ICMJE Form for Disclosure of Potential Conflicts of Interest

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

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)  Rishab
2. Surname (Last Name)  Balaji
3. Date  19-August-2020
4. Are you the corresponding author?  ✗ No

Corresponding Author's Name  Shakila Thangaratinam

5. Manuscript Title  Coronavirus disease (COVID-19) in pregnancy: A living systematic review on clinical manifestations, risk factors, maternal and perinatal outcomes
6. Manuscript Identifying Number (if you know it)

Section 2. The Work Under Consideration for Publication

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Are there any relevant conflicts of interest?  ✗ No

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Dr. Balaji has nothing to disclose.

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Mofenson
ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)  Lynne
2. Surname (Last Name)  Mofenson
3. Date  18-August-2020
4. Are you the corresponding author?  ☑ No

Corresponding Author's Name  Shakila Thangaratinam

5. Manuscript Title  Coronavirus disease (COVID-19) in pregnancy: A living systematic review on clinical manifestations, risk factors, maternal and perinatal outcomes
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.)?  ☑ No

Are there any relevant conflicts of interest?  ☑ No

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Do you have any patents, whether planned, pending or issued, broadly relevant to the work?  ☑ No
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Dr. Mofenson has nothing to disclose.

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<td>3. Date</td>
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<td>4. Are you the corresponding author?</td>
<td>Yes ✔ No</td>
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</tbody>
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**Corresponding Author’s Name**

| Shakila Thangaratinam |

**Manuscript Title**

Coronavirus disease (COVID-19) in pregnancy: A living systematic review on clinical manifestations, risk factors, maternal and perinatal outcomes

**Manuscript Identifying Number**

If you know it, please provide.

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Dr. van Wely has nothing to disclose.

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### Identifying Information

1. Given Name (First Name)  
Nathalie

2. Surname (Last Name)  
Broutet

3. Date  
19-August-2020

4. Are you the corresponding author?  
☐ Yes  ✔ No

5. Manuscript Title  
Coronavirus disease (COVID-19) in pregnancy: A living systematic review on clinical manifestations, risk factors, maternal and perinatal outcomes

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Dr. Broutet has nothing to disclose.

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## Identifying Information

1. Given Name (First Name)  
   Magnus

2. Surname (Last Name)  
   Yap

3. Date  
   19-August-2020

4. Are you the corresponding author?  
   ✔ No

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

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Other: Anything not covered under the previous three boxes

Pending: The patent has been filed but not issued

Issued: The patent has been issued by the agency

Licensed: The patent has been licensed to an entity, whether earning royalties or not

Royalties: Funds are coming in to you or your institution due to your patent
ICMJE Form for Disclosure of Potential Conflicts of Interest

**Section 1. Identifying Information**

1. Given Name (First Name)  
   Siang Ing
2. Surname (Last Name)  
   Lee
3. Date  
   19-August-2020
4. Are you the corresponding author?  
   [ ] Yes  ✔ No
   
   Corresponding Author’s Name  
   Shakila Thangaratinam
5. Manuscript Title  
   Coronavirus disease (COVID-19) in pregnancy: A living systematic review on clinical manifestations, risk factors, maternal and perinatal outcomes
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

---

**Section 4. Intellectual Property -- Patents & Copyrights**

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

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Dr. Lee has nothing to disclose.

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4. **Intellectual Property.**

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name) Simon
2. Surname (Last Name) Tiberi
3. Date 19-August-2020
4. Are you the corresponding author? ☑ No
5. Manuscript Title Coronavirus disease (COVID-19) in pregnancy: A living systematic review on clinical manifestations, risk factors, maternal and perinatal outcomes
6. Manuscript Identifying Number (if you know it)

Corresponding Author’s Name
Shakila Thangaratinam

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Are there any relevant conflicts of interest? ☑ No

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Are there any relevant conflicts of interest? ☑ No

Section 4. Intellectual Property -- Patents & Copyrights

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

Tiberi 2
ICMJE Form for Disclosure of Potential Conflicts of Interest

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Dr. Tiberi has nothing to disclose.

Evaluation and Feedback

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# ICMJE Form for Disclosure of Potential Conflicts of Interest

## Section 1. Identifying Information

1. **Given Name (First Name)**  
   Tania

2. **Surname (Last Name)**  
   Kew

3. **Date**  
   19-August-2020

4. **Are you the corresponding author?**  
   [ ] Yes  
   [x] No

5. **Manuscript Title**  
   Coronavirus disease (COVID-19) in pregnancy: A living systematic review on clinical manifestations, risk factors, maternal and perinatal outcomes

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

## 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?  
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ICMJE Form for Disclosure of Potential Conflicts of Interest

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Ms. Kew has nothing to disclose.

