

ICMJE Form for Disclosure of Potential Conflicts of Interest

Instructions

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4. Intellectual Property.

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

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)

Cristina

2. Surname (Last Name)

Stasi

3. Date

27-February-2018

4. Are you the corresponding author?

☒ Yes ☐ No

5. Manuscript Title

CLINICAL EPIDEMIOLOGY OF CHRONIC VIRAL HEPATITIS B: THE TUSCANY REAL-WORLD LARGE-SCALE COHORT STUDY

6. Manuscript Identifying Number (if you know it)

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Section 4. Intellectual Property -- Patents & Copyrights

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



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Dr. Stasi has nothing to disclose.

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)

Caterina

2. Surname (Last Name)

Silvestri

3. Date

27-February-2018

4. Are you the corresponding author?

☐ Yes

☒ No

Corresponding Author's Name

Cristina Stasi

5. Manuscript Title

CLINICAL EPIDEMIOLOGY OF CHRONIC VIRAL HEPATITIS B: THE TUSCANY REAL-WORD LARGE-SCALE COHORT STUDY

6. Manuscript Identifying Number (if you know it)

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Dr. Silvestri has nothing to disclose.

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name) Roberto 2. Surname (Last Name) Berni 3. Date 06-March-2018

4. Are you the corresponding author? ☐ Yes ☒ No Corresponding Author's Name Cristina Stasi

5. Manuscript Title
CLINICAL EPIDEMIOLOGY OF CHRONIC VIRAL HEPATITIS B: THE TUSCANY REAL-WORD LARGE-SCALE COHORT STUDY

6. Manuscript Identifying Number (if you know it)
38356

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Dr. Bemis has nothing to disclose.

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Section 1. Identifying Information

1. Given Name (First Name)

Maurizia

2. Surname (Last Name)

Brunetto

3. Date

07-March-2018

4. Are you the corresponding author?

☐ Yes

☒ No

Corresponding Author's Name

Cristina Stasi

5. Manuscript Title

CLINICAL EPIDEMIOLOGY OF CHRONIC VIRAL HEPATITIS B: THE TUSCANY REAL-WORLD LARGE-SCALE COHORT STUDY

6. Manuscript Identifying Number (if you know it)

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Are there any relevant conflicts of interest?

☒ Yes

☐ No

If yes, please fill out the appropriate information below.

Name of Entity	Grant?	Personal Fees?	Non-Financial Support?	Other?	Comments
BMS	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Research projects; Speakers bureau
Gilead	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Speakers bureau; Advisory board

Section 4. Intellectual Property – Patents & Copyrights

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☐ Yes

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Dr. Brunetto reports grants and personal fees from BMS, personal fees from Gilead, outside the submitted work.

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Section 1. Identifying Information

1. Given Name (First Name)

Anna Linda

2. Surname (Last Name)

Zignego

3. Date

03-March-2018

4. Are you the corresponding author?

☐ Yes

☒ No

Corresponding Author's Name

Cristina Stasi

5. Manuscript Title

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Dr. Zignego has nothing to disclose.

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

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Royalties: Funds are coming in to you or your institution due to your patent

ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name) Cristina 2. Surname (Last Name) Orsini 3. Date 06-March-2018

4. Are you the corresponding author? ☐ Yes ☒ No Corresponding Author's Name Cristina Stasi

5. Manuscript Title CLINICAL EPIDEMIOLOGY OF CHRONIC VIRAL HEPATITIS B: THE TUSCANY REAL-WORD LARGE-SCALE COHORT STUDY

6. Manuscript Identifying Number (if you know it) 38356

Section 2. The Work Under Consideration for Publication

Did you or your institution at any time receive payment or services from a third party (government, commercial, private foundation, etc.) for any aspect of the submitted work (including but not limited to grants, data monitoring board, study design, manuscript preparation, statistical analysis, etc.)?

Are there any relevant conflicts of interest? ☐ Yes ☒ No

Section 3. Relevant financial activities outside the submitted work.

