Conflict of Interest

The purpose of this form is to provide readers of your paper with information about your other interests that could influence how they receive and understand your work. Each author should submit a separate form and is responsible for the accuracy and completeness of the submitted information. The form has six parts. Don't scan this copy

Section 1: Identifying Information

- 1. Your First Name: Middle Name: Family Name:
- 2. Are the Corresponding Author

Yes No If No, then name the Corresponding Author

- 3. Manuscript Title:
- 4. Manuscript ID:

Section 2: The work under consideration for publication

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

If yes, please fill out the appropriate information below.

Name of Institution/Company	Grant?	Personal fees	Non-financial support	Others	Comment

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

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