alleviate health conditions?

☐ No

☒ Yes, as described below:

Column 1 Name the company.

Column 2 Describe the activity for which you received the income or other transfer of value, e.g., research, consultancy, speakers bureau involvement, service on an advisory committee or board, expert testimony.

Column 3 Indicate when the activity ended, if applicable. (If the activity has not yet ended, indicate “current” or “ongoing.”)

Add rows as needed for each activity.

<i>Company</i>	<i>Description</i>	<i>End Date</i>	<i>For ASH Internal Use</i>
Asofarma	Sponsoring for ASH meeting on San Diego, CA (inscription, hotel and airplane ticket)	December 2016	Not a COI. This travel support occurred prior to Dr. Aguilar’s appointment to the guideline panel. Additionally, Asofarma does not market any products related to the diagnosis or treatment of VTE.

## My Partner’s or Spouse’s Interests

5. Currently or in the past 24 months has *your partner or spouse* had any of the interests or relationships described in questions 1-4?

☒ No

☐ Yes, as described below:

Add rows as needed for each interest.

<i>Company</i>	<i>Description</i>	<i>End Date</i>	<i>For ASH Internal Use</i>

## Part B. Indirect Financial Interests in or Relationships With Companies

### Industry-Funded Institutional Research

1. Through your institution, do you currently or in the past 24 months have you been involved in research funded or supported (e.g., in kind support, such as provision of a study drug) by any for-profit company that develops, produces, markets, or distributes drugs, devices, services, or therapies used to diagnose, treat, monitor, manage, or alleviate health conditions?

☒ No

☐ Yes, as described below:

Column 1 Name the company funding or supporting the research.

Column 2 Briefly describe the research project.

Column 3 Describe your role: (a) national or overall principal investigator, (b) member of a steering committee of a study that does not have a principal investigator, (c) site or local investigator. If other than these options, please describe.

Column 4 Indicate when your involvement ended, if applicable. (If your involvement has not yet ended, indicate “current” or “ongoing.”)

Add rows as needed for each research project.

<i>Company</i>	<i>Description of Research</i>	<i>My Role</i>	<i>End Date</i>	<i>For ASH Internal Use</i>

### Paid and Volunteer Activities for Organizations Supported by Industry

2. Do you currently or in the past 24 months have you been involved in any volunteer or paid work for an organization that is wholly or partially funded by any for-profit company that develops, produces,

markets, or distributes drugs, devices, services, or therapies used to diagnose, treat, monitor, manage, or alleviate health conditions?

☒ No

☐ Yes, as described below:

Column 1 Name the organization. If known to you, describe any industry funding or support.

Column 2 Briefly describe your activity and role, e.g., employment, service on board of directors, other volunteer services.

Column 3 Indicate if your activity was paid or volunteered.

Column 4 Indicate when your involvement with the organization ended. (If your involvement has not yet ended, indicate "current" or "ongoing.")

Add rows as needed for each organization.

<i>Organization</i>	<i>Description and role</i>	<i>Paid or Unpaid?</i>	<i>End Date</i>	<i>For ASH Internal Use</i>

## Other

3. Do you have other indirect interests in or relationships with any for-profit company that develops, produces, markets, or distributes drugs, devices, services, or therapies used to diagnose, treat, monitor, manage, or alleviate health conditions?

☒ No

☐ Yes

If yes, please explain:

## Part C. Relevant Other Interests That Are Not Mainly Financial

You have been invited by ASH to participate in the development of clinical practice guidelines on the following topic(s):

ASH Guidelines on Venous Thromboembolism for Latin America

The questions that follow are designed to elicit information about personal beliefs, intellectual positions or opinions, institutional relationships, and other interests that are not mainly financial and that may be relevant to guidelines on the above topic(s).

### Personal Beliefs

1. Do you have strongly held beliefs related to the topic of these guidelines?

☒ No

☐ Yes

If yes, please explain:

### Previously Published Opinions

2. Have you ever authored, coauthored, or publicly provided an opinion related to the topic of these guidelines, e.g., a clinical practice guideline, textbook, review article, meeting poster or presentation, grand rounds talk, letter to the editor?

☒ No

☐ Yes

If yes, what were those views and where were they made?

### Non-Industry Supported Research

3. Currently or in the past 24 months, have you been involved in a leadership role in any research project not already reported under Part B, Question 1, relevant to the topic of these guidelines, e.g., a research project funded by a nonprofit or governmental organization?

☒ No

☐ Yes, as described below:

Column 1 Name the entity funding the research.

Column 2 Describe the research project.

Column 3 Describe your role: (a) national or overall principal investigator, (b) member of a steering committee of a study that does not have a principal investigator, (c) site or local investigator. If other than these options, please describe.

Column 4 Indicate when your involvement ended, if applicable. (If your involvement has not yet ended, indicate "current" or "ongoing.")

Add rows as needed for each research project.

<i>Funder</i>	<i>Description of Research</i>	<i>My Role</i>	<i>End Date</i>

## Institutional Relationships

4. Could your salary be affected by recommendations on this topic?

☐ Don't know

☒ No

☐ Yes

If yes, please explain:

5. Do you generate revenues for your institution or employer by clinical activity, teaching, speaking, consulting, testifying, writing, or otherwise sharing your knowledge or opinions about this guideline topic?

☐ Don't know

☒ No

☐ Yes

If yes, please explain:



6. Could your institution benefit or be harmed by recommendations of guidelines on this topic?

☐ Don't know

☒ No

☐ Yes

If yes, please explain:

## Career Advancement

7. How would you characterize the support you would receive from your primary mentor, institution, or other entities if your work on this panel or authorship of these guidelines generated a strong reaction from peers outside your institution?

The support of the institutions where I work, would be to give me the time to participate on the activities related to the review these guidelines. I do not expect that my participation will generate mayor reaction from other colleagues.

## Involvement in Organizations With Relevant Policy Positions

8. Do you work for or are you a member of an organization with a stated position related to the topic of these guidelines, e.g., position statement, editorial, blog, amicus brief, or legislature or legal testimony?

☒ No

☐ Yes, as described below:

Column 1 Name the organization.

Column 2 Describe or reference any policy position of the organization that is related to the topic of these guidelines.

Column 3 Describe your role at the organization, including your involvement in deciding, promoting, or implementing relevant positions.

Add rows as needed for each organization.

Organization	Relevant Policy Position	Your Role

## Clinical Practice

9. Do you see patients clinically?

☐ No

☒ Yes

If yes, what is your primary specialty or subspecialty?

Hematology

If yes, do you prescribe or otherwise recommend clinical interventions (e.g., screening or diagnostic tests, evaluations, treatments, procedures) that may be addressed by these guidelines?

☐ No

☒ Yes

If yes, please explain:

I diagnose and treat patients with venous thromboembolism or risk of thromboembolic disease.

## Expected Interests

10. Do you expect new financial or nonfinancial interests relevant to the topic of these guidelines not already declared in this form?

☐ No

☒ Yes

If yes, please describe:

I expect these guidelines will be of interest for physicians on Latin America, to improve the management of the patients with deep vein thrombosis.

## Part D. New Declarations (ASH Internal Use)

<i>Company</i>	<i>Description</i>	<i>Disclosure Date</i>	<i>ASH Internal Notes</i>
Asofarma	Asofarma provided funding to the Panamanian Society of Hematology to develop a guideline for multiple myeloma. Dr. Aguilar is the president of the Panamanian society, who signed the contract for this activity and is also the lead of the project.	10/07/2010	<b>Indirect Conflict.</b>
Jansen	Jensen provided funding to the Panamanian Society of Hematology to develop a guideline for multiple myeloma. Dr. Aguilar is the president of the Panamanian society, who signed the contract for this activity and is also the lead of the project.	10/07/2010	<b>Indirect Conflict.</b>
Sandoz	Sandoz provided funding to the Panamanian Society of Hematology to develop a guideline for multiple myeloma. Dr. Aguilar is the president of the Panamanian society, who signed the contract for this activity and is also the lead of the project.	10/07/2010	<b>Indirect Conflict.</b>

## Part E. Summary (ASH Internal Use)

Name of guideline panel(s)	ASH Guidelines on Venous Thromboembolism for Latin America
----------------------------	--

### Summary of ASH Judgments About Financial Conflicts

<i>Reviewer name and date</i>	<i>Direct Financial Conflicts?</i>	<i>Indirect Financial Conflicts?</i>	<i>Management Notes</i>
Alexander, 3/5/2018	No	No	Dr. Aguilar does not have any financial conflicts of interest. As a condition of his appointment, Dr. Aguilar agrees to avoid direct financial relationships with any company that markets products that could be affected by these guidelines.
Castano, 5/29/2020	No	Yes	Dr. Aguilar has three indirect financial conflicts with three pharmaceutical companies, Asofarma, Jansen, and Sandoz. These companies provided funding to the Panamanian Society of Hematology to develop to develop a guideline for multiple myeloma. Dr. Aguilar does not receive any direct payments from this effort, but because Dr. Aguilar is the president of the Society and the lead of the project, these relationships qualify as indirect financial conflicts.
Castano, 6/08/2020	No	Yes	On June 8, 2020 Dr. Aguilar confirmed all information on this form.
Castano, 6/04/2021	No	Yes	On May 25, 2021 Dr. Aguilar reviewed and confirmed all information on this form.

### Summary of Direct Financial Conflicts

<i>Company</i>	<i>Description</i>	<i>Disclosure Date</i>	<i>ASH Notes</i>

## Other Notes

In consideration of regional economic factors in Latin America, ASH has adjusted the conflict of interest policy for this panel to allow direct payment from affected companies to panelists for travel to attend educational meetings only.



# ASH Guideline Panel Declaration of Interests Form

## Part A. Direct Financial Interests in or Relationships With Companies

### Employment

1. Are you currently or in the past 24 months have you been an employee of any for-profit company that develops, produces, markets, or distributes drugs, devices, services, or therapies used to diagnose, treat, monitor, manage, or alleviate health conditions?

☐ No: X

☐ Yes, as described below:

Add rows as needed for each employment relationship.

<i>Company</i>	<i>Description</i>	<i>End Date</i>	<i>For ASH Internal Use</i>

### Equity

2. Do you currently or in the past 24 months have you had equity in any for-profit company that develops, produces, markets, or distributes drugs, devices, services, or therapies used to diagnose, treat, monitor, manage, or alleviate health conditions? Equity includes stock, stock options, and other ownership interests but excludes diversified mutual fund shares.

☐ No: X

☐ Yes, as described below:

Add rows as needed for each equity interest.

<i>Company</i>	<i>Description</i>	<i>Date Divested</i>	<i>For ASH Internal Use</i>

## Patents, Royalties, and Other Intellectual Property

3. Do you currently or in the past 24 months have you owned patents for or received royalties from any intellectual property or product used to diagnose, treat, monitor, manage, or alleviate health conditions?

☐ No: X

☐ Yes, as described below:

Add rows as needed for each patent or royalty interest.

<i>Company</i>	<i>Description</i>	<i>Date Divested</i>	<i>For ASH Internal Use</i>

## Personal Income or Other Direct Transfers of Value

4. Do you currently or in the past 24 months have you received any personal income or other direct transfers of value (e.g., honoraria, gifts, travel support, meeting registration, meals) from any for-profit company that develops, produces, markets, or distributes drugs, devices, services, or therapies used to diagnose, treat, monitor, manage, or alleviate health conditions?

☐ No

☐ Yes, as described below: X

Column 1 Name the company.

Column 2 Describe the activity for which you received the income or other transfer of value, e.g., research, consultancy, speakers bureau involvement, service on an advisory committee or board, expert testimony.

Column 3 Indicate when the activity ended, if applicable. (If the activity has not yet ended, indicate “current” or “ongoing.”)

Add rows as needed for each activity.

<i>Company</i>	<i>Description</i>	<i>End Date</i>	<i>For ASH Internal Use</i>
Technofarma	travel support	October 2016	Not a COI. Tecnofarma does not market any products used in the diagnosis or treatment of VTE. This travel support was provided prior to Dr. Basantes’ appointment to the panel.
Janssen	travel support	June 2016	Not a COI. Janssen markets rivaroxaban. This travel support was provided prior to Dr. Basantes’ appointment to the panel.
Alexion	travel support	September 2016	Not a COI. Alexion does not market any products used in the diagnosis or treatment of VTE. This travel support was provided prior to Dr. Basantes’ appointment to the panel.

### My Partner’s or Spouse’s Interests

5. Currently or in the past 24 months has *your partner or spouse* had any of the interests or relationships described in questions 1-4?

☐ No: X



☐ Yes, as described below:

Add rows as needed for each interest.

<i>Company</i>	<i>Description</i>	<i>End Date</i>	<i>For ASH Internal Use</i>

## Part B. Indirect Financial Interests in or Relationships With Companies

### Industry-Funded Institutional Research

1. Through your institution, do you currently or in the past 24 months have you been involved in research funded or supported (e.g., in kind support, such as provision of a study drug) by any for-profit company that develops, produces, markets, or distributes drugs, devices, services, or therapies used to diagnose, treat, monitor, manage, or alleviate health conditions?

☐ No: X

☐ Yes, as described below:

Column 1 Name the company funding or supporting the research.

Column 2 Briefly describe the research project.

Column 3 Describe your role: (a) national or overall principal investigator, (b) member of a steering committee of a study that does not have a principal investigator, (c) site or local investigator. If other than these options, please describe.

Column 4 Indicate when your involvement ended, if applicable. (If your involvement has not yet ended, indicate "current" or "ongoing.")

Add rows as needed for each research project.

<i>Company</i>	<i>Description of Research</i>	<i>My Role</i>	<i>End Date</i>	<i>For ASH Internal Use</i>

### Paid and Volunteer Activities for Organizations Supported by Industry

2. Do you currently or in the past 24 months have you been involved in any volunteer or paid work for an organization that is wholly or partially funded by any for-profit company that develops, produces,

markets, or distributes drugs, devices, services, or therapies used to diagnose, treat, monitor, manage, or alleviate health conditions?

☐ No: X

☐ Yes, as described below:

Column 1 Name the organization. If known to you, describe any industry funding or support.

Column 2 Briefly describe your activity and role, e.g., employment, service on board of directors, other volunteer services.

Column 3 Indicate if your activity was paid or volunteered.

Column 4 Indicate when your involvement with the organization ended. (If your involvement has not yet ended, indicate “current” or “ongoing.”)

Add rows as needed for each organization.

<i>Organization</i>	<i>Description and role</i>	<i>Paid or Unpaid?</i>	<i>End Date</i>	<i>For ASH Internal Use</i>

## Other

3. Do you have other indirect interests in or relationships with any for-profit company that develops, produces, markets, or distributes drugs, devices, services, or therapies used to diagnose, treat, monitor, manage, or alleviate health conditions?

☐ No: X

☐ Yes

If yes, please explain:

## Part C. Relevant Other Interests That Are Not Mainly Financial

You have been invited by ASH to participate in the development of clinical practice guidelines on the following topic(s):

ASH Guidelines on Venous Thromboembolism for Latin America

The questions that follow are designed to elicit information about personal beliefs, intellectual positions or opinions, institutional relationships, and other interests that are not mainly financial and that may be relevant to guidelines on the above topic(s).

### Personal Beliefs

1. Do you have strongly held beliefs related to the topic of these guidelines?

☐ No: X

☐ Yes

If yes, please explain:

### Previously Published Opinions

2. Have you ever authored, coauthored, or publicly provided an opinion related to the topic of these guidelines, e.g., a clinical practice guideline, textbook, review article, meeting poster or presentation, grand rounds talk, letter to the editor?

☐ No: X

☐ Yes

If yes, what were those views and where were they made?

### Non-Industry Supported Research

3. Currently or in the past 24 months, have you been involved in a leadership role in any research project not already reported under Part B, Question 1, relevant to the topic of these guidelines, e.g., a research project funded by a nonprofit or governmental organization?

☐ No: X

☐ Yes, as described below:

Column 1 Name the entity funding the research.

Column 2 Describe the research project.

Column 3 Describe your role: (a) national or overall principal investigator, (b) member of a steering committee of a study that does not have a principal investigator, (c) site or local investigator. If other than these options, please describe.

Column 4 Indicate when your involvement ended, if applicable. (If your involvement has not yet ended, indicate “current” or “ongoing.”)

Add rows as needed for each research project.

<i>Funder</i>	<i>Description of Research</i>	<i>My Role</i>	<i>End Date</i>

## Institutional Relationships

4. Could your salary be affected by recommendations on this topic?

☐ Don't know

☐ No: X

☐ Yes

If yes, please explain:

5. Do you generate revenues for your institution or employer by clinical activity, teaching, speaking, consulting, testifying, writing, or otherwise sharing your knowledge or opinions about this guideline topic?