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Are there any relevant conflicts of interest? ☐ Yes ☒ No

Section 4. Intellectual Property -- Patents & Copyrights

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

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Dr. Orsini has nothing to disclose.

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)
Stefano

2. Surname (Last Name)
Milani

3. Date
02-March-2018

4. Are you the corresponding author?

☐ Yes ☒ No

Corresponding Author's Name
Cristina Stasi

5. Manuscript Title

CLINICAL EPIDEMIOLOGY OF CHRONIC VIRAL HEPATITIS B: THE TUSCANY REAL-WORD LARGE-SCALE COHORT STUDY

6. Manuscript Identifying Number (if you know it)

38356

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Are there any relevant conflicts of interest? ☐ Yes ☒ No

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Are there any relevant conflicts of interest? ☐ Yes ☒ No

Section 4. Intellectual Property -- Patents & Copyrights

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

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Section 5. Relationships not covered above

Are there other relationships or activities that readers could perceive to have influenced, or that give the appearance of potentially influencing, what you wrote in the submitted work?

- ☐ Yes, the following relationships/conditions/circumstances are present (explain below):
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Dr. Milani has nothing to disclose.

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Section 1. Identifying Information

1. Given Name (First Name)

Liana

2. Surname (Last Name)

Ricciardi

3. Date

03-March-2018

4. Are you the corresponding author?

☐ Yes

☒ No

Corresponding Author's Name

Cristina Stasi

5. Manuscript Title

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Are there any relevant conflicts of interest?

☐ Yes

☒ No

ADD

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Are there any relevant conflicts of interest?

☐ Yes

☒ No

ADD

Section 4. Intellectual Property -- Patents & Copyrights

Do you have any patents, whether planned, pending or issued, broadly relevant to the work?

☐ Yes

☒ No



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Section 5.

Relationships not covered above

Are there other relationships or activities that readers could perceive to have influenced, or that give the appearance of potentially influencing, what you wrote in the submitted work?

Yes, the following relationships/conditions/circumstances are present (explain below):

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name) Andrea 2. Surname (Last Name) De Luca 3. Date 28-February-2018

4. Are you the corresponding author? ☐ Yes ☒ No Corresponding Author's Name _____

5. Manuscript Title
A comprehensive development agenda on TAF in clinical practice

6. Manuscript Identifying Number (if you know it) _____

Section 2. The Work Under Consideration for Publication

Did you or your institution at any time receive payment or services from a third party (government, commercial, private foundation, etc.) for any aspect of the submitted work (including but not limited to grants, data monitoring board, study design, manuscript preparation, statistical analysis, etc.)?

Are there any relevant conflicts of interest? ☐ Yes ☒ No

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Are there any relevant conflicts of interest? ☒ Yes ☐ No

If yes, please fill out the appropriate information below.

Name of Entity	Grant?	Personal Fees?	Non-Financial Support?	Other?	Comments
VIV Healthcare	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Gilead	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	fellowship program
VIV Healthcare	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Gilead	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Merck Sharp and Dohme	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Janssen Cilag	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 4. Intellectual Property -- Patents & Copyrights

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

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Section 6. Disclosure Statement

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Dr. De Luca reports grants from Viiv Healthcare, grants from Gilead, personal fees from Viiv Healthcare, personal fees from Gilead, personal fees from Merck Sharp and Dohme, personal fees from Janssen Cilag, outside the submitted work.

Evaluation and Feedback

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)
PIERLUIGI
2. Surname (Last Name)
BLANC
3. Date
01-March-2018
4. Are you the corresponding author? ☐ Yes ☒ No Corresponding Author's Name
Cristina Stasi
5. Manuscript Title
CLINICAL EPIDEMIOLOGY OF CHRONIC VIRAL HEPATITIS B: THE TUSCANY REAL-WORD LARGE-SCALE COHORT STUDY
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Dr. BLANC has nothing to disclose.