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### Section 1. Identifying Information

1. **Given Name (First Name)**
   - Dengyi

2. **Surname (Last Name)**
   - Zhou

3. **Date**
   - 18-August-2020

4. **Are you the corresponding author?**
   - No

5. **Manuscript Title**
   - Coronavirus disease (COVID-19) in pregnancy: A living systematic review on clinical manifestations, risk factors, maternal and perinatal outcomes

6. **Manuscript Identifying Number (if you know it)**
   - Shikila Thangaratinam

### 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?

### Section 3. Relevant financial activities outside the submitted work.

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Are there any relevant 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
ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 5. Relationships not covered above

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Section 6. Disclosure Statement

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Dr. Zhou 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)  
Luke

2. Surname (Last Name)  
Debenham

3. Date  
19-August-2020

4. Are you the corresponding author?  
☐ Yes  ✔ No

Corresponding Author’s Name  
Shakila Thangaratinam

5. Manuscript Title  
Coronavirus disease (COVID-19) in pregnancy: A living systematic review on clinical manifestations, risk factors, maternal and perinatal outcomes

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Mr. Debenham 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)  
   Rishab

2. Surname (Last Name)  
   Balaji

3. Date  
   19-August-2020

4. Are you the corresponding author?  
   Yes ☐  No ☑

5. Manuscript Title  
   Coronavirus disease (COVID-19) in pregnancy: A living systematic review on clinical manifestations, risk factors, maternal and perinatal outcomes

6. Manuscript Identifying Number (if you know it)

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Are there any relevant conflicts of interest?  
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Dr. Balaji has nothing to disclose.

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Identifying Information

1. Given Name (First Name) Lynne
2. Surname (Last Name) Mofenson
3. Date 18-August-2020
4. Are you the corresponding author? No
5. Manuscript Title Coronavirus disease (COVID-19) in pregnancy: A living systematic review on clinical manifestations, risk factors, maternal and perinatal outcomes
6. Manuscript Identifying Number (if you know it)

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.)? Yes

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van Wely
Section 1. Identifying Information

1. Given Name (First Name)  
   Madelon

2. Surname (Last Name)  
   van Wely

3. Date  
   19-August-2020

4. Are you the corresponding author?  
   ☐ Yes  ☑ No

Corresponding Author's Name  
Shakila Thangaratinam

5. Manuscript Title  
Coronavirus disease (COVID-19) in pregnancy: A living systematic review on clinical manifestations, risk factors, maternal and perinatal outcomes

6. Manuscript Identifying Number (if you know it)

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Dr. van Wely has nothing to disclose.

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<tr>
<td>Nathalie</td>
<td>Broutet</td>
<td>19-August-2020</td>
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4. Are you the corresponding author? [ ] Yes [ ] No

Corresponding Author’s Name
Shakila Thangaratinam

5. Manuscript Title
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Dr. Broutet 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) Magnus
2. Surname (Last Name) Yap
3. Date 19-August-2020

4. Are you the corresponding author? ☑ No

Corresponding Author's Name Shakila Thangaratinam

5. Manuscript Title Coronavirus disease (COVID-19) in pregnancy: A living systematic review on clinical manifestations, risk factors, maternal and perinatal outcomes
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<tr>
<td>Siang Ing</td>
<td>Lee</td>
<td>19-August-2020</td>
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4. Are you the corresponding author?  
   ✔ Yes  
   No

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

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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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Section 1. Identifying Information

1. Given Name (First Name)  Simon

2. Surname (Last Name)  Tiberi

3. Date  19-August-2020

4. Are you the corresponding author?  Yes  No

5. Manuscript Title
Coronavirus disease (COVID-19) in pregnancy: A living systematic review on clinical manifestations, risk factors, maternal and perinatal outcomes

6. Manuscript Identifying Number (if you know it)

Section 2. The Work Under Consideration for Publication

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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

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. Tiberi has nothing to disclose.

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1. **Given Name (First Name)**
   - Tania

2. **Surname (Last Name)**
   - Kew

3. **Date**
   - 19-August-2020

4. **Are you the corresponding author?**
   - Yes

   - No

   - **Corresponding Author’s Name**
     - Shakila Thangaratinam

5. **Manuscript Title**
   - Coronavirus disease (COVID-19) in pregnancy: A living systematic review on clinical manifestations, risk factors, maternal and perinatal outcomes

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

### Section 2. The Work Under Consideration for Publication

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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

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- Yes

- No
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Ms. Kew has nothing to disclose.

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Section 1. Identifying Information

1. Given Name (First Name) Dengyi
2. Surname (Last Name) Zhou
3. Date 18-August-2020
4. Are you the corresponding author? ☑ No

Corresponding Author’s Name Shakila Thangaratinam

5. Manuscript Title Coronavirus disease (COVID-19) in pregnancy: A living systematic review on clinical manifestations, risk factors, maternal and perinatal outcomes
6. Manuscript Identifying Number (if you know it)

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Dr. Zhou has nothing to disclose.

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<thead>
<tr>
<th>1. Given Name (First Name)</th>
<th>2. Surname (Last Name)</th>
<th>3. Date</th>
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</thead>
<tbody>
<tr>
<td>Luke</td>
<td>Debenham</td>
<td>19-August-2020</td>
</tr>
</tbody>
</table>

4. Are you the corresponding author?  
☐ Yes  ☑ No

5. Manuscript Title  
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Mr. Debenham has nothing to disclose.

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