☐ Don't know

☐ No: X

☐ Yes

If yes, please explain:

6. Could your institution benefit or be harmed by recommendations of guidelines on this topic?

☐ Don't know

☐ No: X

☐ Yes

If yes, please explain:

## Career Advancement

7. How would you characterize the support you would receive from your primary mentor, institution, or other entities if your work on this panel or authorship of these guidelines generated a strong reaction from peers outside your institution?

I'm vinculated with "Asociación Colombiana de Oncología y Hematología", a colombian official organization with specific academic interest in Hematology. There is not restrictions for its members to participate in the guidelines development.

## Involvement in Organizations With Relevant Policy Positions

8. Do you work for or are you a member of an organization with a stated position related to the topic of these guidelines, e.g., position statement, editorial, blog, amicus brief, or legislature or legal testimony?

☐ No: X

☐ Yes, as described below:

Column 1 Name the organization.

Column 2 Describe or reference any policy position of the organization that is related to the topic of these guidelines.

Column 3 Describe your role at the organization, including your involvement in deciding, promoting, or implementing relevant positions.

Add rows as needed for each organization.

Organization	Relevant Policy Position	Your Role

<i>Organization</i>	<i>Relevant Policy Position</i>	<i>Your Role</i>

## Clinical Practice

9. Do you see patients clinically?

☐ No

☐ Yes:

If yes, what is your primary specialty or subspecialty?

Primary specialty: Internal Medicine

Subspecialty: Hematology

If yes, do you prescribe or otherwise recommend clinical interventions (e.g., screening or diagnostic tests, evaluations, treatments, procedures) that may be addressed by these guidelines?

☐ No

☐ Yes: X

If yes, please explain:

In my job, frequently I have to prescribe specific coagulation test, to confirm diagnosis and to evaluate the effectiveness of different treatment options. These activities are done on my clinical practice related with internal medicine and Hematology.

## Expected Interests

10. Do you expect new financial or nonfinancial interests relevant to the topic of these guidelines not already declared in this form?

☐ No: X

☐ Yes

If yes, please describe:

## Part D. New Declarations (ASH Internal Use)

<i>Company</i>	<i>Description</i>	<i>Disclosure Date</i>	<i>ASH Internal Notes</i>
Tecnofarma	Consulting, April 2020	June 29, 2020	<b>Indirect COI.</b> Tecnofarma markets products to treat thrombocytopenia, that could be indirectly affected by these guidelines.
Novartis	Consulting, April 2020	June 29, 2020	<b>Not a COI.</b> Novartis is not an affected company.



## Part E. Summary (ASH Internal Use)

Name of guideline panel(s)	ASH Guidelines on Venous Thromboembolism for Latin America
----------------------------	--

### Summary of ASH Judgments About Financial Conflicts

<i>Reviewer name and date</i>	<i>Direct Financial Conflicts?</i>	<i>Indirect Financial Conflicts?</i>	<i>Management Notes</i>
Alexander, 2/5/18	No	No	<p>Dr. Basantes does not have any financial conflicts of interest. As a condition of his appointment, Dr. Basantes agrees to avoid any direct financial conflicts of interest for the duration of the guideline development process.</p> <p>In consideration of regional economic factors in Latin America, the conflict of interest policy for this panel allows for direct payments from affected companies to panelists for travel to attend educational meetings only.</p>
Castano, 06/30/2020	No	Yes	<p>Dr. Basantes disclosed two new activities on June 29, 2020. One activity with Novartis is not a conflict because Novartis is not an affected company. However, one activity with Tecnofarma is an indirect financial conflict. Please see part D.</p> <p>On June 30, 2020 Dr. Basantes confirmed all information on this form.</p>
Castano, 4/8/2021	No	Yes	<p>On March 16, 2021 Dr. Basantes confirmed all information on this form.</p>

### Summary of Direct Financial Conflicts

<i>Company</i>	<i>Description</i>	<i>Disclosure Date</i>	<i>ASH Notes</i>

## Other Notes

In consideration of regional economic factors in Latin America, ASH has adjusted the conflict of interest policy for this panel to allow direct payment from affected companies to panelists for travel to attend educational meetings only.



# ASH Guideline Panel Declaration of Interests Form

## Part A. Direct Financial Interests in or Relationships With Companies

### Employment

1. Are you currently or in the past 24 months have you been an employee of any for-profit company that develops, produces, markets, or distributes drugs, devices, services, or therapies used to diagnose, treat, monitor, manage, or alleviate health conditions?

☒ No

☐ Yes, as described below:

Add rows as needed for each employment relationship.

Company	Description	End Date	For ASH Internal Use

### Equity

2. Do you currently or in the past 24 months have you had equity in any for-profit company that develops, produces, markets, or distributes drugs, devices, services, or therapies used to diagnose, treat, monitor, manage, or alleviate health conditions? Equity includes stock, stock options, and other ownership interests but excludes diversified mutual fund shares.

☒ No

☐ Yes, as described below:

Add rows as needed for each equity interest.

<i>Company</i>	<i>Description</i>	<i>Date Divested</i>	<i>For ASH Internal Use</i>

## Patents, Royalties, and Other Intellectual Property

3. Do you currently or in the past 24 months have you owned patents for or received royalties from any intellectual property or product used to diagnose, treat, monitor, manage, or alleviate health conditions?

☒ No

☐ Yes, as described below:

Add rows as needed for each patent or royalty interest.

<i>Company</i>	<i>Description</i>	<i>Date Divested</i>	<i>For ASH Internal Use</i>

## Personal Income or Other Direct Transfers of Value

4. Do you currently or in the past 24 months have you received any personal income or other direct transfers of value (e.g., honoraria, gifts, travel support, meeting registration, meals) from any for-profit company that develops, produces, markets, or distributes drugs, devices, services, or therapies used to diagnose, treat, monitor, manage, or alleviate health conditions?

☐ No

☒ Yes, as described below:

Column 1 Name the company.

Column 2 Describe the activity for which you received the income or other transfer of value, e.g., research, consultancy, speakers bureau involvement, service on an advisory committee or board, expert testimony.

Column 3 Indicate when the activity ended, if applicable. (If the activity has not yet ended, indicate “current” or “ongoing.”)

Add rows as needed for each activity.

<i>Company</i>	<i>Description</i>	<i>End Date</i>	<i>For ASH Internal Use</i>
Bristol Myers Squibb	Travel support	July 2015	Ended before appointment.
Bayer	advisory board	May 3, 2016	Ended before appointment.
Bayer	Travel support	July 2017	Ended before appointment.

## My Partner’s or Spouse’s Interests

5. Currently or in the past 24 months has *your partner or spouse* had any of the interests or relationships described in questions 1-4?

☒ No

☐ Yes, as described below:

Add rows as needed for each interest.

<i>Company</i>	<i>Description</i>	<i>End Date</i>	<i>For ASH Internal Use</i>

# Part B. Indirect Financial Interests in or Relationships With Companies

## Industry-Funded Institutional Research

1. Through your institution, do you currently or in the past 24 months have you been involved in research funded or supported (e.g., in kind support, such as provision of a study drug) by any for-profit company that develops, produces, markets, or distributes drugs, devices, services, or therapies used to diagnose, treat, monitor, manage, or alleviate health conditions?

☐ No

☒ Yes, as described below:

Column 1 Name the company funding or supporting the research.

Column 2 Briefly describe the research project.

Column 3 Describe your role: (a) national or overall principal investigator, (b) member of a steering committee of a study that does not have a principal investigator, (c) site or local investigator. If other than these options, please describe.

Column 4 Indicate when your involvement ended, if applicable. (If your involvement has not yet ended, indicate “current” or “ongoing.”)

Add rows as needed for each research project.

Company	Description of Research	My Role	End Date	For ASH Internal Use
Janssen	Mariner Study: RCT to assess the efficacy and safety of rivaroxaban, compared with placebo, in the prevention of symptomatic VTE and VTE-related death post hospital discharge in high-risk, medically ill patients.	PI	ongoing	<b>Indirect COI.</b> Janssen markets rivaroxaban, which is used to treat VTE and the subject of the research is relevant to VTE. Dr. Casais has a leadership role, however all funding goes to her institution.

<i>Company</i>	<i>Description of Research</i>	<i>My Role</i>	<i>End Date</i>	<i>For ASH Internal Use</i>

## Paid and Volunteer Activities for Organizations Supported by Industry

2. Do you currently or in the past 24 months have you been involved in any volunteer or paid work for an organization that is wholly or partially funded by any for-profit company that develops, produces, markets, or distributes drugs, devices, services, or therapies used to diagnose, treat, monitor, manage, or alleviate health conditions?

☒ No

☐ Yes, as described below:

Column 1 Name the organization. If known to you, describe any industry funding or support.

Column 2 Briefly describe your activity and role, e.g., employment, service on board of directors, other volunteer services.

Column 3 Indicate if your activity was paid or volunteered.

Column 4 Indicate when your involvement with the organization ended. (If your involvement has not yet ended, indicate "current" or "ongoing.")

Add rows as needed for each organization.

<i>Organization</i>	<i>Description and role</i>	<i>Paid or Unpaid?</i>	<i>End Date</i>	<i>For ASH Internal Use</i>

## Other

3. Do you have other indirect interests in or relationships with any for-profit company that develops, produces, markets, or distributes drugs, devices, services, or therapies used to diagnose, treat, monitor, manage, or alleviate health conditions?

☒ No

☐ Yes

If yes, please explain:

## Part C. Relevant Other Interests That Are Not Mainly Financial

You have been invited by ASH to participate in the development of clinical practice guidelines on the following topic(s):

ASH Guidelines on Venous Thromboembolism for Latin America

The questions that follow are designed to elicit information about personal beliefs, intellectual positions or opinions, institutional relationships, and other interests that are not mainly financial and that may be relevant to guidelines on the above topic(s).

### Personal Beliefs

1. Do you have strongly held beliefs related to the topic of these guidelines?

☒ No

☐ Yes

If yes, please explain:

### Previously Published Opinions

2. Have you ever authored, coauthored, or publicly provided an opinion related to the topic of these guidelines, e.g., a clinical practice guideline, textbook, review article, meeting poster or presentation, grand rounds talk, letter to the editor?

☐ No

☒ Yes

If yes, what were those views and where were they made?

I am a co-author of the VTE guidelines published by the Argentine Cooperative Group on Hemostasis and Thrombosis (CAHT Group) in 2014. The chapter I authored was "Epidemiology and risk factors for VTE".



As chair of the *World Thrombosis Day* task force of the CAHT Group I have held press conferences and other meetings with media, public and medical professionals to increase awareness of VTE, according to the directives provided by the International Society on Thrombosis and Haemostasis on the subject.

## Non-Industry Supported Research

3. Currently or in the past 24 months, have you been involved in a leadership role in any research project not already reported under Part B, Question 1, relevant to the topic of these guidelines, e.g., a research project funded by a nonprofit or governmental organization?

☒ No

☐ Yes, as described below:

Column 1 Name the entity funding the research.

Column 2 Describe the research project.

Column 3 Describe your role: (a) national or overall principal investigator, (b) member of a steering committee of a study that does not have a principal investigator, (c) site or local investigator. If other than these options, please describe.

Column 4 Indicate when your involvement ended, if applicable. (If your involvement has not yet ended, indicate "current" or "ongoing.")

Add rows as needed for each research project.

<i>Funder</i>	<i>Description of Research</i>	<i>My Role</i>	<i>End Date</i>

## Institutional Relationships

4. Could your salary be affected by recommendations on this topic?

☐ Don't know

☒ No

☐ Yes

If yes, please explain:

5. Do you generate revenues for your institution or employer by clinical activity, teaching, speaking, consulting, testifying, writing, or otherwise sharing your knowledge or opinions about this guideline topic?

☐ Don't know

☒ No

☐ Yes

If yes, please explain:

6. Could your institution benefit or be harmed by recommendations of guidelines on this topic?

☐ Don't know

☒ No

☐ Yes

If yes, please explain:

## Career Advancement

7. How would you characterize the support you would receive from your primary mentor, institution, or other entities if your work on this panel or authorship of these guidelines generated a strong reaction from peers outside your institution?

I anticipate complete support and encouragement from my institution.

## Involvement in Organizations With Relevant Policy Positions

8. Do you work for or are you a member of an organization with a stated position related to the topic of these guidelines, e.g., position statement, editorial, blog, amicus brief, or legislature or legal testimony?

☒ No

☐ Yes, as described below:

Column 1 Name the organization.

Column 2 Describe or reference any policy position of the organization that is related to the topic of these guidelines.

Column 3 Describe your role at the organization, including your involvement in deciding, promoting, or implementing relevant positions.

Add rows as needed for each organization.

<i>Organization</i>	<i>Relevant Policy Position</i>	<i>Your Role</i>

## Clinical Practice

9. Do you see patients clinically?

☐ No

☒ Yes

If yes, what is your primary specialty or subspecialty?

I am a hematologist, specialized in Thrombosis and Hemostasis.

If yes, do you prescribe or otherwise recommend clinical interventions (e.g., screening or diagnostic tests, evaluations, treatments, procedures) that may be addressed by these guidelines?

☐ No

☒ Yes

If yes, please explain:

I request diagnostic tests in patients with clinical symptoms and/or personal or family history of VTE, and prescribe anti-thrombotic drugs when necessary for anticoagulation and/or prophylaxis as required by personal or family history or surgical procedure, etc.

## Expected Interests

10. Do you expect new financial or nonfinancial interests relevant to the topic of these guidelines not already declared in this form?

☒ No

☐ Yes

If yes, please describe:

## Part D. New Declarations (ASH Internal Use)

<i>Company</i>	<i>Description</i>	<i>Disclosure Date</i>	<i>ASH Internal Notes</i>
Janssen	Ended. PI for Mariner Study: RCT to assess the efficacy and safety of rivaroxaban, compared with placebo, in the prevention of symptomatic VTE and VTE-related death post hospital discharge in high-risk, medically ill	9/27/2019	No longer an indirect COI.
Bayer	Travel support to attend ASH 2018	10/23/2019	Not a COI
Genzyme	Travel support to attend ASH 2018	10/23/2019	Not a COI
Sanofi	Travel support to attend The 8th International Symposium on Women Health Issues in Thrombosis and Haemostasis, March 2019	10/23/2019	Not a COI
N/A	Member of the ISTH Guidance and Guidelines Committee for the 2018 – 2020 term. Co-Chair, ISTH Sub-committee on Women's Health Issues in Thrombosis and Haemostasis since 2017.	10/23/2019	N/A

N/A	Ended term as representative of the Latin American Hemostasis and Thrombosis Group (CLAHT Group) on the guideline panel, October 2019. Was replaced by Cecilia Guillermo.	10/23/2019	N/A
N/A	Member of the Journal of Thrombosis and Haemostasis (JTH) Editorial Board starting January 2021	3/05/2021	N/A
N/A	Renewed as a member of the ISTH Guidance and Guidelines.	3/05/2021	N/A

## Part E. Summary (ASH Internal Use)

Name of guideline panel(s)	ASH Guidelines on Venous Thromboembolism for Latin America
----------------------------	--

### Summary of ASH Judgments About Financial Conflicts

<i>Reviewer name and date</i>	<i>Direct Financial Conflicts?</i>	<i>Indirect Financial Conflicts?</i>	<i>Management Notes</i>
Alexander, 8/18/17	No	Yes	Dr. Casais has no current direct financial conflicts of interest. She previously received direct payment from Bayer for advisory board participation but has agreed to avoid any direct financial conflicts of interest for the duration of the guideline development period as a condition of her appointment. She has one indirect conflict of interest – serving as PI for the Mariner study, however all funding goes to her institution.
Castano, 9/27/2019	No	No	Dr. Casais research relationship with Janssen ended, see parts B and D.
Castano, 06/29/2020	No	No	On June 29, 2020 Dr. Casais confirmed all information on this form.
Castano, 4/08/2021	No	No	On March 5, 2021 Dr. Casais updated (see part D for updates) and confirmed all information on this form.

### Summary of Direct Financial Conflicts

<i>Company</i>	<i>Description</i>	<i>Disclosure Date</i>	<i>ASH Notes</i>

## Other Notes

In consideration of regional economic factors in Latin America, ASH has adjusted the conflict of interest policy for this panel to allow direct payment from affected companies to panelists for travel to attend educational meetings only.



# ASH Guideline Panel Declaration of Interests Form

## Part A. Direct Financial Interests in or Relationships With Companies

### Employment

1. Are you currently or in the past 24 months have you been an employee of any for-profit company that develops, produces, markets, or distributes drugs, devices, services, or therapies used to diagnose, treat, monitor, manage, or alleviate health conditions?