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)
NENCIONI

2. Surname (Last Name)
CESIRA

3. Date
01-March-2018

4. Are you the corresponding author?

☐ Yes ☒ No

Corresponding Author's Name
Cristina Stasi

5. Manuscript Title

CLINICAL EPIDEMIOLOGY OF CHRONIC VIRAL HEPATITIS B: THE TUSCANY REAL-WORD LARGE-SCALE COHORT STUDY

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Are there any relevant conflicts of interest? ☐ Yes ☒ No

Section 3. Relevant financial activities outside the submitted work.

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Are there any relevant conflicts of interest? ☐ Yes ☒ No

Section 4. Intellectual Property -- Patents & Copyrights

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Dr. CESIRA has nothing to disclose.

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name) Donatella 2. Surname (Last Name) Aquilini 3. Date 03-March-2018

4. Are you the corresponding author? ☐ Yes ☒ No Corresponding Author's Name Cristina Stasi

5. Manuscript Title
CLINICAL EPIDEMIOLOGY OF CHRONIC VIRAL HEPATITIS B: THE TUSCANY REAL-WORD LARGE-SCALE COHORT STUDY

6. Manuscript Identifying Number (if you know it)

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no conflict of interest

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name) alessandro 2. Surname (Last Name) bartoloni 3. Date 02-March-2018

4. Are you the corresponding author? ☐ Yes ☒ No Corresponding Author's Name Cristina Stasi

5. Manuscript Title
CLINICAL EPIDEMIOLOGY OF CHRONIC VIRAL HEPATITIS B: THE TUSCANY REAL-WORD LARGE-SCALE COHORT STUDY

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Dr. bartoloni has nothing to disclose.

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Section 1. Identifying Information

1. Given Name (First Name)

giampaolo

2. Surname (Last Name)

bresci

3. Date

06-July-1949

4. Are you the corresponding author?

☒ Yes ☐ No

5. Manuscript Title

CLINICAL EPIDEMIOLOGY OF CHRONIC VIRAL HEPATITIS B: THE TUSCANY REAL-WORD LARGE-SCALE COHORT STUDY

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Dr. bresci has nothing to disclose.

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Section 1. Identifying Information

1. Given Name (First Name)

Santino

2. Surname (Last Name)

Marchi

3. Date

19-March-2018

4. Are you the corresponding author?

☐ Yes ☐ No

5. Manuscript Title

CLINICAL EPIDEMIOLOGY OF CHRONIC VIRAL HEPATITIS B: THE TUSCANY REAL-WORLD LARGE-SCALE COHORT STUDY

6. Manuscript Identifying Number (if you know it)

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Section 1. Identifying Information

1. Given Name (First Name)
FRANCO

2. Surname (Last Name)
FILIPPONI

3. Date
03-May-2018

4. Are you the corresponding author? ☐ Yes ☒ No Corresponding Author's Name
Cristina Stasi

5. Manuscript Title
CLINICAL EPIDEMIOLOGY OF CHRONIC VIRAL HEPATITIS B: THE TUSCANY REAL-WORD LARGE-SCALE COHORT STUDY

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Prof. Franco Filippini has nothing to disclose.

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Section 1. Identifying Information

1. Given Name (First Name) Piero 2. Surname (Last Name) Colombatto 3. Date 28-February-2018

4. Are you the corresponding author? ☐ Yes ☒ No Corresponding Author's Name Cristina Stasi

5. Manuscript Title
CLINICAL EPIDEMIOLOGY OF CHRONIC VIRAL HEPATITIS B: THE TUSCANY REAL-WORD LARGE-SCALE COHORT STUDY

6. Manuscript Identifying Number (if you know it)

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Are there any relevant conflicts of interest? ☐ Yes ☒ No

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Section 6. Disclosure Statement

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I have no conflicts of interests relevant to this study

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Section 1. Identifying Information

1. Given Name (First Name)

Paolo

2. Surname (Last Name)

Forte

3. Date

01-March-2018

4. Are you the corresponding author?

☐ Yes

☒ No

Corresponding Author's Name

Cristina Stasi

5. Manuscript Title

CLINICAL EPIDEMIOLOGY OF CHRONIC VIRAL HEPATITIS B: THE TUSCANY REAL-WORD LARGE-SCALE COHORT STUDY

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Dr. Forte has nothing to disclose.

