

ICMJE Form for Disclosure of Potential Conflicts of Interest

Instructions

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Section 1. Identifying Information

1. Given Name (First Name) Ruhua	2. Surname (Last Name) Zheng	3. Date 08-August-2020
4. Are you the corresponding author? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Corresponding Author's Name Xiaoping Zou & Guoping He
5. Manuscript Title Development and validation of a risk prediction model and scoring system for post-endoscopic retrograde cholangiopancreatography pancreatitis		
6. Manuscript Identifying Number (if you know it) ATM-20-5769		

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Dr. Zheng has nothing to disclose.

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1. Given Name (First Name) Mengjie	2. Surname (Last Name) Chen	3. Date 08-August-2020
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1. Given Name (First Name) Xuying	2. Surname (Last Name) Wang	3. Date 08-August-2020
4. Are you the corresponding author? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Corresponding Author's Name Xiaoping Zou & Guoping He
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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1.

Identifying Information

1. Given Name (First Name)

Lei

2. Surname (Last Name)

Wang

3. Date

08-August-2020

4. Are you the corresponding author?

☐ Yes

☒ No

Corresponding Author's Name

Xiaoping Zou & Guoping He

5. Manuscript Title

Development and validation of a risk prediction model and scoring system for post-endoscopic retrograde cholangiopancreatography pancreatitis

6. Manuscript Identifying Number (if you know it)

ATM-20-5769

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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Section 6. Disclosure Statement

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Dr. Wang 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) Guifang	2. Surname (Last Name) Xu	3. Date 08-August-2020
4. Are you the corresponding author? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Corresponding Author's Name Xiaoping Zou & Guoping He
5. Manuscript Title Development and validation of a risk prediction model and scoring system for post-endoscopic retrograde cholangiopancreatography pancreatitis		
6. Manuscript Identifying Number (if you know it) ATM-20-5769		

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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

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name) Yuling	2. Surname (Last Name) Yao	3. Date 08-August-2020
4. Are you the corresponding author? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Corresponding Author's Name Xiaoping Zou & Guoping He
5. Manuscript Title Development and validation of a risk prediction model and scoring system for post-endoscopic retrograde cholangiopancreatography pancreatitis		
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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name) Jun	2. Surname (Last Name) Cao	3. Date 08-August-2020
4. Are you the corresponding author? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Corresponding Author's Name Xiaoping Zou & Guoping He
5. Manuscript Title Development and validation of a risk prediction model and scoring system for post-endoscopic retrograde cholangiopancreatography pancreatitis		
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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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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

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Dr. Cao has nothing to disclose.

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ICMJE Form for Disclosure of Potential Conflicts of Interest

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1. Given Name (First Name) Yonghua	2. Surname (Last Name) Shen	3. Date 08-August-2020
4. Are you the corresponding author? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Corresponding Author's Name Xiaoping Zou & Guoping He
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Dr. Wang 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)

Hao

2. Surname (Last Name)

Zhu

3. Date

08-August-2020

4. Are you the corresponding author?

☐ Yes

☒ No

Corresponding Author's Name

Xiaoping Zou & Guoping He

5. Manuscript Title

Development and validation of a risk prediction model and scoring system for post-endoscopic retrograde cholangiopancreatography pancreatitis

6. Manuscript Identifying Number (if you know it)

ATM-20-5769

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name) Bin	2. Surname (Last Name) Zhang	3. Date 08-August-2020
4. Are you the corresponding author? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Corresponding Author's Name Xiaoping Zou & Guoping He
5. Manuscript Title Development and validation of a risk prediction model and scoring system for post-endoscopic retrograde cholangiopancreatography pancreatitis		
6. Manuscript Identifying Number (if you know it) ATM-20-5769		

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

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)

Han

2. Surname (Last Name)

Wu

3. Date

08-August-2020

4. Are you the corresponding author?

☐ Yes

☒ No

Corresponding Author's Name

Xiaoping Zou & Guoping He

5. Manuscript Title

Development and validation of a risk prediction model and scoring system for post-endoscopic retrograde cholangiopancreatography pancreatitis

6. Manuscript Identifying Number (if you know it)

ATM-20-5769

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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?

☐ Yes

☒ No

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)

Xiaoping

2. Surname (Last Name)

Zou

3. Date

08-August-2020

4. Are you the corresponding author?

☒ Yes ☐ No

5. Manuscript Title

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6. Manuscript Identifying Number (if you know it)

ATM-20-5769

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Dr. Zou has nothing to disclose.

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1.

Identifying Information

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Guoping

2. Surname (Last Name)

He

3. Date

08-August-2020

4. Are you the corresponding author?

☒ Yes ☐ No

5. Manuscript Title

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