☒ No

☐ Yes, as described below:

Add rows as needed for each employment relationship.

<i>Company</i>	<i>Description</i>	<i>End Date</i>	<i>For ASH Internal Use</i>

### Equity

2. Do you currently or in the past 24 months have you had equity in any for-profit company that develops, produces, markets, or distributes drugs, devices, services, or therapies used to diagnose, treat, monitor, manage, or alleviate health conditions? Equity includes stock, stock options, and other ownership interests but excludes diversified mutual fund shares.

☒ No

☐ Yes, as described below:

Add rows as needed for each equity interest.



<i>Company</i>	<i>Description</i>	<i>Date Divested</i>	<i>For ASH Internal Use</i>

## Patents, Royalties, and Other Intellectual Property

3. Do you currently or in the past 24 months have you owned patents for or received royalties from any intellectual property or product used to diagnose, treat, monitor, manage, or alleviate health conditions?

☒ No

☐ Yes, as described below:

Add rows as needed for each patent or royalty interest.

<i>Company</i>	<i>Description</i>	<i>Date Divested</i>	<i>For ASH Internal Use</i>

## Personal Income or Other Direct Transfers of Value

4. Do you currently or in the past 24 months have you received any personal income or other direct transfers of value (e.g., honoraria, gifts, travel support, meeting registration, meals) from any for-profit company that develops, produces, markets, or distributes drugs, devices, services, or therapies used to diagnose, treat, monitor, manage, or alleviate health conditions?

☐ No

☒ Yes, as described below:

Column 1 Name the company.

Column 2 Describe the activity for which you received the income or other transfer of value, e.g., research, consultancy, speakers bureau involvement, service on an advisory committee or board, expert testimony.

Column 3 Indicate when the activity ended, if applicable. (If the activity has not yet ended, indicate “current” or “ongoing.”)

Add rows as needed for each activity.

<i>Company</i>	<i>Description</i>	<i>End Date</i>	<i>For ASH Internal Use</i>
Boehringer	Complete grant to attend EHA Congress	25 <sup>th</sup> June 2017	Ended before appointment.

### My Partner’s or Spouse’s Interests

5. Currently or in the past 24 months has *your partner or spouse* had any of the interests or relationships described in questions 1-4?

☒ No

☐ Yes, as described below:

Add rows as needed for each interest.

<i>Company</i>	<i>Description</i>	<i>End Date</i>	<i>For ASH Internal Use</i>

## Part B. Indirect Financial Interests in or Relationships With Companies

### Industry-Funded Institutional Research

1. Through your institution, do you currently or in the past 24 months have you been involved in research funded or supported (e.g., in kind support, such as provision of a study drug) by any for-profit company that develops, produces, markets, or distributes drugs, devices, services, or therapies used to diagnose, treat, monitor, manage, or alleviate health conditions?

☒ No

☐ Yes, as described below:

Column 1 Name the company funding or supporting the research.

Column 2 Briefly describe the research project.

Column 3 Describe your role: (a) national or overall principal investigator, (b) member of a steering committee of a study that does not have a principal investigator, (c) site or local investigator. If other than these options, please describe.

Column 4 Indicate when your involvement ended, if applicable. (If your involvement has not yet ended, indicate “current” or “ongoing.”)

Add rows as needed for each research project.

<i>Company</i>	<i>Description of Research</i>	<i>My Role</i>	<i>End Date</i>	<i>For ASH Internal Use</i>

### Paid and Volunteer Activities for Organizations Supported by Industry

2. Do you currently or in the past 24 months have you been involved in any volunteer or paid work for an organization that is wholly or partially funded by any for-profit company that develops, produces,

markets, or distributes drugs, devices, services, or therapies used to diagnose, treat, monitor, manage, or alleviate health conditions?

☒ No

☐ Yes, as described below:

Column 1 Name the organization. If known to you, describe any industry funding or support.

Column 2 Briefly describe your activity and role, e.g., employment, service on board of directors, other volunteer services.

Column 3 Indicate if your activity was paid or volunteered.

Column 4 Indicate when your involvement with the organization ended. (If your involvement has not yet ended, indicate “current” or “ongoing.”)

Add rows as needed for each organization.

Organization	Description and role	Paid or Unpaid?	End Date	For ASH Internal Use

## Other

3. Do you have other indirect interests in or relationships with any for-profit company that develops, produces, markets, or distributes drugs, devices, services, or therapies used to diagnose, treat, monitor, manage, or alleviate health conditions?

☒ No

☐ Yes

If yes, please explain:

## Part C. Relevant Other Interests That Are Not Mainly Financial

You have been invited by ASH to participate in the development of clinical practice guidelines on the following topic(s):

ASH Guidelines on Venous Thromboembolism for Latin America

The questions that follow are designed to elicit information about personal beliefs, intellectual positions or opinions, institutional relationships, and other interests that are not mainly financial and that may be relevant to guidelines on the above topic(s).

### Personal Beliefs

1. Do you have strongly held beliefs related to the topic of these guidelines?

☒ No

☐ Yes

If yes, please explain:

### Previously Published Opinions

2. Have you ever authored, coauthored, or publicly provided an opinion related to the topic of these guidelines, e.g., a clinical practice guideline, textbook, review article, meeting poster or presentation, grand rounds talk, letter to the editor?

☐ No

☒ Yes

If yes, what were those views and where were they made?

I was Editor in Chief of the "Venous Thromboembolism Guidelines", published in 2014, from the Cooperative Group of Thrombosis and Hemostasis (CAHT Group), in Argentina.

### Non-Industry Supported Research

3. Currently or in the past 24 months, have you been involved in a leadership role in any research project not already reported under Part B, Question 1, relevant to the topic of these guidelines, e.g., a research project funded by a nonprofit or governmental organization?

☒ No

☐ Yes, as described below:

Column 1 Name the entity funding the research.

Column 2 Describe the research project.

Column 3 Describe your role: (a) national or overall principal investigator, (b) member of a steering committee of a study that does not have a principal investigator, (c) site or local investigator. If other than these options, please describe.

Column 4 Indicate when your involvement ended, if applicable. (If your involvement has not yet ended, indicate "current" or "ongoing.")

Add rows as needed for each research project.

<i>Funder</i>	<i>Description of Research</i>	<i>My Role</i>	<i>End Date</i>

## Institutional Relationships

4. Could your salary be affected by recommendations on this topic?

☐ Don't know

☒ No

☐ Yes

If yes, please explain:

5. Do you generate revenues for your institution or employer by clinical activity, teaching, speaking, consulting, testifying, writing, or otherwise sharing your knowledge or opinions about this guideline topic?

☒ Don't know

☐ No

☐ Yes

If yes, please explain:

6. Could your institution benefit or be harmed by recommendations of guidelines on this topic?

☐ Don't know

☐ No

☒ Yes

If yes, please explain:

I think that my institution would benefit through novel guidelines, who updates the subjects and recommends standards of care.

## Career Advancement

7. How would you characterize the support you would receive from your primary mentor, institution, or other entities if your work on this panel or authorship of these guidelines generated a strong reaction from peers outside your institution?

I don't think so, because, as the Coordinator of the Cientific Committee, I became selected as precandidate for this panel by the Argentinian Society of Hematology.

## Involvement in Organizations With Relevant Policy Positions

8. Do you work for or are you a member of an organization with a stated position related to the topic of these guidelines, e.g., position statement, editorial, blog, amicus brief, or legislature or legal testimony?

☒ No

☐ Yes, as described below:

Column 1 Name the organization.

Column 2 Describe or reference any policy position of the organization that is related to the topic of these guidelines.

Column 3 Describe your role at the organization, including your involvement in deciding, promoting, or implementing relevant positions.

Add rows as needed for each organization.

Organization	Relevant Policy Position	Your Role

## Clinical Practice

9. Do you see patients clinically?

☐ No

☒ Yes

If yes, what is your primary specialty or subspecialty?

Thrombosis and Hemostasis

If yes, do you prescribe or otherwise recommend clinical interventions (e.g., screening or diagnostic tests, evaluations, treatments, procedures) that may be addressed by these guidelines?

☐ No

☒ Yes

If yes, please explain:

I usually prescribe or recommend diagnostic studies, and different therapies, related to venous thromboembolism.

## Expected Interests

10. Do you expect new financial or nonfinancial interests relevant to the topic of these guidelines not already declared in this form?

☒ No

☐ Yes

If yes, please describe:



# Part D. New Declarations (ASH Internal Use)

<i>Company</i>	<i>Description</i>	<i>Disclosure Date</i>	<i>ASH Internal Notes</i>

## Part E. Summary (ASH Internal Use)

Name of guideline panel(s)	ASH Guidelines on Venous Thromboembolism for Latin America
----------------------------	--

### Summary of ASH Judgments About Financial Conflicts

<i>Reviewer name and date</i>	<i>Direct Financial Conflicts?</i>	<i>Indirect Financial Conflicts?</i>	<i>Management Notes</i>
Alexander, 8/18/17	No	No	Dr. Colorio has no current direct or indirect conflicts of interest. She has agreed to avoid any direct financial conflicts of interest for the duration of the guideline development period as a condition of her appointment.
Castano, 6/19/2020	No	No	On June 19, 2020 Dr. Colorio confirmed all information on this form.
Castano, 4/7/2021	No	No	On March 19, 2021 Dr. Colorio reviewed and confirmed all information on this form.

### Summary of Direct Financial Conflicts

<i>Company</i>	<i>Description</i>	<i>Disclosure Date</i>	<i>ASH Notes</i>

### Other Notes

In consideration of regional economic factors in Latin America, ASH has adjusted the conflict of interest policy for this panel to allow direct payment from affected companies to panelists for travel to attend educational meetings only.



# ASH Guideline Panel Declaration of Interests Form

## Part A. Direct Financial Interests in or Relationships With Companies

### Employment

- Are you currently or in the past 24 months have you been an employee of any for-profit company that develops, produces, markets, or distributes drugs, devices, services, or therapies used to diagnose, treat, monitor, manage, or alleviate health conditions?

☒ No

☐ Yes, as described below:

Add rows as needed for each employment relationship.

Company	Description	End Date	For ASH Internal Use

### Equity

- Do you currently or in the past 24 months have you had equity in any for-profit company that develops, produces, markets, or distributes drugs, devices, services, or therapies used to diagnose, treat, monitor, manage, or alleviate health conditions? Equity includes stock, stock options, and other ownership interests but excludes diversified mutual fund shares.

☒ No

☐ Yes, as described below:

Add rows as needed for each equity interest.

<i>Company</i>	<i>Description</i>	<i>Date Divested</i>	<i>For ASH Internal Use</i>

## Patents, Royalties, and Other Intellectual Property

3. Do you currently or in the past 24 months have you owned patents for or received royalties from any intellectual property or product used to diagnose, treat, monitor, manage, or alleviate health conditions?

☒ No

☐ Yes, as described below:

Add rows as needed for each patent or royalty interest.

<i>Company</i>	<i>Description</i>	<i>Date Divested</i>	<i>For ASH Internal Use</i>

## Personal Income or Other Direct Transfers of Value

4. Do you currently or in the past 24 months have you received any personal income or other direct transfers of value (e.g., honoraria, gifts, travel support, meeting registration, meals) from any for-profit company that develops, produces, markets, or distributes drugs, devices, services, or therapies used to diagnose, treat, monitor, manage, or alleviate health conditions?

☐ No

☒ Yes, as described below:

Column 1 Name the company.

Column 2 Describe the activity for which you received the income or other transfer of value, e.g., research, consultancy, speakers bureau involvement, service on an advisory committee or board, expert testimony.

Column 3 Indicate when the activity ended, if applicable. (If the activity has not yet ended, indicate “current” or “ongoing.”)

Add rows as needed for each activity.

<i>Company</i>	<i>Description</i>	<i>End Date</i>	<i>For ASH Internal Use</i>
GENZYME	FEES FOR SPEAKER ABOUT IMIGLUCERASA	CURRENT	Not an affected company.
PHARMARIS PERU	FEES FOR SPEAKER ABOUT TIMOGLOBULINA	CURRENT	Not an affected company.
OMPHARMA	FEES FOR SPEAKER ABOUT FERINJECT	JULY,2016	Not an affected company.
FARMADUAL	FEES FOR SPEAKER ABOUT HEMOPHILIA	OCTOBER,2016	Ended before appointment.

### My Partner’s or Spouse’s Interests

5. Currently or in the past 24 months has *your partner or spouse* had any of the interests or relationships described in questions 1-4?

☒ No

☐ Yes, as described below:

Add rows as needed for each interest.

<i>Company</i>	<i>Description</i>	<i>End Date</i>	<i>For ASH Internal Use</i>

# Part B. Indirect Financial Interests in or Relationships With Companies

## Industry-Funded Institutional Research

1. Through your institution, do you currently or in the past 24 months have you been involved in research funded or supported (e.g., in kind support, such as provision of a study drug) by any for-profit company that develops, produces, markets, or distributes drugs, devices, services, or therapies used to diagnose, treat, monitor, manage, or alleviate health conditions?

- ☒ No
- ☐ Yes, as described below:

- Column 1    Name the company funding or supporting the research.
- Column 2    Briefly describe the research project.
- Column 3    Describe your role: (a) national or overall principal investigator, (b) member of a steering committee of a study that does not have a principal investigator, (c) site or local investigator. If other than these options, please describe.
- Column 4    Indicate when your involvement ended, if applicable. (If your involvement has not yet ended, indicate “current” or “ongoing.”)

Add rows as needed for each research project.

Company	Description of Research	My Role	End Date	For ASH Internal Use

## Paid and Volunteer Activities for Organizations Supported by Industry

2. Do you currently or in the past 24 months have you been involved in any volunteer or paid work for an organization that is wholly or partially funded by any for-profit company that develops, produces,

markets, or distributes drugs, devices, services, or therapies used to diagnose, treat, monitor, manage, or alleviate health conditions?

☒ No

☐ Yes, as described below:

Column 1 Name the organization. If known to you, describe any industry funding or support.

Column 2 Briefly describe your activity and role, e.g., employment, service on board of directors, other volunteer services.

Column 3 Indicate if your activity was paid or volunteered.

Column 4 Indicate when your involvement with the organization ended. (If your involvement has not yet ended, indicate "current" or "ongoing.")

Add rows as needed for each organization.

<i>Organization</i>	<i>Description and role</i>	<i>Paid or Unpaid?</i>	<i>End Date</i>	<i>For ASH Internal Use</i>

## Other

3. Do you have other indirect interests in or relationships with any for-profit company that develops, produces, markets, or distributes drugs, devices, services, or therapies used to diagnose, treat, monitor, manage, or alleviate health conditions?

☐ No

☒ Yes

If yes, please explain:

I am speaker of several companies: GENZYME, FARMADUAL, OMPHARMA, PHARMARIS PERU. I receive fees for it.

## Part C. Relevant Other Interests That Are Not Mainly Financial

You have been invited by ASH to participate in the development of clinical practice guidelines on the following topic(s):

ASH Guidelines on Venous Thromboembolism for Latin America

The questions that follow are designed to elicit information about personal beliefs, intellectual positions or opinions, institutional relationships, and other interests that are not mainly financial and that may be relevant to guidelines on the above topic(s).

### Personal Beliefs

1. Do you have strongly held beliefs related to the topic of these guidelines?

☐ No

☒ Yes

If yes, please explain: I think they are very important topics and that deserves consensus on what refers to the diagnosis and management of thrombosis

### Previously Published Opinions

2. Have you ever authored, coauthored, or publicly provided an opinion related to the topic of these guidelines, e.g., a clinical practice guideline, textbook, review article, meeting poster or presentation, grand rounds talk, letter to the editor?

☐ No

☒ Yes

If yes, what were those views and where were they made?

I am author of systematic review: García P, Ruiz W, Loza Munarriz C. Warfarin initiation nomograms for thromboembolism. Cochrane Database of Systematic Reviews 2013, Issue 7. Art. No. CD007699. DOI: 10.1002/14651858.CD007699.pub2

I am author of chapter of book: Pedro Pablo García Lázaro, Gladys Patricia Cannata Arriola, Gloria Soledad Cotrina Romero, Pedro Arauco Nava. Chapter 3: Venous thromboembolism in neonates, children and patients



with chronic renal disease-special considerations in: Abdelaal M. Pathophysiology and clinical aspects of venous thromboembolism in neonates, renal disease and cancer patients. 16 de mayo del 2012. Available in: [www.intechopen.com](http://www.intechopen.com)

## Non-Industry Supported Research

3. Currently or in the past 24 months, have you been involved in a leadership role in any research project not already reported under Part B, Question 1, relevant to the topic of these guidelines, e.g., a research project funded by a nonprofit or governmental organization?