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Section 1. Identifying Information

1. Given Name (First Name)

Andrea

2. Surname (Last Name)

Galli

3. Date

07-March-2018

4. Are you the corresponding author?

☐ Yes

☒ No

Corresponding Author's Name

Cristina Stasi

5. Manuscript Title

CLINICAL EPIDEMIOLOGY OF CHRONIC VIRAL HEPATITIS B: THE TUSCANY REAL-WORD LARGE-SCALE COHORT STUDY

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Professor Andrea Galli has nothing to disclose.

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name) sauro	2. Surname (Last Name) luchi	3. Date 06-March-2018
4. Are you the corresponding author? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
		Corresponding Author's Name Cristina Stasi
5. Manuscript Title CLINICAL EPIDEMIOLOGY OF CHRONIC VIRAL HEPATITIS B: THE TUSCANY REAL-WORD LARGE-SCALE COHORT STUDY		
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Section 1. Identifying Information

1. Given Name (First Name)

CHIGIOTTI

2. Surname (Last Name)

SILVIA

3. Date

20-September-1965

4. Are you the corresponding author?

☐ Yes

☒ No

Corresponding Author's Name

Cristina Stasi

5. Manuscript Title

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)
Alessandro

2. Surname (Last Name)
Nerli

3. Date
01-March-2018

4. Are you the corresponding author? ☐ Yes ☒ No
Corresponding Author's Name
Cristina Stasi

5. Manuscript Title
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Dr. Nerli has nothing to disclose.

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Royalties: Funds are coming in to you or your institution due to your patent

ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name) Giampaolo 2. Surname (Last Name) Corti 3. Date 28-February-2018

4. Are you the corresponding author? ☐ Yes ☒ No Corresponding Author's Name Cristina Stasi

5. Manuscript Title CLINICAL EPIDEMIOLOGY OF CHRONIC VIRAL HEPATITIS B: THE TUSCANY REAL-WORD LARGE-SCALE COHORT STUDY

6. Manuscript Identifying Number (if you know it) 38356

Section 2. The Work Under Consideration for Publication

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Are there any relevant conflicts of interest? ☐ Yes ☒ No

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Are there any relevant conflicts of interest? ☐ Yes ☒ No

Section 4. Intellectual Property -- Patents & Copyrights

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

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)

Rodolfo

2. Surname (Last Name)

Sacco

3. Date

06-March-2018

4. Are you the corresponding author?

☐ Yes

☒ No

Corresponding Author's Name

Cristina Stasi

5. Manuscript Title

CLINICAL EPIDEMIOLOGY OF CHRONIC VIRAL HEPATITIS B: THE TUSCANY REAL-WORD LARGE-SCALE COHORT STUDY

6. Manuscript Identifying Number (if you know it)

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☐ Yes

☒ No

Section 4. Intellectual Property -- Patents & Copyrights

Do you have any patents, whether planned, pending or issued, broadly relevant to the work?

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name) Paola 2. Surname (Last Name) Carrai 3. Date 03-January-2018

4. Are you the corresponding author? ☐ Yes ☒ No Corresponding Author's Name Cristina Stasi

5. Manuscript Title
CLINICAL EPIDEMIOLOGY OF CHRONIC VIRAL HEPATITIS B: THE TUSCANY REAL-WORD LARGE-SCALE COHORT STUDY

6. Manuscript Identifying Number (if you know it)

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Are there any relevant conflicts of interest? ☐ Yes ☒ No

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Are there any relevant conflicts of interest? ☐ Yes ☒ No

