ICMJE Form for Disclosure of Potential Conflicts of Interest

Instructions

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<thead>
<tr>
<th>Question</th>
<th>Answer</th>
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<tr>
<td>1. Given Name (First Name)</td>
<td>Charles</td>
</tr>
<tr>
<td>2. Surname (Last Name)</td>
<td>Yu</td>
</tr>
<tr>
<td>3. Date</td>
<td>18-January-2020</td>
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<tr>
<td>4. Are you the corresponding author?</td>
<td>No</td>
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<td>5. Manuscript Title</td>
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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 ✔

### 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. Yu has nothing to disclose.

Evaluation and Feedback

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<thead>
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<th>1. Given Name (First Name)</th>
<th>Michael</th>
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<tbody>
<tr>
<td>2. Surname (Last Name)</td>
<td>Mahan</td>
</tr>
<tr>
<td>3. Date</td>
<td>09-April-1987</td>
</tr>
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<td>4. Are you the corresponding author?</td>
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Dr. Mahan has nothing to disclose.

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**Section 1. Identifying Information**

1. Given Name (First Name)  
   Ira

2. Surname (Last Name)  
   Zaltz

3. Date  
   23-March-2020

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

   Corresponding Author’s Name  
   Chad Mahan

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

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1. Given Name (First Name)  
   Marnix

2. Surname (Last Name)  
   Van Holsbeeck

3. Date  
   20-February-2020

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

   Corresponding Author’s Name  
   M Chad Mahan

5. Manuscript Title  
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1. Given Name (First Name)  
   Rachel

2. Surname (Last Name)  
   Shields

3. Date  
   18-January-2020

4. Are you the corresponding author?  
   [ ] Yes  [x] No  
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   M Chad Mahan

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Dr. Shields has nothing to disclose.

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