☒ No

☐ Yes, as described below:

Column 1 Name the entity funding the research.

Column 2 Describe the research project.

Column 3 Describe your role: (a) national or overall principal investigator, (b) member of a steering committee of a study that does not have a principal investigator, (c) site or local investigator. If other than these options, please describe.

Column 4 Indicate when your involvement ended, if applicable. (If your involvement has not yet ended, indicate "current" or "ongoing.")

Add rows as needed for each research project.

<i>Funder</i>	<i>Description of Research</i>	<i>My Role</i>	<i>End Date</i>

## Institutional Relationships

4. Could your salary be affected by recommendations on this topic?

☐ Don't know

☒ No

☐ Yes

If yes, please explain:

5. Do you generate revenues for your institution or employer by clinical activity, teaching, speaking, consulting, testifying, writing, or otherwise sharing your knowledge or opinions about this guideline topic?

☐ Don't know

☒ No

☐ Yes

If yes, please explain:

6. Could your institution benefit or be harmed by recommendations of guidelines on this topic?

☐ Don't know

☒ No

☐ Yes

If yes, please explain:

## Career Advancement

7. How would you characterize the support you would receive from your primary mentor, institution, or other entities if your work on this panel or authorship of these guidelines generated a strong reaction from peers outside your institution?

I hope that my hospital will give me the facilities to participate on this panel.

## Involvement in Organizations With Relevant Policy Positions

8. Do you work for or are you a member of an organization with a stated position related to the topic of these guidelines, e.g., position statement, editorial, blog, amicus brief, or legislature or legal testimony?

☒ No

☐ Yes, as described below:

Column 1 Name the organization.

Column 2 Describe or reference any policy position of the organization that is related to the topic of these guidelines.

Column 3 Describe your role at the organization, including your involvement in deciding, promoting, or implementing relevant positions.

Add rows as needed for each organization.

<i>Organization</i>	<i>Relevant Policy Position</i>	<i>Your Role</i>

## Clinical Practice

9. Do you see patients clinically?

☐ No

☒ Yes

If yes, what is your primary specialty or subspecialty?

General hematologist

If yes, do you prescribe or otherwise recommend clinical interventions (e.g., screening or diagnostic tests, evaluations, treatments, procedures) that may be addressed by these guidelines?

☐ No

☒ Yes

If yes, please explain:

I recommend diagnostic tests and management of patients, whether children or adults, who need to confirm a diagnosis of thrombosis as well as the corresponding management.

I have now been invited by my fellow cardiologists and cardiovascular surgeons of my hospital, to support the perioperative management of patients with heart surgery, regarding anticoagulation and the use of antiplatelet agents.

## Expected Interests

10. Do you expect new financial or nonfinancial interests relevant to the topic of these guidelines not already declared in this form?

PEDRO GARCIA, MD (HOSPITAL VIRGEN DE LA PUERTA, ESPERANZA-PERU)

☒ No

☐ Yes

If yes, please describe:

## Part D. New Declarations (ASH Internal Use)

<i>Company</i>	<i>Description</i>	<i>Disclosure Date</i>	<i>ASH Internal Notes</i>
Roemmers	Meeting support to attend Highlights of ASH, 2019 in Lima, Peru	Mach 29, 2019	Not a COI
Novo Nordisk	Meeting support to attend the 2019 CLAHT Congress in Costa Rica.	September 19, 2019	Not a COI
N/A	New affiliation at Hospital Especializado Víctor Lazarte Echegaray in Trujillo, Peru. Dr. Garcia is no longer at Hospital Virgen de La Puerta in Esperanza, Peru.	September 19, 2019	Not a COI
N/A	Teaching position at Antenor Orrego University, Medical School. On August 19, 2019, Dr. Garcia started a teaching position at the medical school of the Antenor Orrego University in Trujillo, Peru.	September 19, 2019	Not a COI
Novartis	Meeting support: sing up fee for the European Hematology Association, EHA Virtual Congress 2020	June 29, 2020	Not a COI
Novo Nordisk	Educational talks about recombinant factor VII	November 4, 2020	Not a COI
Ompharma	Update, Dr. Garcia has advised that this activity is ongoing, see page 3.	March 19, 2021	Not a COI

PEDRO GARCIA, MD (HOSPITAL VIRGEN DE LA PUERTA, ESPERANZA-PERU)

<i>Company</i>	<i>Description</i>	<i>Disclosure Date</i>	<i>ASH Internal Notes</i>
Farmadual	Update, Dr. Garcia has advised that this activity is ongoing, see page 3.	March 19, 2021	Not a COI
Novartis	Sign up fees to attend virtual educational meeting on Aplastic Anemia, December 2020	March 19, 2021	Not a COI
Tecnofarma	Sign up fees to attend virtual educational meeting on Gaucher disease management, February 2021	March 19, 2021	Not a COI
Takeda	Sign up fees to attend virtual EAHAD Congress, February 2021	March 19, 2021	Not a COI

## Part E. Summary (ASH Internal Use)

Name of guideline panel(s)	ASH Guidelines on Venous Thromboembolism for Latin America
----------------------------	--

### Summary of ASH Judgments About Financial Conflicts

<i>Reviewer name and date</i>	<i>Direct Financial Conflicts?</i>	<i>Indirect Financial Conflicts?</i>	<i>Management Notes</i>
Alexander, 8/22/2017	No	No	Dr. Garcia has no current direct or indirect financial conflicts of interest. He has previously received direct payment for speaking from Farmadual, which represents Octapharma in Peru. Octapharma markets Octaplex, a warfarin reversal agent. By email, he agreed to avoid this interest for the duration of the guideline development period. He has agreed to avoid all direct financial conflicts of interest for the duration of the guideline development period, as a condition of his appointment.
Castano, 9/20/2019	No	No	<p>Dr. Garcia received meeting support from Roemmers, a company that does not market any VTE products, to attend the Highlights of ASH meetings that took place in Lima, Peru, in April 2019.</p> <p>He received meeting support from Novo Nordisk a company that makes a product that can be affected by the guideline to attend the CLAHT Congress in Costa Rica, in October 2019. However, under this panel's membership agreement travel support from pharmaceutical companies to attend medical meetings is allowed.</p> <p>On August 19, 2019, Dr. Garcia started a teaching position at Antenor Orrego University, Medical School and switched hospitals from Hospital Virgen de la Puerta in Esperanza, Peru to Hospital Especializado Víctor Lazarte Echegaray in Trujillo Peru.</p>
Castano, 6/29/2020	No	No	Dr. Garcia disclosed meeting support to attend a virtual EHA meeting, please see part D. On June

PEDRO GARCIA, MD (HOSPITAL VIRGEN DE LA PUERTA, ESPERANZA-PERU)

			29, 2020 Dr. Garcia confirmed all information on this form.
Castano, 4/7/2021	No	No	On March 19, 2021 Dr. Garcia updated, please see part D, and confirmed all information on this form.

Summary of Direct Financial Conflicts

<i>Company</i>	<i>Description</i>	<i>Disclosure Date</i>	<i>ASH Notes</i>

Other Notes

In consideration of regional economic factors in Latin America, ASH has adjusted the conflict of interest policy for this panel to allow direct payment from affected companies to panelists for travel to attend educational meetings only.





# ASH Guideline Panel Declaration of Interests Form

## Part A. Direct Financial Interests in or Relationships With Companies

### Employment

1. Are you currently or in the past 24 months have you been an employee of any for-profit company that develops, produces, markets, or distributes drugs, devices, services, or therapies used to diagnose, treat, monitor, manage, or alleviate health conditions?

☒ No

☐ Yes, as described below:

Add rows as needed for each employment relationship.

Company	Description	End Date	For ASH Internal Use

### Equity

2. Do you currently or in the past 24 months have you had equity in any for-profit company that develops, produces, markets, or distributes drugs, devices, services, or therapies used to diagnose, treat, monitor, manage, or alleviate health conditions? Equity includes stock, stock options, and other ownership interests but excludes diversified mutual fund shares.

☒ No

☐ Yes, as described below:

Add rows as needed for each equity interest.

<i>Company</i>	<i>Description</i>	<i>Date Divested</i>	<i>For ASH Internal Use</i>

## Patents, Royalties, and Other Intellectual Property

3. Do you currently or in the past 24 months have you owned patents for or received royalties from any intellectual property or product used to diagnose, treat, monitor, manage, or alleviate health conditions?

☒ No

☐ Yes, as described below:

Add rows as needed for each patent or royalty interest.

<i>Company</i>	<i>Description</i>	<i>Date Divested</i>	<i>For ASH Internal Use</i>

## Personal Income or Other Direct Transfers of Value

4. Do you currently or in the past 24 months have you received any personal income or other direct transfers of value (e.g., honoraria, gifts, travel support, meeting registration, meals) from any for-profit company that develops, produces, markets, or distributes drugs, devices, services, or therapies used to diagnose, treat, monitor, manage, or alleviate health conditions?

☐ No

☒ Yes, as described below:

Column 1 Name the company.

Column 2 Describe the activity for which you received the income or other transfer of value, e.g., research, consultancy, speakers bureau involvement, service on an advisory committee or board, expert testimony.

Column 3 Indicate when the activity ended, if applicable. (If the activity has not yet ended, indicate “current” or “ongoing.”)

Add rows as needed for each activity.

<i>Company</i>	<i>Description</i>	<i>End Date</i>	<i>For ASH Internal Use</i>
Roche	travel support, meeting registration (ASH)	December 2016	Ended prior to appointment.
Roche	travel support, meeting registration (EHA)	June 2017	Ended prior to appointment
Werfen	Advisory Committee	August 2015	Ended prior to appointment
Roche	Advisory Board	June 2016	Ended prior to appointment.

## My Partner's or Spouse's Interests

5. Currently or in the past 24 months has *your partner or spouse* had any of the interests or relationships described in questions 1-4?

☒ No

☐ Yes, as described below:

Add rows as needed for each interest.

<i>Company</i>	<i>Description</i>	<i>End Date</i>	<i>For ASH Internal Use</i>

## Part B. Indirect Financial Interests in or Relationships With Companies

### Industry-Funded Institutional Research

1. Through your institution, do you currently or in the past 24 months have you been involved in research funded or supported (e.g., in kind support, such as provision of a study drug) by any for-profit company that develops, produces, markets, or distributes drugs, devices, services, or therapies used to diagnose, treat, monitor, manage, or alleviate health conditions?

☒ No

☐ Yes, as described below:

Column 1 Name the company funding or supporting the research.

Column 2 Briefly describe the research project.

Column 3 Describe your role: (a) national or overall principal investigator, (b) member of a steering committee of a study that does not have a principal investigator, (c) site or local investigator. If other than these options, please describe.

Column 4 Indicate when your involvement ended, if applicable. (If your involvement has not yet ended, indicate “current” or “ongoing.”)

Add rows as needed for each research project.

<i>Company</i>	<i>Description of Research</i>	<i>My Role</i>	<i>End Date</i>	<i>For ASH Internal Use</i>

### Paid and Volunteer Activities for Organizations Supported by Industry

2. Do you currently or in the past 24 months have you been involved in any volunteer or paid work for an organization that is wholly or partially funded by any for-profit company that develops, produces,

markets, or distributes drugs, devices, services, or therapies used to diagnose, treat, monitor, manage, or alleviate health conditions?

☒ No

☐ Yes, as described below:

Column 1 Name the organization. If known to you, describe any industry funding or support.

Column 2 Briefly describe your activity and role, e.g., employment, service on board of directors, other volunteer services.

Column 3 Indicate if your activity was paid or volunteered.

Column 4 Indicate when your involvement with the organization ended. (If your involvement has not yet ended, indicate “current” or “ongoing.”)

Add rows as needed for each organization.

<i>Organization</i>	<i>Description and role</i>	<i>Paid or Unpaid?</i>	<i>End Date</i>	<i>For ASH Internal Use</i>

## Other

3. Do you have other indirect interests in or relationships with any for-profit company that develops, produces, markets, or distributes drugs, devices, services, or therapies used to diagnose, treat, monitor, manage, or alleviate health conditions?

☒ No

☐ Yes

If yes, please explain:

## Part C. Relevant Other Interests That Are Not Mainly Financial

You have been invited by ASH to participate in the development of clinical practice guidelines on the following topic(s):

ASH Guidelines on Venous Thromboembolism for Latin America

The questions that follow are designed to elicit information about personal beliefs, intellectual positions or opinions, institutional relationships, and other interests that are not mainly financial and that may be relevant to guidelines on the above topic(s).

### Personal Beliefs

1. Do you have strongly held beliefs related to the topic of these guidelines?

☒ No

☐ Yes

If yes, please explain:

### Previously Published Opinions

2. Have you ever authored, coauthored, or publicly provided an opinion related to the topic of these guidelines, e.g., a clinical practice guideline, textbook, review article, meeting poster or presentation, grand rounds talk, letter to the editor?

☒ No

☐ Yes

If yes, what were those views and where were they made?

### Non-Industry Supported Research

3. Currently or in the past 24 months, have you been involved in a leadership role in any research project not already reported under Part B, Question 1, relevant to the topic of these guidelines, e.g., a research project funded by a nonprofit or governmental organization?

☒ No

☐ Yes, as described below:

Column 1 Name the entity funding the research.

Column 2 Describe the research project.

Column 3 Describe your role: (a) national or overall principal investigator, (b) member of a steering committee of a study that does not have a principal investigator, (c) site or local investigator. If other than these options, please describe.

Column 4 Indicate when your involvement ended, if applicable. (If your involvement has not yet ended, indicate "current" or "ongoing.")

Add rows as needed for each research project.

<i>Funder</i>	<i>Description of Research</i>	<i>My Role</i>	<i>End Date</i>

## Institutional Relationships

4. Could your salary be affected by recommendations on this topic?

☐ Don't know

☒ No

☐ Yes

If yes, please explain:

5. Do you generate revenues for your institution or employer by clinical activity, teaching, speaking, consulting, testifying, writing, or otherwise sharing your knowledge or opinions about this guideline topic?

☐ Don't know

☒ No

☐ Yes

If yes, please explain:

6. Could your institution benefit or be harmed by recommendations of guidelines on this topic?

☐ Don't know

☒ No

☐ Yes

If yes, please explain:

## Career Advancement

7. How would you characterize the support you would receive from your primary mentor, institution, or other entities if your work on this panel or authorship of these guidelines generated a strong reaction from peers outside your institution?

I think I will have a strong support from my Institution

## Involvement in Organizations With Relevant Policy Positions

8. Do you work for or are you a member of an organization with a stated position related to the topic of these guidelines, e.g., position statement, editorial, blog, amicus brief, or legislature or legal testimony?

☒ No

☐ Yes, as described below:

Column 1 Name the organization.

Column 2 Describe or reference any policy position of the organization that is related to the topic of these guidelines.

Column 3 Describe your role at the organization, including your involvement in deciding, promoting, or implementing relevant positions.

Add rows as needed for each organization.

Organization	Relevant Policy Position	Your Role



## Clinical Practice

9. Do you see patients clinically?

☐ No

☒ Yes

If yes, what is your primary specialty or subspecialty? Hematology

If yes, do you prescribe or otherwise recommend clinical interventions (e.g., screening or diagnostic tests, evaluations, treatments, procedures) that may be addressed by these guidelines?

☐ No

☒ Yes

If yes, please explain: I recommend clinical interventions like screening or diagnostic tests, evaluations, treatments, procedures.

## Expected Interests

10. Do you expect new financial or nonfinancial interests relevant to the topic of these guidelines not already declared in this form?

☒ No

☐ Yes

If yes, please describe:

## Part D. New Declarations (ASH Internal Use)

<i>Company</i>	<i>Description</i>	<i>Disclosure Date</i>	<i>ASH Internal Notes</i>
Stago	Lecture about Coagulation on October 2018. The fee was paid to Dr. Guillermo's institution.	10/26/2019	<b>Indirect COI.</b> Stago is a pharmaceutical company that makes products for the treatment of VTE.
Roche	Travel support to attend ASH annual meeting 2019	10/26/2019	Not a COI.
N/A	Dr. Guillermo began term as representative of the Latin American Hemostasis and Thrombosis Group (CLAHT Group) on the guideline panel, October 2019. Replacing Dr. Casais.	10/26/2019	Not a COI.
Roche	Meeting support: sing up fee for the European Hematology Association, EHA Virtual Congress 2020	06/30/2020	Not a COI.