Section 4. Intellectual Property -- Patents & Copyrights

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



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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name) Angelo	2. Surname (Last Name) Ricchiuti	3. Date 28-February-2018
4. Are you the corresponding author? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Corresponding Author's Name Cristina Stasi
5. Manuscript Title CLINICAL EPIDEMIOLOGY OF CHRONIC VIRAL HEPATITIS B: THE TUSCANY REAL-WORD LARGE-SCALE COHORT STUDY		
6. Manuscript Identifying Number (if you know it) _____		

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Are there any relevant conflicts of interest? ☐ Yes ☒ No

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Section 4. Intellectual Property -- Patents & Copyrights

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)

MASSIMO

2. Surname (Last Name)

GIUSTI

3. Date

02-March-2018

4. Are you the corresponding author?

☐ Yes

☒ No

Corresponding Author's Name

Cristina Stasi

5. Manuscript Title

CLINICAL EPIDEMIOLOGY OF CHRONIC VIRAL HEPATITIS B: THE TUSCANY REAL-WORD LARGE-SCALE COHORT STUDY

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Dr. GIUSTI has nothing to disclose.

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)

Paolo

2. Surname (Last Name)

Almi

3. Date

02-March-2018

4. Are you the corresponding author?

☐ Yes

☒ No

Corresponding Author's Name

Cristina Stasi

5. Manuscript Title

CLINICAL EPIDEMIOLOGY OF CHRONIC VIRAL HEPATITIS B: THE TUSCANY REAL-WORD LARGE-SCALE COHORT STUDY

6. Manuscript Identifying Number (if you know it)

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Are there any relevant conflicts of interest?

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Are there any relevant conflicts of interest?

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☒ No

Section 4. Intellectual Property -- Patents & Copyrights

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Dr. Almi has nothing to disclose.

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)
Andrea

2. Surname (Last Name)
Cozzi

3. Date
08-March-2018

4. Are you the corresponding author? ☐ Yes ☒ No
Corresponding Author's Name
Cristina Stasi

5. Manuscript Title
CLINICAL EPIDEMIOLOGY OF CHRONIC VIRAL HEPATITIS B: THE TUSCANY REAL-WORD LARGE-SCALE COHORT STUDY

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Are there any relevant conflicts of interest? ☐ Yes ☒ No

Section 4. Intellectual Property – Patents & Copyrights

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)

Silvia

2. Surname (Last Name)

Carloppi

3. Date

20-March-2018

4. Are you the corresponding author?

☐ Yes

☒ No

Corresponding Author's Name

Cristina Stasi

5. Manuscript Title

CLINICAL EPIDEMIOLOGY OF CHRONIC VIRAL HEPATITIS B: THE TUSCANY REAL-WORD LARGE-SCALE COHORT STUDY

6. Manuscript Identifying Number (if you know it)

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Section 4. Intellectual Property -- Patents & Copyrights

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Dr. Carloppi has nothing to disclose.

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)

Giacomo

2. Surname (Last Name)

Laffi

3. Date

07-March-2018

4. Are you the corresponding author?

☐ Yes

☒ No

Corresponding Author's Name

Cristina Stasi

5. Manuscript Title

CLINICAL EPIDEMIOLOGY OF CHRONIC VIRAL HEPATITIS B: THE TUSCANY REAL-WORD LARGE-SCALE COHORT STUDY

6. Manuscript Identifying Number (If you know it)

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Professor Giacomo Laffi has nothing to disclose

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)
Fabio

2. Surname (Last Name)
Voller

3. Date
08-March-2018

4. Are you the corresponding author?

☐ Yes ☒ No

Corresponding Author's Name

Cristina Stasi

5. Manuscript Title

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Dr. Voller has nothing to disclose.

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name) Francesco	2. Surname (Last Name) Cipriani	3. Date 01-March-2018
4. Are you the corresponding author? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Corresponding Author's Name Cristina Stasi
5. Manuscript Title CLINICAL EPIDEMIOLOGY OF CHRONIC VIRAL HEPATITIS B: THE TUSCANY REAL-WORD LARGE-SCALE COHORT STUDY		
6. Manuscript Identifying Number (If you know it) _____		

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Dr. Cipriani has nothing to disclose.

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