## Part E. Summary (ASH Internal Use)

Name of guideline panel(s)	ASH Guidelines on Venous Thromboembolism for Latin America
----------------------------	--

### Summary of ASH Judgments About Financial Conflicts

<i>Reviewer name and date</i>	<i>Direct Financial Conflicts?</i>	<i>Indirect Financial Conflicts?</i>	<i>Management Notes</i>
Alexander, 8/18/17	No	No	Dr. Guillermo has no current direct or indirect conflicts of interest. She previously received direct payments from Roche for serving on an advisory board. By email, she agreed to avoid this interest for the duration of the guideline development period. As a condition of her appointment, Dr. Guillermo agreed to avoid any direct financial conflicts of interest for the duration of the guideline development period.
Castano, 11/24/2019	No	Yes	Dr. Guillermo gave a lecture on anticoagulation sponsored by Stago, but the fee was paid to her institution.
Castano, 06/30/2020	No	Yes	Dr. Guillermo disclosed meeting support from Roche to attend an EHA's 2020 virtual meeting, see part D. On July 30, 2020 Dr. Guillermo confirmed all information on this form.
Castano 4/6/2021	No	Yes	On March 7 2021 Dr. Guillermo reviewed this form and confirmed all information.

### Summary of Direct Financial Conflicts

<i>Company</i>	<i>Description</i>	<i>Disclosure Date</i>	<i>ASH Notes</i>

## Other Notes

In consideration of regional economic factors in Latin America, ASH has adjusted the conflict of interest policy for this panel to allow direct payment from affected companies to panelists for travel to attend educational meetings only.



# ASH Guideline Panel Declaration of Interests Form

## Part A. Direct Financial Interests in or Relationships With Companies

### Employment

1. Are you currently or in the past 24 months have you been an employee of any for-profit company that develops, produces, markets, or distributes drugs, devices, services, or therapies used to diagnose, treat, monitor, manage, or alleviate health conditions?

- ☒ No
- ☐ Yes, as described below:

Add rows as needed for each employment relationship.

Company	Description	End Date	For ASH Internal Use

### Equity

2. Do you currently or in the past 24 months have you had equity in any for-profit company that develops, produces, markets, or distributes drugs, devices, services, or therapies used to diagnose, treat, monitor, manage, or alleviate health conditions? Equity includes stock, stock options, and other ownership interests but excludes diversified mutual fund shares.

- ☒ No
- ☐ Yes, as described below:

Add rows as needed for each equity interest.

<i>Company</i>	<i>Description</i>	<i>Date Divested</i>	<i>For ASH Internal Use</i>

## Patents, Royalties, and Other Intellectual Property

3. Do you currently or in the past 24 months have you owned patents for or received royalties from any intellectual property or product used to diagnose, treat, monitor, manage, or alleviate health conditions?

☒ No

☐ Yes, as described below:

Add rows as needed for each patent or royalty interest.

<i>Company</i>	<i>Description</i>	<i>Date Divested</i>	<i>For ASH Internal Use</i>

## Personal Income or Other Direct Transfers of Value

4. Do you currently or in the past 24 months have you received any personal income or other direct transfers of value (e.g., honoraria, gifts, travel support, meeting registration, meals) from any for-profit company that develops, produces, markets, or distributes drugs, devices, services, or therapies used to diagnose, treat, monitor, manage, or alleviate health conditions?

☐ No

☒ Yes, as described below:

Column 1 Name the company.

Column 2 Describe the activity for which you received the income or other transfer of value, e.g., research, consultancy, speakers bureau involvement, service on an advisory committee or board, expert testimony.

Column 3 Indicate when the activity ended, if applicable. (If the activity has not yet ended, indicate “current” or “ongoing.”)

Add rows as needed for each activity.

<i>Company</i>	<i>Description</i>	<i>End Date</i>	<i>For ASH Internal Use</i>
Novartis	Speaker, Ad Board	Nov 2017	Novartis is not an affected company.
Roche	Speaker, Ad Board	Oct 2017	Roche markets assays, reagents, and instruments used for anticoagulation testing and monitoring. However, this relationship ended prior to appointment.
Bayer	Speaker, Ad Board	Nov 2017	Bayer markets rivaroxaban. However, this relationship ended prior to appointment.
Pfizer	Speaker	Nov 2017	Pfizer markets apixaban. However, this relationship ended prior to appointment.
NovoNordisk	Ad Board	Nov 2017	NovoNordisk markets NovoSeven, which is used off label to reverse anticoagulation. However, this relationship ended prior to appointment.

## My Partner’s or Spouse’s Interests

5. Currently or in the past 24 months has *your partner or spouse* had any of the interests or relationships described in questions 1-4?

☒ No

☐ Yes, as described below:

Add rows as needed for each interest.

Company	Description	End Date	For ASH Internal Use



# Part B. Indirect Financial Interests in or Relationships With Companies

## Industry-Funded Institutional Research

1. Through your institution, do you currently or in the past 24 months have you been involved in research funded or supported (e.g., in kind support, such as provision of a study drug) by any for-profit company that develops, produces, markets, or distributes drugs, devices, services, or therapies used to diagnose, treat, monitor, manage, or alleviate health conditions?

- ☒ No
- ☐ Yes, as described below:

- Column 1    Name the company funding or supporting the research.
- Column 2    Briefly describe the research project.
- Column 3    Describe your role: (a) national or overall principal investigator, (b) member of a steering committee of a study that does not have a principal investigator, (c) site or local investigator. If other than these options, please describe.
- Column 4    Indicate when your involvement ended, if applicable. (If your involvement has not yet ended, indicate “current” or “ongoing.”)

Add rows as needed for each research project.

Company	Description of Research	My Role	End Date	For ASH Internal Use

## Paid and Volunteer Activities for Organizations Supported by Industry

2. Do you currently or in the past 24 months have you been involved in any volunteer or paid work for an organization that is wholly or partially funded by any for-profit company that develops, produces,

markets, or distributes drugs, devices, services, or therapies used to diagnose, treat, monitor, manage, or alleviate health conditions?

☒ No

☐ Yes, as described below:

Column 1 Name the organization. If known to you, describe any industry funding or support.

Column 2 Briefly describe your activity and role, e.g., employment, service on board of directors, other volunteer services.

Column 3 Indicate if your activity was paid or volunteered.

Column 4 Indicate when your involvement with the organization ended. (If your involvement has not yet ended, indicate “current” or “ongoing.”)

Add rows as needed for each organization.

Organization	Description and role	Paid or Unpaid?	End Date	For ASH Internal Use

Other

3. Do you have other indirect interests in or relationships with any for-profit company that develops, produces, markets, or distributes drugs, devices, services, or therapies used to diagnose, treat, monitor, manage, or alleviate health conditions?

☒ No

☐ Yes

If yes, please explain:

## Part C. Relevant Other Interests That Are Not Mainly Financial

You have been invited by ASH to participate in the development of clinical practice guidelines on the following topic(s):

ASH Guidelines on Venous Thromboembolism for Latin America

The questions that follow are designed to elicit information about personal beliefs, intellectual positions or opinions, institutional relationships, and other interests that are not mainly financial and that may be relevant to guidelines on the above topic(s).

### Personal Beliefs

1. Do you have strongly held beliefs related to the topic of these guidelines?

☒ No

☐ Yes

If yes, please explain:

### Previously Published Opinions

2. Have you ever authored, coauthored, or publicly provided an opinion related to the topic of these guidelines, e.g., a clinical practice guideline, textbook, review article, meeting poster or presentation, grand rounds talk, letter to the editor?

☐ No

☒ Yes

If yes, what were those views and where were they made?

I participated as advisory council for the International Clinical Practice Guidelines:

Farge D, Bounameaux H, Brenner B, et al. International clinical practice guidelines including guidance for direct oral anticoagulants in the treatment and prophylaxis of venous thromboembolism in patients with cancer. *Lancet Oncol* 2016; **17**: e452–66.

## Non-Industry Supported Research

3. Currently or in the past 24 months, have you been involved in a leadership role in any research project not already reported under Part B, Question 1, relevant to the topic of these guidelines, e.g., a research project funded by a nonprofit or governmental organization?

☒ No

☐ Yes, as described below:

Column 1 Name the entity funding the research.

Column 2 Describe the research project.

Column 3 Describe your role: (a) national or overall principal investigator, (b) member of a steering committee of a study that does not have a principal investigator, (c) site or local investigator. If other than these options, please describe.

Column 4 Indicate when your involvement ended, if applicable. (If your involvement has not yet ended, indicate "current" or "ongoing.")

Add rows as needed for each research project.

<i>Funder</i>	<i>Description of Research</i>	<i>My Role</i>	<i>End Date</i>

## Institutional Relationships

4. Could your salary be affected by recommendations on this topic?

☐ Don't know

☒ No

☐ Yes

If yes, please explain:

5. Do you generate revenues for your institution or employer by clinical activity, teaching, speaking, consulting, testifying, writing, or otherwise sharing your knowledge or opinions about this guideline topic?

☐ Don't know

☒ No

☐ Yes

If yes, please explain:

6. Could your institution benefit or be harmed by recommendations of guidelines on this topic?

☐ Don't know

☒ No

☐ Yes

If yes, please explain:

Career Advancement

7. How would you characterize the support you would receive from your primary mentor, institution, or other entities if your work on this panel or authorship of these guidelines generated a strong reaction from peers outside your institution?  
The support will not be affected.

Involvement in Organizations With Relevant Policy Positions

8. Do you work for or are you a member of an organization with a stated position related to the topic of these guidelines, e.g., position statement, editorial, blog, amicus brief, or legislature or legal testimony?

☒ No

☐ Yes, as described below:

- Column 1    Name the organization.
- Column 2    Describe or reference any policy position of the organization that is related to the topic of these guidelines.
- Column 3    Describe your role at the organization, including your involvement in deciding, promoting, or implementing relevant positions.

Add rows as needed for each organization.

Organization	Relevant Policy Position	Your Role

<i>Organization</i>	<i>Relevant Policy Position</i>	<i>Your Role</i>

## Clinical Practice

9. Do you see patients clinically?

☐ No

☒ Yes

If yes, what is your primary specialty or subspecialty?

Hematologist.

If yes, do you prescribe or otherwise recommend clinical interventions (e.g., screening or diagnostic tests, evaluations, treatments, procedures) that may be addressed by these guidelines?

☐ No

☒ Yes

If yes, please explain:

In my private practice I have patients with VTE and possible thrombophilia.

## Expected Interests

10. Do you expect new financial or nonfinancial interests relevant to the topic of these guidelines not already declared in this form?

☒ No

☐ Yes

If yes, please describe:

## Part D. New Declarations (ASH Internal Use)

<i>Company</i>	<i>Description</i>	<i>Disclosure Date</i>	<i>ASH Internal Notes</i>
Novartis	Speaker about myeloid leukemia on November 2018	October 6, 2019	Novartis is not an affected company.
Novo Nordisk	Speaker about hemophilia, March 2019	October 6, 2019	Novo Nordisk markets NovoSeven, which is used off label to reverse anticoagulation. However, this topic will not be addressed by this guideline.
Novartis	Ad Board, Speaker August 2020	September 6, 2020	See above.
AstraZeneca	Ad Board, Speaker August 2020	September 6, 2020	AstraZeneca is not an affected company.
Amgen	Speaker, May 2020	September 6, 2020	Amgen is not an affected guideline.
Pfizer	Talk on myeloid leukemia September, 2020	May 29, 2021	<b>Indirect COI</b> Pfizer markets an anticoagulation treatment, see part A, however Dr. Meillon does not receive any payments from Pfizer.
Pfizer	Talk on treatment of hemorrhage December, 2020	May 29, 2021	<b>Indirect COI</b> see above
Pfizer	Talk on infections in patients who have received transplanted stem liver cells April, 2021	May 29, 2021	<b>Indirect COI</b> see above

<i>Company</i>	<i>Description</i>	<i>Disclosure Date</i>	<i>ASH Internal Notes</i>
Pfizer	Help coordinate symposium on myeloid leukemia	May 29, 2021	<b>Indirect COI</b> see above



## Part E. Summary (ASH Internal Use)

Name of guideline panel(s)	ASH Guidelines on Venous Thromboembolism for Latin America
----------------------------	--

### Summary of ASH Judgments About Financial Conflicts

<i>Reviewer name and date</i>	<i>Direct Financial Conflicts?</i>	<i>Indirect Financial Conflicts?</i>	<i>Management Notes</i>
Alexander, 11/28/2017	No	No	Dr. Meillon has no current direct or indirect financial conflicts of interest. He previously received direct payments from for speaking and advisory boards from companies that could be affected by the guidelines. However, he has agreed to avoid these and other direct financial conflicts for the duration of the guideline development period, as a condition of his appointment.
Castano, 10/06/2019	No	No	
Castano, 9/8/2020	No	No	On September 6, 2020 Dr. Meillon disclosed three activities with companies that will not be affected by the guidelines, see part D. On September 6, 2020 Dr. Meillon also confirmed all information on this form.
Castano, 6/04/2021	No	Yes	On May 29, 2021 Dr. Meillon disclosed four activities with Pfizer, which constitute indirect financial conflicts. Pfizer markets an anticoagulation drug, apixaban, however, Dr. Meillon has waived all payments from Pfizer.  On May 29 Dr. Meillon reviewed and confirmed al information on this form.

### Summary of Direct Financial Conflicts

<i>Company</i>	<i>Description</i>	<i>Disclosure Date</i>	<i>ASH Notes</i>

## Other Notes

In consideration of regional economic factors in Latin America, ASH has adjusted the conflict of interest policy for this panel to allow direct payment from affected companies to panelists for travel to attend educational meetings only.



# ASH Guideline Panel Declarations of Interest Form

## Part A. Material Interests in Companies

### Equity

1. Do you currently or in the past 24 months have you had equity in any for-profit company that develops, produces, markets, or distributes drugs, devices, services, or therapies used to diagnose, treat, monitor, manage, or alleviate health conditions? Equity includes stock, stock options, and other ownership interests but excludes diversified mutual fund shares.

☒ No

☐ Yes, as described below:

Add rows as needed for each equity interest.

Company	Description	Date Divested	For ASH Internal Use

### Patents and Royalties

2. Do you currently or in the past 24 months have you owned patents for or received royalties from any intellectual property or product used to diagnose, treat, monitor, manage, or alleviate health conditions?

☒ No

☐ Yes, as described below:

Add rows as needed for each patent or royalty interest.

<i>Company</i>	<i>Description</i>	<i>Date Divested</i>	<i>For ASH Internal Use</i>

## Personal Income or Other Remuneration

3. Do you currently or in the past 24 months have you received personal income or other remuneration (e.g., reimbursement or financial support for the costs of travel) from any for-profit company that develops, produces, markets, or distributes drugs, devices, services, or therapies used to diagnose, treat, monitor, manage, or alleviate health conditions?

☒ No

☐ Yes, as described below:

Column 1 Name the company.

Column 2 Describe the activity for which you received income or other remuneration, e.g., employment, consultancy, speakers bureau involvement, service on an advisory committee or board, expert testimony.

Column 3 Indicate when the activity ended, if applicable. (If the activity has not yet ended, indicate "current" or "ongoing.")

Add rows as needed for each activity.

To report activities that generate revenues for your institution, see Part B, Question 4.

<i>Company</i>	<i>Description</i>	<i>End Date</i>	<i>For ASH Internal Use</i>

## Industry-Funded Research

4. Do you currently or in the past 24 months have you been involved in research funded or supported (e.g., in kind support) by any for-profit company that develops, produces, markets, or distributes drugs, devices, services, or therapies used to diagnose, treat, monitor, manage, or alleviate health conditions?

☒ No

☐ Yes, as described below:

Column 1 Name the company funding or supporting the research.

Column 2 Briefly describe the research project. Indicate if funding or support goes to you directly or to your institution.

Column 3 Describe your role: (a) national or overall principal investigator, (b) member of a steering committee of a study that does not have a principal investigator, (c) site or local investigator. If other than these options, please describe.

Column 4 Indicate when your involvement ended, if applicable. (If your involvement has not yet ended, indicate "current" or "ongoing.")

Add rows as needed for each research project.

<i>Company</i>	<i>Description of Research</i>	<i>My Role</i>	<i>End Date</i>	<i>For ASH Internal Use</i>

## My Partner's or Spouse's Interests

5. Currently or in the past 24 months has *your partner or spouse* had any of the interests described in questions 1-4?

☒ No

☐ Yes, as described below:

Add rows as needed for each interest.

<i>Company</i>	<i>Description</i>	<i>End Date</i>	<i>For ASH Internal Use</i>

## Part B. Interests That Are Not Mainly Financial

You have been invited by ASH to participate in the development of clinical practice guidelines on the following topic(s):

ASH Guidelines on Venous Thromboembolism for Latin America

The questions that follow are designed to elicit information about personal beliefs, intellectual positions or opinions, institutional relationships, and other interests that are not mainly financial and that may be relevant to guidelines on the above topic(s).

### Personal Beliefs

1. Do you have strongly held beliefs related to the topic of these guidelines?

☒ No

☐ Yes

If yes, please explain:

### Previously Published Opinions

2. Have you ever authored, coauthored, or publicly provided an opinion related to the topic of these guidelines, e.g., a clinical practice guideline, textbook, review article, meeting poster or presentation, grand rounds talk, letter to the editor?

☒ No

☐ Yes

If yes, what were those views and where were they made?

### Research

3. Currently or in the past 24 months, have you been involved in a leadership role in any research project not already reported under Part A, Question 4, relevant to the topic of these guidelines, e.g., a research project funded by a nonprofit or governmental organization?

☒ No

☐ Yes, as described below:

Column 1 Name the entity funding the research.

Column 2 Describe the research project.

Column 3 Describe your role: (a) national or overall principal investigator, (b) member of a steering committee of a study that does not have a principal investigator, (c) site or local investigator. If other than these options, please describe.

Column 4 Indicate when your involvement ended, if applicable. (If your involvement has not yet ended, indicate "current" or "ongoing.")

Add rows as needed for each research project.

<i>Funder</i>	<i>Description of Research</i>	<i>My Role</i>	<i>End Date</i>

## Institutional Relationships

4. Do you generate revenues or nonfinancial benefits for your institution by teaching, speaking, consulting, testifying, writing, or otherwise sharing your knowledge or opinions about this guideline topic?

☐ Don't know

☒ No

☐ Yes

If yes, please explain:

5. Could your institution benefit or be harmed by recommendations of guidelines on this topic?

☐ Don't know

☒ No

☐ Yes

If yes, please explain:



## Career Advancement

6. How would you characterize the support you would receive from your primary mentor, institution, or other entities if your work on this panel or authorship of these guidelines generated a strong reaction from peers outside your institution?

## Advocacy and Policy Positions

7. Do you work for or are you a member of an organization with a stated position related to the topic of these guidelines, e.g., position statement, editorial, blog, amicus brief, or legislature or legal testimony?

☒ No

☐ Yes

If yes, are you involved in formulating or voting for positions?

☐ No

☐ Yes

If yes, could recommendations of these guidelines conflict with policies you have promoted or are obligated to follow?

☐ Don't know or not applicable

☐ No

☐ Yes

If yes, please explain:

## Professional Specialty

8. What is your primary clinical specialty or subspecialty?

General Internal Medicine

9. Do you prescribe or otherwise recommend diagnostic tests or treatments that may be addressed by these guidelines?

☐ No

☒ Yes

If yes, please explain:

DVT/PEs are diagnosed and treated by internists in my setting.

### Expected Interests

10. Do you expect new financial or nonfinancial interests relevant to the topic of these guidelines not already declared in Part A or Part B of this form?

☒ No

☐ Yes

If yes, please describe:

## Part C. Summary (ASH Internal Use)

ASH will review your disclosures and summarize here interests that are judged to be current, material, and with an affected company. You will then be invited to review our determinations and to agree to make all parts of this form (A, B and C) publicly available.

Name of guideline panel(s)	ASH Guidelines on Venous Thromboembolism for Latin America
----------------------------	--

<i>Reviewer name and date</i>	<i>Direct Financial Conflicts?</i>	<i>Indirect Financial Conflicts?</i>	<i>Management Notes</i>
Alexander, 8/18/17	No	No	Dr. Neumann has no current direct or indirect conflicts of interest.
Castano, 8/31/2020	No	No	Dr. Neumann has no current direct or indirect conflicts of interest. On August 31, 2020 Dr. Neumann confirmed all information on this form.
Castano, 7/27/2021	No	No	Dr. Neumann has no current direct or indirect conflicts of interest. On July 27, 2021. Dr. Neumann confirmed all information on this form.

If status is conflicted minority, summarize all current material interests in affected companies:

<i>Company</i>	<i>Description</i>	<i>Disclosure Date</i>	<i>ASH Notes</i>

Notes:

Dr. Neumann is the lead methodologist and the facilitator for this panel.
---



# ASH Guideline Panel Declaration of Interests Form

## Part A. Direct Financial Interests in or Relationships With Companies

### Employment

1. Are you currently or in the past 24 months have you been an employee of any for-profit company that develops, produces, markets, or distributes drugs, devices, services, or therapies used to diagnose, treat, monitor, manage, or alleviate health conditions?

☒ No

☐ Yes, as described below:

Add rows as needed for each employment relationship.

<i>Company</i>	<i>Description</i>	<i>End Date</i>	<i>For ASH Internal Use</i>

### Equity

2. Do you currently or in the past 24 months have you had equity in any for-profit company that develops, produces, markets, or distributes drugs, devices, services, or therapies used to diagnose, treat, monitor, manage, or alleviate health conditions? Equity includes stock, stock options, and other ownership interests but excludes diversified mutual fund shares.

☒ No

☐ Yes, as described below:

Add rows as needed for each equity interest.

<i>Company</i>	<i>Description</i>	<i>Date Divested</i>	<i>For ASH Internal Use</i>

## Patents, Royalties, and Other Intellectual Property

3. Do you currently or in the past 24 months have you owned patents for or received royalties from any intellectual property or product used to diagnose, treat, monitor, manage, or alleviate health conditions?

☒ No

☐ Yes, as described below:

Add rows as needed for each patent or royalty interest.

<i>Company</i>	<i>Description</i>	<i>Date Divested</i>	<i>For ASH Internal Use</i>

## Personal Income or Other Direct Transfers of Value

4. Do you currently or in the past 24 months have you received any personal income or other direct transfers of value (e.g., honoraria, gifts, travel support, meeting registration, meals) from any for-profit company that develops, produces, markets, or distributes drugs, devices, services, or therapies used to diagnose, treat, monitor, manage, or alleviate health conditions?

☐ No

☒ Yes, as described below:

Column 1 Name the company.

Column 2 Describe the activity for which you received the income or other transfer of value, e.g., research, consultancy, speakers bureau involvement, service on an advisory committee or board, expert testimony.

Column 3 Indicate when the activity ended, if applicable. (If the activity has not yet ended, indicate “current” or “ongoing.”)

Add rows as needed for each activity.

<i>Company</i>	<i>Description</i>	<i>End Date</i>	<i>For ASH Internal Use</i>
Grifols S.A.	Honoraria as speaker in Hemostasis Educational Course, Chile	October 6, 2016	Ended before appointment. Grifols S.A. is not an affected company.

### My Partner’s or Spouse’s Interests

5. Currently or in the past 24 months has *your partner or spouse* had any of the interests or relationships described in questions 1-4?

☒ No

☐ Yes, as described below:

Add rows as needed for each interest.

<i>Company</i>	<i>Description</i>	<i>End Date</i>	<i>For ASH Internal Use</i>

# Part B. Indirect Financial Interests in or Relationships With Companies

## Industry-Funded Institutional Research

1. Through your institution, do you currently or in the past 24 months have you been involved in research funded or supported (e.g., in kind support, such as provision of a study drug) by any for-profit company that develops, produces, markets, or distributes drugs, devices, services, or therapies used to diagnose, treat, monitor, manage, or alleviate health conditions?

- ☒ No
- ☐ Yes, as described below:

- Column 1    Name the company funding or supporting the research.
- Column 2    Briefly describe the research project.
- Column 3    Describe your role: (a) national or overall principal investigator, (b) member of a steering committee of a study that does not have a principal investigator, (c) site or local investigator. If other than these options, please describe.
- Column 4    Indicate when your involvement ended, if applicable. (If your involvement has not yet ended, indicate “current” or “ongoing.”)

Add rows as needed for each research project.

Company	Description of Research	My Role	End Date	For ASH Internal Use

## Paid and Volunteer Activities for Organizations Supported by Industry

2. Do you currently or in the past 24 months have you been involved in any volunteer or paid work for an organization that is wholly or partially funded by any for-profit company that develops, produces,

markets, or distributes drugs, devices, services, or therapies used to diagnose, treat, monitor, manage, or alleviate health conditions?

☒ No

☐ Yes, as described below:

Column 1 Name the organization. If known to you, describe any industry funding or support.

Column 2 Briefly describe your activity and role, e.g., employment, service on board of directors, other volunteer services.

Column 3 Indicate if your activity was paid or volunteered.

Column 4 Indicate when your involvement with the organization ended. (If your involvement has not yet ended, indicate “current” or “ongoing.”)

Add rows as needed for each organization.

<i>Organization</i>	<i>Description and role</i>	<i>Paid or Unpaid?</i>	<i>End Date</i>	<i>For ASH Internal Use</i>

## Other

3. Do you have other indirect interests in or relationships with any for-profit company that develops, produces, markets, or distributes drugs, devices, services, or therapies used to diagnose, treat, monitor, manage, or alleviate health conditions?

☒ No

☐ Yes

If yes, please explain:



## Part C. Relevant Other Interests That Are Not Mainly Financial

You have been invited by ASH to participate in the development of clinical practice guidelines on the following topic(s):

ASH Guidelines on Venous Thromboembolism for Latin America

The questions that follow are designed to elicit information about personal beliefs, intellectual positions or opinions, institutional relationships, and other interests that are not mainly financial and that may be relevant to guidelines on the above topic(s).

### Personal Beliefs

1. Do you have strongly held beliefs related to the topic of these guidelines?

☒ No

☐ Yes

If yes, please explain:

### Previously Published Opinions

2. Have you ever authored, coauthored, or publicly provided an opinion related to the topic of these guidelines, e.g., a clinical practice guideline, textbook, review article, meeting poster or presentation, grand rounds talk, letter to the editor?

☐ No

☒ Yes

If yes, what were those views and where were they made?

*Grand rounds talks and meeting presentation on Hereditary Thrombophilia and Anticoagulant Treatment*

### Non-Industry Supported Research

3. Currently or in the past 24 months, have you been involved in a leadership role in any research project not already reported under Part B, Question 1, relevant to the topic of these guidelines, e.g., a research project funded by a nonprofit or governmental organization?

☐ No

☒ Yes, as described below:

Column 1 Name the entity funding the research.

Column 2 Describe the research project.

Column 3 Describe your role: (a) national or overall principal investigator, (b) member of a steering committee of a study that does not have a principal investigator, (c) site or local investigator. If other than these options, please describe.

Column 4 Indicate when your involvement ended, if applicable. (If your involvement has not yet ended, indicate “current” or “ongoing.”)

Add rows as needed for each research project.

<i>Funder</i>	<i>Description of Research</i>	<i>My Role</i>	<i>End Date</i>
National Commission for Scientific & Technological Research (FONDECYT)	“Studies on the contribution of endothelial dysfunction and platelet activation to the pathogenesis of thrombosis in inflammatory bowel disease”	Principal Investigator	March 2020

## Institutional Relationships

4. Could your salary be affected by recommendations on this topic?

☐ Don't know

☒ No

☐ Yes

If yes, please explain:

5. Do you generate revenues for your institution or employer by clinical activity, teaching, speaking, consulting, testifying, writing, or otherwise sharing your knowledge or opinions about this guideline topic?

☐ Don't know

☒ No

☐ Yes

If yes, please explain:

6. Could your institution benefit or be harmed by recommendations of guidelines on this topic?

☐ Don't know

☒ No

☐ Yes

If yes, please explain:

## Career Advancement

7. How would you characterize the support you would receive from your primary mentor, institution, or other entities if your work on this panel or authorship of these guidelines generated a strong reaction from peers outside your institution?

Full support

## Involvement in Organizations With Relevant Policy Positions

8. Do you work for or are you a member of an organization with a stated position related to the topic of these guidelines, e.g., position statement, editorial, blog, amicus brief, or legislature or legal testimony?

☒ No

☐ Yes, as described below:

Column 1 Name the organization.

Column 2 Describe or reference any policy position of the organization that is related to the topic of these guidelines.

Column 3 Describe your role at the organization, including your involvement in deciding, promoting, or implementing relevant positions.

Add rows as needed for each organization.

Organization	Relevant Policy Position	Your Role

<i>Organization</i>	<i>Relevant Policy Position</i>	<i>Your Role</i>

## Clinical Practice

9. Do you see patients clinically?

☐ No

☒ Yes

If yes, what is your primary specialty or subspecialty?

Hematology

If yes, do you prescribe or otherwise recommend clinical interventions (e.g., screening or diagnostic tests, evaluations, treatments, procedures) that may be addressed by these guidelines?

☐ No

☒ Yes

If yes, please explain:

***I recommend diagnostic tests to study venous thromboembolism***

## Expected Interests

10. Do you expect new financial or nonfinancial interests relevant to the topic of these guidelines not already declared in this form?

☒ No

☐ Yes

If yes, please describe:

## Part D. New Declarations (ASH Internal Use)

<i>Company</i>	<i>Description</i>	<i>Disclosure Date</i>	<i>ASH Internal Notes</i>
Diagnostica Stago SAS	Honorarium for Hemostasis in Chronic Liver Failure Master Class in Bogota, Colombia, October 2018	04/01/2019	<b>Direct Conflict.</b> Diagnostica Stago SAS markets D-Dimer assay, which is widely used in the diagnosis of VTE. This was an educational activity not related to VTE and Dr. Pereira has agreed not to engage in future activities with this company.

## Part E. Summary (ASH Internal Use)

Name of guideline panel(s)	ASH Guidelines on Venous Thromboembolism for Latin America
----------------------------	--

### Summary of ASH Judgments About Financial Conflicts

<i>Reviewer name and date</i>	<i>Direct Financial Conflicts?</i>	<i>Indirect Financial Conflicts?</i>	<i>Management Notes</i>
Alexander, 8/18/17	No	No	Dr. Pereira has no current direct or indirect financial conflicts of interest. He has agreed to avoid any direct financial conflicts of interest for the duration of the guideline development period, as a condition of his appointment.
Castano, 9/25/2019	Yes	No	Dr. Pereira participated as an instructor for an educational activity on hemostasis in liver failure, sponsored by Diagnostica Stago, a company that markets D-Dimer assay, which is widely used in the diagnosis of VTE. Dr. Pereira has agreed not to engage in future activities with this company.
Castano, 6/23/2020	Yes	No	On June 23, 2020 Dr. Pereira confirmed all information on this form.
Castano, 4/8/2021	Yes	No	On March 8, 2021 Dr. Pereira reviewed and confirmed all information on this form.

### Summary of Direct Financial Conflicts

<i>Company</i>	<i>Description</i>	<i>Disclosure Date</i>	<i>ASH Notes</i>
Diagnostica Stago SAS	Honorarium (\$500.00) for Hemostasis in Chronic Liver Failure Master Class in Bogota, Colombia, October 2018	04/01/2019	<b>Direct Conflict.</b> Diagnostica Stago SAS markets D-Dimer assay, which is widely used in the diagnosis of VTE. This was an educational activity not related to VTE and Dr. Pereira has agreed not to engage in future

<i>Company</i>	<i>Description</i>	<i>Disclosure Date</i>	<i>ASH Notes</i>
			activities with this company.

#### Other Notes

In consideration of regional economic factors in Latin America, ASH has adjusted the conflict of interest policy for this panel to allow direct payment from affected companies to panelists for travel to attend educational meetings only.



# ASH Guideline Panel Declaration of Interests Form

## Part A. Direct Financial Interests in or Relationships With Companies

### Employment

- Are you currently or in the past 24 months have you been an employee of any for-profit company that develops, produces, markets, or distributes drugs, devices, services, or therapies used to diagnose, treat, monitor, manage, or alleviate health conditions?

☒ No

☐ Yes, as described below:

Add rows as needed for each employment relationship.

<i>Company</i>	<i>Description</i>	<i>End Date</i>	<i>For ASH Internal Use</i>

### Equity

- Do you currently or in the past 24 months have you had equity in any for-profit company that develops, produces, markets, or distributes drugs, devices, services, or therapies used to diagnose, treat, monitor, manage, or alleviate health conditions? Equity includes stock, stock options, and other ownership interests but excludes diversified mutual fund shares.

☒ No

☐ Yes, as described below:

Add rows as needed for each equity interest.



<i>Company</i>	<i>Description</i>	<i>Date Divested</i>	<i>For ASH Internal Use</i>

## Patents, Royalties, and Other Intellectual Property

3. Do you currently or in the past 24 months have you owned patents for or received royalties from any intellectual property or product used to diagnose, treat, monitor, manage, or alleviate health conditions?

☒ No

☐ Yes, as described below:

Add rows as needed for each patent or royalty interest.

<i>Company</i>	<i>Description</i>	<i>Date Divested</i>	<i>For ASH Internal Use</i>

## Personal Income or Other Direct Transfers of Value

4. Do you currently or in the past 24 months have you received any personal income or other direct transfers of value (e.g., honoraria, gifts, travel support, meeting registration, meals) from any for-profit company that develops, produces, markets, or distributes drugs, devices, services, or therapies used to diagnose, treat, monitor, manage, or alleviate health conditions?

☒ No

☐ Yes, as described below:

Column 1 Name the company.

Column 2 Describe the activity for which you received the income or other transfer of value, e.g., research, consultancy, speakers bureau involvement, service on an advisory committee or board, expert testimony.

Column 3 Indicate when the activity ended, if applicable. (If the activity has not yet ended, indicate “current” or “ongoing.”)

Add rows as needed for each activity.

<i>Company</i>	<i>Description</i>	<i>End Date</i>	<i>For ASH Internal Use</i>

### My Partner’s or Spouse’s Interests

5. Currently or in the past 24 months has *your partner or spouse* had any of the interests or relationships described in questions 1-4?

☒ No

☐ Yes, as described below:

Add rows as needed for each interest.

<i>Company</i>	<i>Description</i>	<i>End Date</i>	<i>For ASH Internal Use</i>

# Part B. Indirect Financial Interests in or Relationships With Companies

## Industry-Funded Institutional Research

1. Through your institution, do you currently or in the past 24 months have you been involved in research funded or supported (e.g., in kind support, such as provision of a study drug) by any for-profit company that develops, produces, markets, or distributes drugs, devices, services, or therapies used to diagnose, treat, monitor, manage, or alleviate health conditions?

☒ No

☐ Yes, as described below:

Column 1 Name the company funding or supporting the research.

Column 2 Briefly describe the research project.

Column 3 Describe your role: (a) national or overall principal investigator, (b) member of a steering committee of a study that does not have a principal investigator, (c) site or local investigator. If other than these options, please describe.

Column 4 Indicate when your involvement ended, if applicable. (If your involvement has not yet ended, indicate “current” or “ongoing.”)

Add rows as needed for each research project.

<i>Company</i>	<i>Description of Research</i>	<i>My Role</i>	<i>End Date</i>	<i>For ASH Internal Use</i>

## Paid and Volunteer Activities for Organizations Supported by Industry

2. Do you currently or in the past 24 months have you been involved in any volunteer or paid work for an organization that is wholly or partially funded by any for-profit company that develops, produces,

markets, or distributes drugs, devices, services, or therapies used to diagnose, treat, monitor, manage, or alleviate health conditions?

☐ No

☒ Yes, as described below:

Column 1 Name the organization. If known to you, describe any industry funding or support.

Column 2 Briefly describe your activity and role, e.g., employment, service on board of directors, other volunteer services.

Column 3 Indicate if your activity was paid or volunteered.

Column 4 Indicate when your involvement with the organization ended. (If your involvement has not yet ended, indicate "current" or "ongoing.")

Add rows as needed for each organization.

Organization	Description and role	Paid or Unpaid?	End Date	For ASH Internal Use
International Society of Thrombosis and Haemostasis	ISTH Council member; Chair of membership committee; member of the education committee	unpaid	Ended in 2020	
World Federation of Hemophilia	Member of the Data and Demographic committee	unpaid	Ended in 2017	
Associacao Brasileira de Hematologia e Hemoterapia	Member of the Thrombosis and Haemostasis Committee	unpaid	Ongoing	

## Other

3. Do you have other indirect interests in or relationships with any for-profit company that develops, produces, markets, or distributes drugs, devices, services, or therapies used to diagnose, treat, monitor, manage, or alleviate health conditions?

☒ No

☐ Yes

If yes, please explain:

## Part C. Relevant Other Interests That Are Not Mainly Financial

You have been invited by ASH to participate in the development of clinical practice guidelines on the following topic(s):

ASH Guidelines on Venous Thromboembolism for Latin America

The questions that follow are designed to elicit information about personal beliefs, intellectual positions or opinions, institutional relationships, and other interests that are not mainly financial and that may be relevant to guidelines on the above topic(s).

### Personal Beliefs

1. Do you have strongly held beliefs related to the topic of these guidelines?

☒ No

☐ Yes

If yes, please explain:

### Previously Published Opinions

2. Have you ever authored, coauthored, or publicly provided an opinion related to the topic of these guidelines, e.g., a clinical practice guideline, textbook, review article, meeting poster or presentation, grand rounds talk, letter to the editor?

☐ No

☒ Yes

If yes, what were those views and where were they made? I have authored/coauthored papers related to the field of thrombosis and thromboprophylaxis.

### Non-Industry Supported Research

3. Currently or in the past 24 months, have you been involved in a leadership role in any research project not already reported under Part B, Question 1, relevant to the topic of these guidelines, e.g., a research project funded by a nonprofit or governmental organization?

☐ No

☒ Yes, as described below:

Column 1 Name the entity funding the research.

Column 2 Describe the research project.

Column 3 Describe your role: (a) national or overall principal investigator, (b) member of a steering committee of a study that does not have a principal investigator, (c) site or local investigator. If other than these options, please describe.

Column 4 Indicate when your involvement ended, if applicable. (If your involvement has not yet ended, indicate "current" or "ongoing.")

Add rows as needed for each research project.

<i>Funder</i>	<i>Description of Research</i>	<i>My Role</i>	<i>End Date</i>
Conselho Nacional de pesquisa (CNPq)	Hemophilia	Principal investigator	Ongoing
CAPES (Ministry of Education)	Hemophilia, thrombosis	Principal investigator	2018
Fundo Nacional de Saude (Ministry of Health)	Hemophilia, thrombosis	Principal investigator	Ongoing
FAPEMIG	Hemophilia, thrombosis	Principal investigator	Ongoing

## Institutional Relationships

4. Could your salary be affected by recommendations on this topic?

☐ Don't know

☒ No

☐ Yes

If yes, please explain:

5. Do you generate revenues for your institution or employer by clinical activity, teaching, speaking, consulting, testifying, writing, or otherwise sharing your knowledge or opinions about this guideline topic?

☐ Don't know

☒ No

☐ Yes

If yes, please explain:

6. Could your institution benefit or be harmed by recommendations of guidelines on this topic?

☐ Don't know

☒ No

☐ Yes

If yes, please explain:

## Career Advancement

7. How would you characterize the support you would receive from your primary mentor, institution, or other entities if your work on this panel or authorship of these guidelines generated a strong reaction from peers outside your institution?

I guess this would not harm my position.

## Involvement in Organizations With Relevant Policy Positions

8. Do you work for or are you a member of an organization with a stated position related to the topic of these guidelines, e.g., position statement, editorial, blog, amicus brief, or legislature or legal testimony?

☐ No

☒ Yes, as described below: see question 2

Column 1 Name the organization.

Column 2 Describe or reference any policy position of the organization that is related to the topic of these guidelines.

Column 3 Describe your role at the organization, including your involvement in deciding, promoting, or implementing relevant positions.

Add rows as needed for each organization.

<i>Organization</i>	<i>Relevant Policy Position</i>	<i>Your Role</i>

<i>Organization</i>	<i>Relevant Policy Position</i>	<i>Your Role</i>

## Clinical Practice

9. Do you see patients clinically?

☐ No

☒ Yes

If yes, what is your primary specialty or subspecialty? Haematology

If yes, do you prescribe or otherwise recommend clinical interventions (e.g., screening or diagnostic tests, evaluations, treatments, procedures) that may be addressed by these guidelines?

☐ No

☒ Yes

If yes, please explain: I am involved with diagnosis, screening, treatment and procedures related to the field of Thrombosis and Haemostasis.

## Expected Interests

10. Do you expect new financial or nonfinancial interests relevant to the topic of these guidelines not already declared in this form?

☒ No

☐ Yes

If yes, please describe:



## Part D. New Declarations (ASH Internal Use)

<i>Company</i>	<i>Description</i>	<i>Disclosure Date</i>	<i>ASH Internal Notes</i>
N/A	Associacao Brasileira de Hematologia e Hemoterapia: member of the Thrombosis and Haemostasis Committee and member of the fiscal council. Both positions are unpaid.	4/01/2018	<b>Not a COI</b>
N/A	International Society of Thrombosis and Hemostasis research on thrombosis and thromboprophylaxis - collaboration with University of Leiden – ends in 2022	4/01/2018	<b>Not a COI</b>
N/A	Update, the following activities have ended: International Society of Thrombosis and Haemostasis, ISTH Council member; Chair of membership committee; member of the education committee, see part C	3/05/2021	N/A
N/A	Update, the following activity has ended: Associacao Brasileira de Hematologia e Hemoterapia: member of the fiscal council.	3/05/2021	N/A
N/A	Associate Editor for <i>Hematology</i> ,	3/05/2021	N/A

<i>Company</i>	<i>Description</i>	<i>Disclosure Date</i>	<i>ASH Internal Notes</i>
	<i>Transfusion and Cell Therapy Journal</i>		
N/A	Member of the advisory board of Research and Practice for <i>Thrombosis and Haemostasis Journal</i>	3/05/2021	N/A

## Part E. Summary (ASH Internal Use)

Name of guideline panel(s)	ASH Guidelines on Venous Thromboembolism for Latin America
----------------------------	--

### Summary of ASH Judgments About Financial Conflicts

<i>Reviewer name and date</i>	<i>Direct Financial Conflicts?</i>	<i>Indirect Financial Conflicts?</i>	<i>Management Notes</i>
Alexander, 8/18/2017	No	No	Dr. Rezende has no current direct or indirect financial conflicts of interest. She has agreed to avoid any direct financial conflicts of interest for the duration of the guideline development period, as a condition of her appointment.
Castano, 4/2/2018	No	No	Dr. Rezende disclosed two unpaid positions with the Brazilian Society of Hematology that do not constitute direct or indirect conflicts. She also disclosed a research activity with ISTH and the University of Leiden which does not constitute a conflict.
Castano, 6/12/2020	No	No	On June 12, 2020 Dr. Rezende confirmed all information on this form.
Castano, 4/7/2021	No	No	On March 5, 2021 Dr. Rezende updated and confirmed all information on this form.

### Summary of Direct Financial Conflicts

<i>Company</i>	<i>Description</i>	<i>Disclosure Date</i>	<i>ASH Notes</i>

### Other Notes

In consideration of regional economic factors in Latin America, ASH has adjusted the conflict of interest policy for this panel to allow direct payment from affected companies to panelists for travel to attend educational meetings only.



# ASH Guideline Panel Declaration of Interests Form

## Part A. Direct Financial Interests in or Relationships With Companies

### Employment

1. Are you currently or in the past 24 months have you been an employee of any for-profit company that develops, produces, markets, or distributes drugs, devices, services, or therapies used to diagnose, treat, monitor, manage, or alleviate health conditions?

☒ No

☐ Yes, as described below:

Add rows as needed for each employment relationship.

Company	Description	End Date	For ASH Internal Use

### Equity

2. Do you currently or in the past 24 months have you had equity in any for-profit company that develops, produces, markets, or distributes drugs, devices, services, or therapies used to diagnose, treat, monitor, manage, or alleviate health conditions? Equity includes stock, stock options, and other ownership interests but excludes diversified mutual fund shares.

☒ No

☐ Yes, as described below:

Add rows as needed for each equity interest.

<i>Company</i>	<i>Description</i>	<i>Date Divested</i>	<i>For ASH Internal Use</i>

## Patents, Royalties, and Other Intellectual Property

3. Do you currently or in the past 24 months have you owned patents for or received royalties from any intellectual property or product used to diagnose, treat, monitor, manage, or alleviate health conditions?

☒ No

☐ Yes, as described below:

Add rows as needed for each patent or royalty interest.

<i>Company</i>	<i>Description</i>	<i>Date Divested</i>	<i>For ASH Internal Use</i>

## Personal Income or Other Direct Transfers of Value

4. Do you currently or in the past 24 months have you received any personal income or other direct transfers of value (e.g., honoraria, gifts, travel support, meeting registration, meals) from any for-profit company that develops, produces, markets, or distributes drugs, devices, services, or therapies used to diagnose, treat, monitor, manage, or alleviate health conditions?

☐ No

☒ Yes, as described below:

Column 1 Name the company.

Column 2 Describe the activity for which you received the income or other transfer of value, e.g., research, consultancy, speakers bureau involvement, service on an advisory committee or board, expert testimony.

Column 3 Indicate when the activity ended, if applicable. (If the activity has not yet ended, indicate “current” or “ongoing.”)

Add rows as needed for each activity.

<i>Company</i>	<i>Description</i>	<i>End Date</i>	<i>For ASH Internal Use</i>
TAKEDA	ADVISORY BOARD	JULY 2015	Ended before appointment. Not an affected company.

### My Partner’s or Spouse’s Interests

5. Currently or in the past 24 months has *your partner or spouse* had any of the interests or relationships described in questions 1-4?

☒ No

☐ Yes, as described below:

Add rows as needed for each interest.

<i>Company</i>	<i>Description</i>	<i>End Date</i>	<i>For ASH Internal Use</i>

# Part B. Indirect Financial Interests in or Relationships With Companies

## Industry-Funded Institutional Research

1. Through your institution, do you currently or in the past 24 months have you been involved in research funded or supported (e.g., in kind support, such as provision of a study drug) by any for-profit company that develops, produces, markets, or distributes drugs, devices, services, or therapies used to diagnose, treat, monitor, manage, or alleviate health conditions?

- ☒ No
- ☐ Yes, as described below:

- Column 1 Name the company funding or supporting the research.
- Column 2 Briefly describe the research project.
- Column 3 Describe your role: (a) national or overall principal investigator, (b) member of a steering committee of a study that does not have a principal investigator, (c) site or local investigator. If other than these options, please describe.
- Column 4 Indicate when your involvement ended, if applicable. (If your involvement has not yet ended, indicate “current” or “ongoing.”)

Add rows as needed for each research project.

Company	Description of Research	My Role	End Date	For ASH Internal Use

## Paid and Volunteer Activities for Organizations Supported by Industry

2. Do you currently or in the past 24 months have you been involved in any volunteer or paid work for an organization that is wholly or partially funded by any for-profit company that develops, produces,

markets, or distributes drugs, devices, services, or therapies used to diagnose, treat, monitor, manage, or alleviate health conditions?

☒ No

☐ Yes, as described below:

Column 1 Name the organization. If known to you, describe any industry funding or support.

Column 2 Briefly describe your activity and role, e.g., employment, service on board of directors, other volunteer services.

Column 3 Indicate if your activity was paid or volunteered.

Column 4 Indicate when your involvement with the organization ended. (If your involvement has not yet ended, indicate “current” or “ongoing.”)

Add rows as needed for each organization.

<i>Organization</i>	<i>Description and role</i>	<i>Paid or Unpaid?</i>	<i>End Date</i>	<i>For ASH Internal Use</i>

## Other

3. Do you have other indirect interests in or relationships with any for-profit company that develops, produces, markets, or distributes drugs, devices, services, or therapies used to diagnose, treat, monitor, manage, or alleviate health conditions?

☒ No

☐ Yes

If yes, please explain:



## Part C. Relevant Other Interests That Are Not Mainly Financial

You have been invited by ASH to participate in the development of clinical practice guidelines on the following topic(s):

ASH VTE Guidelines for Latin America

The questions that follow are designed to elicit information about personal beliefs, intellectual positions or opinions, institutional relationships, and other interests that are not mainly financial and that may be relevant to guidelines on the above topic(s).

### Personal Beliefs

1. Do you have strongly held beliefs related to the topic of these guidelines?

☐ No

☒ Yes

If yes, please explain: Yes I strongly have beliefs, I have dedicated almost two decades to manage thrombotic and hemostatic disorders in Hospital Seguro Social San Cristobal, as well, in local University, I have given lectures, participate in advisory boards, coordinate projects, develop research in the field. Now I continue this activity in the City of Cucuta also.

### Previously Published Opinions

2. Have you ever authored, coauthored, or publicly provided an opinion related to the topic of these guidelines, e.g., a clinical practice guideline, textbook, review article, meeting poster or presentation, grand rounds talk, letter to the editor?

☐ No

☒ Yes

If yes, what were those views and where were they made?

IN 2015 I WAS PART OF GUIDELINES OF THROMBOEMBOLIC DISORDERS FOR THE VENEZUELAN SOCIETY OF HEMATOLOGY, AND ON OF MOST CURRENT REGARDING THIS TOPICS ADAPTED FOR VENEZUELAN REALITIES

## Non-Industry Supported Research

3. Currently or in the past 24 months, have you been involved in a leadership role in any research project not already reported under Part B, Question 1, relevant to the topic of these guidelines, e.g., a research project funded by a nonprofit or governmental organization?

☒ No

☐ Yes, as described below:

Column 1 Name the entity funding the research.

Column 2 Describe the research project.

Column 3 Describe your role: (a) national or overall principal investigator, (b) member of a steering committee of a study that does not have a principal investigator, (c) site or local investigator. If other than these options, please describe.

Column 4 Indicate when your involvement ended, if applicable. (If your involvement has not yet ended, indicate "current" or "ongoing.")

Add rows as needed for each research project.

<i>Funder</i>	<i>Description of Research</i>	<i>My Role</i>	<i>End Date</i>

## Institutional Relationships

4. Could your salary be affected by recommendations on this topic?

☐ Don't know

☒ No

☐ Yes

If yes, please explain:

5. Do you generate revenues for your institution or employer by clinical activity, teaching, speaking, consulting, testifying, writing, or otherwise sharing your knowledge or opinions about this guideline topic?

☐ Don't know

☐ No

☒ Yes

If yes, please explain: I COULD SERVE AS REPLIER OF VTE GUIDELINES AMONG YOUNG DOCTOR IN FORMATION IN COLOMBIA AND VENEZUELA

6. Could your institution benefit or be harmed by recommendations of guidelines on this topic?

☒ Don't know

☐ No

☐ Yes

If yes, please explain:

## Career Advancement

7. How would you characterize the support you would receive from your primary mentor, institution, or other entities if your work on this panel or authorship of these guidelines generated a strong reaction from peers outside your institution?

IT WILL BE A REAL HONOR, THEY WOULD BE REAL PROUD ALL MY MENTORS IN BANCO MUNICIPAL DE SANGRE IN CARACAS, ALSO FROM THE RESTS OF MEMBERS OF DIRECTVE BOARD OF MY SOCIETY, IT WILL BE GREATLY APPRECIATE. FOR SURE I WILL CONTRIBUTE TO LOCAL MEDICAL EDUCACION

## Involvement in Organizations With Relevant Policy Positions

8. Do you work for or are you a member of an organization with a stated position related to the topic of these guidelines, e.g., position statement, editorial, blog, amicus brief, or legislature or legal testimony?

☒ No

☐ Yes, as described below:

Column 1 Name the organization.

Column 2 Describe or reference any policy position of the organization that is related to the topic of these guidelines.

Column 3 Describe your role at the organization, including your involvement in deciding, promoting, or implementing relevant positions.

Add rows as needed for each organization.

<i>Organization</i>	<i>Relevant Policy Position</i>	<i>Your Role</i>

## Clinical Practice

9. Do you see patients clinically?

☐ No

☒ Yes

If yes, what is your primary specialty or subspecialty?

INTERNAL MEDICINE

HEMATOLOGY ONCOLOGY

MANAGEMENT OF THROBOSIS AND HEMOSTASIS DISORDERS

If yes, do you prescribe or otherwise recommend clinical interventions (e.g., screening or diagnostic tests, evaluations, treatments, procedures) that may be addressed by these guidelines?

☐ No

☒ Yes

If yes, please explain: I AM HEAD ATTENDING PHYSICIAN OF THE LARGEST HEMATO-ONCOLOGY UNIT IN NORTE DE SANTANDER COLOMBIA , AND ALSO WORK IN CITY OF SAN CRISTOBAL VENEZUELA FOR A TEACHING HOSPITAL, I SHARE MY WORK IN THIS TWO PLACES AND COUNTRIES

## Expected Interests

10. Do you expect new financial or nonfinancial interests relevant to the topic of these guidelines not already declared in this form?

☒ No

☐ Yes

If yes, please describe:

## Part D. New Declarations (ASH Internal Use)

<i>Company</i>	<i>Description</i>	<i>Disclosure Date</i>	<i>ASH Internal Notes</i>
Takeda	Meeting support to attend ASH 2019	8/28/2020	<b>Not a COI.</b> Takeda is not an affected company.
Dr. Reddy's Laboratories	Speaker, virtual educational teleconference, February 2020	8/28/2020	<b>Direct COI.</b> Dr. Reddy's Laboratories makes Pentasaccharide (eg fondaparinux) for the prevention and treatment of VTE.
Jenssen Cilag	Speaker on multiple myeloma November 2020	3/16/2021	<b>Direct COI.</b> Jenssen markets rivaroxaban a drug for the prevention and treatment for VTE.
N/A	Asociación Colombiana de Hematología y Oncología (ACHO) Advisory Board and technical report on a, treatment for patients with ineffective red blood cell production, made by Acceleron.  February 2021	3/16/2021	<b>Not a COI.</b> ACHO is the hematology society of Colombia; Acceleron is not an affected company.

## Part E. Summary (ASH Internal Use)

Name of guideline panel(s)	ASH VTE Guidelines for Latin America
----------------------------	--------------------------------------

### Summary of ASH Judgments About Financial Conflicts

<i>Reviewer name and date</i>	<i>Direct Financial Conflicts?</i>	<i>Indirect Financial Conflicts?</i>	<i>Management Notes</i>
Alexander, 9/7/2017	No	No	Dr. Serrano has no current direct or indirect financial conflicts of interest. He has agreed to avoid all direct financial conflicts of interest for the duration of the guideline development period, as a condition of his appointment.
Castano, 8/28/2020	Yes	No	Dr. Serrano has one current direct and no indirect financial conflicts of interest. On August 31, 2020 Dr. Serrano disclosed activity with Dr. Reddy's Laboratories, see part D. This company makes a drug for the prevention and treatment of VTE and may have triggered recusal at the time the recommendations were made. However, the activity and disclosure occurred after the panel had agreed on recommendations therefore, Dr. Serrano was not recused. On August 31, 2020 Dr. Serrano confirmed all information on this form.
Castano, 5/25/2021	Yes	No	On March 16, 2021 Dr. Serrano made two new disclosures, see part D. Dr. Serrano disclosed a new direct financial conflict with Jenssen. This company markets a drug for the prevention and treatment of VTE and may have triggered recusal at the time the recommendations were made. However, the activity and disclosure occurred after the panel had agreed on recommendations therefore, Dr. Serrano was not recused. Dr. Serrano also disclosed participating in an advisory board for the Asociación Colombiana de Hematología y Oncología (ACHO) about a treatment for patients with ineffective red blood cell production, made by Acceleron. This activity is not a COI.

			On May 25, 2021 Dr. Serrano confirmed all information on this form.
--	--	--	---

### Summary of Direct Financial Conflicts

<i>Company</i>	<i>Description</i>	<i>Disclosure Date</i>	<i>ASH Notes</i>
Dr. Reddy's Laboratories	Speaker virtual educational teleconference, February 2020	8/28/2020	This company markets a drug for the prevention and treatment of VTE and may have triggered recusal at the time the recommendations were made. However, the activity and disclosure occurred after the panel had agreed on recommendations therefore, Dr. Serrano was not recused.
Jennsen Cilag	Speaker Multiple Myeloma	3/16/2021	This company markets a drug for the prevention and treatment of VTE and may have triggered recusal at the time the recommendations were made. However, the activity and disclosure occurred after the panel had agreed on recommendations therefore, Dr. Serrano was not recused.

### Other Notes

In consideration of regional economic factors in Latin America, ASH has adjusted the conflict of interest policy for this panel to allow direct payment from affected companies to panelists for travel to attend educational meetings only.



# ASH Guideline Panel Declaration of Interests Form

## Part A. Direct Financial Interests in or Relationships With Companies

### Employment

1. Are you currently or in the past 24 months have you been an employee of any for-profit company that develops, produces, markets, or distributes drugs, devices, services, or therapies used to diagnose, treat, monitor, manage, or alleviate health conditions?

☒ No

☐ Yes, as described below:

Add rows as needed for each employment relationship.

Company	Description	End Date	For ASH Internal Use

### Equity

2. Do you currently or in the past 24 months have you had equity in any for-profit company that develops, produces, markets, or distributes drugs, devices, services, or therapies used to diagnose, treat, monitor, manage, or alleviate health conditions? Equity includes stock, stock options, and other ownership interests but excludes diversified mutual fund shares.

☒ No

☐ Yes, as described below:

Add rows as needed for each equity interest.



<i>Company</i>	<i>Description</i>	<i>Date Divested</i>	<i>For ASH Internal Use</i>

## Patents, Royalties, and Other Intellectual Property

3. Do you currently or in the past 24 months have you owned patents for or received royalties from any intellectual property or product used to diagnose, treat, monitor, manage, or alleviate health conditions?

☒ No

☐ Yes, as described below:

Add rows as needed for each patent or royalty interest.

<i>Company</i>	<i>Description</i>	<i>Date Divested</i>	<i>For ASH Internal Use</i>

## Personal Income or Other Direct Transfers of Value

4. Do you currently or in the past 24 months have you received any personal income or other direct transfers of value (e.g., honoraria, gifts, travel support, meeting registration, meals) from any for-profit company that develops, produces, markets, or distributes drugs, devices, services, or therapies used to diagnose, treat, monitor, manage, or alleviate health conditions?

☒ No

☐ Yes, as described below:

Column 1 Name the company.

Column 2 Describe the activity for which you received the income or other transfer of value, e.g., research, consultancy, speakers bureau involvement, service on an advisory committee or board, expert testimony.

Column 3 Indicate when the activity ended, if applicable. (If the activity has not yet ended, indicate “current” or “ongoing.”)

Add rows as needed for each activity.

<i>Company</i>	<i>Description</i>	<i>End Date</i>	<i>For ASH Internal Use</i>

### My Partner’s or Spouse’s Interests

5. Currently or in the past 24 months has *your partner or spouse* had any of the interests or relationships described in questions 1-4?

☒ No

☐ Yes, as described below:

Add rows as needed for each interest.

<i>Company</i>	<i>Description</i>	<i>End Date</i>	<i>For ASH Internal Use</i>

## Part B. Indirect Financial Interests in or Relationships With Companies

### Industry-Funded Institutional Research

- Through your institution, do you currently or in the past 24 months have you been involved in research funded or supported (e.g., in kind support, such as provision of a study drug) by any for-profit company that develops, produces, markets, or distributes drugs, devices, services, or therapies used to diagnose, treat, monitor, manage, or alleviate health conditions?

☒ No

☐ Yes, as described below:

Column 1 Name the company funding or supporting the research.

Column 2 Briefly describe the research project.

Column 3 Describe your role: (a) national or overall principal investigator, (b) member of a steering committee of a study that does not have a principal investigator, (c) site or local investigator. If other than these options, please describe.

Column 4 Indicate when your involvement ended, if applicable. (If your involvement has not yet ended, indicate “current” or “ongoing.”)

Add rows as needed for each research project.

<i>Company</i>	<i>Description of Research</i>	<i>My Role</i>	<i>End Date</i>	<i>For ASH Internal Use</i>

### Paid and Volunteer Activities for Organizations Supported by Industry

- Do you currently or in the past 24 months have you been involved in any volunteer or paid work for an organization that is wholly or partially funded by any for-profit company that develops, produces,

markets, or distributes drugs, devices, services, or therapies used to diagnose, treat, monitor, manage, or alleviate health conditions?

☒ No

☐ Yes, as described below:

Column 1 Name the organization. If known to you, describe any industry funding or support.

Column 2 Briefly describe your activity and role, e.g., employment, service on board of directors, other volunteer services.

Column 3 Indicate if your activity was paid or volunteered.

Column 4 Indicate when your involvement with the organization ended. (If your involvement has not yet ended, indicate “current” or “ongoing.”)

Add rows as needed for each organization.

<i>Organization</i>	<i>Description and role</i>	<i>Paid or Unpaid?</i>	<i>End Date</i>	<i>For ASH Internal Use</i>

## Other

3. Do you have other indirect interests in or relationships with any for-profit company that develops, produces, markets, or distributes drugs, devices, services, or therapies used to diagnose, treat, monitor, manage, or alleviate health conditions?

☒ No

☐ Yes

If yes, please explain:

## Part C. Relevant Other Interests That Are Not Mainly Financial

You have been invited by ASH to participate in the development of clinical practice guidelines on the following topic(s):

ASH Guidelines on Venous Thromboembolism for Latin America

The questions that follow are designed to elicit information about personal beliefs, intellectual positions or opinions, institutional relationships, and other interests that are not mainly financial and that may be relevant to guidelines on the above topic(s).

### Personal Beliefs

1. Do you have strongly held beliefs related to the topic of these guidelines?

☐ No

☒ Yes

If yes, please explain: Yes, because will contribute national guidelines elaboration and will it benefit to the diagnosis and treatments

### Previously Published Opinions

2. Have you ever authored, coauthored, or publicly provided an opinion related to the topic of these guidelines, e.g., a clinical practice guideline, textbook, review article, meeting poster or presentation, grand rounds talk, letter to the editor?

☐ No

☒ Yes

If yes, what were those views and where were they made?

Yes, I was the author of a Hospital guidelines in 2010

## Non-Industry Supported Research

3. Currently or in the past 24 months, have you been involved in a leadership role in any research project not already reported under Part B, Question 1, relevant to the topic of these guidelines, e.g., a research project funded by a nonprofit or governmental organization?

☒ No

☐ Yes, as described below:

Column 1 Name the entity funding the research.

Column 2 Describe the research project.

Column 3 Describe your role: (a) national or overall principal investigator, (b) member of a steering committee of a study that does not have a principal investigator, (c) site or local investigator. If other than these options, please describe.

Column 4 Indicate when your involvement ended, if applicable. (If your involvement has not yet ended, indicate “current” or “ongoing.”)

Add rows as needed for each research project.

<i>Funder</i>	<i>Description of Research</i>	<i>My Role</i>	<i>End Date</i>

## Institutional Relationships

4. Could your salary be affected by recommendations on this topic?

☐ Don't know

☒ No

☐ Yes

If yes, please explain:

5. Do you generate revenues for your institution or employer by clinical activity, teaching, speaking, consulting, testifying, writing, or otherwise sharing your knowledge or opinions about this guideline topic?

☒ Don't know

☐ No

☐ Yes

If yes, please explain:

6. Could your institution benefit or be harmed by recommendations of guidelines on this topic?

☐ Don't know

☐ No

☐ Yes

If yes, please explain:

## Career Advancement

7. How would you characterize the support you would receive from your primary mentor, institution, or other entities if your work on this panel or authorship of these guidelines generated a strong reaction from peers outside your institution?

Very well, because it will be an important profit to rank the institution and this investigation can will be used to other medical centers of my country.

## Involvement in Organizations With Relevant Policy Positions

8. Do you work for or are you a member of an organization with a stated position related to the topic of these guidelines, e.g., position statement, editorial, blog, amicus brief, or legislature or legal testimony?

☐ No

☒ Yes, as described below:

Column 1 Name the organization.

Column 2 Describe or reference any policy position of the organization that is related to the topic of these guidelines.

Column 3 Describe your role at the organization, including your involvement in deciding, promoting, or implementing relevant positions.

Add rows as needed for each organization.

<i>Organization</i>	<i>Relevant Policy Position</i>	<i>Your Role</i>
Caja Petrolera de Salud	Is committed to the provision of a safe medical attention	Hematology Oncology Department Director

## Clinical Practice

9. Do you see patients clinically?

☐ No

☒ Yes

If yes, what is your primary specialty or subspecialty? Hematology

If yes, do you prescribe or otherwise recommend clinical interventions (e.g., screening or diagnostic tests, evaluations, treatments, procedures) that may be addressed by these guidelines?

☐ No

☒ Yes

If yes, please explain: Because I treat the patients and I am involved with colleagues surgical clinical specialties

## Expected Interests

10. Do you expect new financial or nonfinancial interests relevant to the topic of these guidelines not already declared in this form?

☒ No

☐ Yes

If yes, please describe:



## Part D. New Declarations (ASH Internal Use)

<i>Company</i>	<i>Description</i>	<i>Disclosure Date</i>	<i>ASH Internal Notes</i>

## Part E. Summary (ASH Internal Use)

Name of guideline panel(s)	ASH Guidelines on Venous Thromboembolism for Latin America
----------------------------	--

### Summary of ASH Judgments About Financial Conflicts

<i>Reviewer name and date</i>	<i>Direct Financial Conflicts?</i>	<i>Indirect Financial Conflicts?</i>	<i>Management Notes</i>
Alexander, 8/18/17	No	No	Dr. Tejerina Valle has no current direct or indirect financial conflicts of interest. He has agreed to avoid all direct financial conflicts of interest for the duration of the guideline development period as a condition of his appointment.
Castano, 8/31/2020	No	No	On June 18, 2020 Dr. Tejerina confirmed all information on this form.
Castano, 4/08/2021	No	No	On March 15, 2020 Dr. Tejerina reviewed and confirmed all information on this form.

### Summary of Direct Financial Conflicts

<i>Company</i>	<i>Description</i>	<i>Disclosure Date</i>	<i>ASH Notes</i>

### Other Notes

In consideration of regional economic factors in Latin America, ASH has adjusted the conflict of interest policy for this panel to allow direct payment from affected companies to panelists for travel to attend educational meetings only.