

Instructions

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

patent

Zhou 1



| Section 1. Identifying Inforn | nation | |
|--|---|--|
| 1. Given Name (First Name) Jianmeng | 2. Surname (Last Name) Zhou | 3. Date 31-March-2020 |
| 4. Are you the corresponding author? | ☐ Yes ✓ No | Corresponding Author's Name Kefang Lai |
| 5. Manuscript Title The efficacy and safety of azithromycin | in chronic respiratory dise | eases related cough |
| 6. Manuscript Identifying Number (if you ki APM-20-119 | now it) | |
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| Do you have any patents, whether plan | | |

Zhou 2



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Yi 1



| Section 1. Identifying In | formation | |
|---|---|---|
| 1. Given Name (First Name) Fang | 2. Surname (Last Name) Yi | 3. Date 31-March-2020 |
| 4. Are you the corresponding author? | ☐ Yes ✓ No | Corresponding Author's Name Kefang Lai |
| 5. Manuscript Title The efficacy and safety of azithron | nycin in chronic respiratory dise | eases related cough |
| 6. Manuscript Identifying Number (if y APM-20-119 | ou know it) | |
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| Section 2. The Work Und | er Consideration for Publi | cation |
| any aspect of the submitted work (incl statistical analysis, etc.)? Are there any relevant conflicts of | uding but not limited to grants, do | a third party (government, commercial, private foundation, etc.) for ata monitoring board, study design, manuscript preparation, |
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| Do you have any patents, whether | planned, pending or issued, b | roadly relevant to the work? Yes No |

Yi 2



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Xu 1



| Section 1. Identifying Inforn | nation | |
|--|---|--|
| 1. Given Name (First Name) Zhiheng | 2. Surname (Last Name) Xu | 3. Date 31-March-2020 |
| 4. Are you the corresponding author? | ☐ Yes ✓ No | Corresponding Author's Name Kefang Lai |
| 5. Manuscript Title The efficacy and safety of azithromycin | in chronic respiratory dise | ases related cough |
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Xu 2



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Huang 1



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Huang 2



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| 1. Given Name (First Name) Xiaomei | 2. Surname (Last Name) Chen | 3. Date 31-March-2020 |
| 4. Are you the corresponding author? | ☐ Yes ✓ No | Corresponding Author's Name Kefang Lai |
| 5. Manuscript Title The efficacy and safety of azithromycin | in chronic respiratory dise | eases related cough |
| 6. Manuscript Identifying Number (if you kn APM-20-119 | now it) | |
| | | |
| Section 2. The Work Under C | onsideration for Public | cation |
| | g but not limited to grants, da | a third party (government, commercial, private foundation, etc.) for at a monitoring board, study design, manuscript preparation, |
| Section 3. Relevant financial | activities outside the s | submitted work. |
| of compensation) with entities as descr | ibed in the instructions. Us port relationships that wer | ether you have financial relationships (regardless of amount se one line for each entity; add as many lines as you need by re present during the 36 months prior to publication. |
| Section 4. Intellectual Proper | rty Patents & Copyric | ghts |
| Do you have any patents, whether plan | | |

Chen 2



| Section 5. Polationships not sovered above |
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| Yes, the following relationships/conditions/circumstances are present (explain below): |
| ✓ No other relationships/conditions/circumstances that present a potential conflict of interest |
| At the time of manuscript acceptance, journals will ask authors to confirm and, if necessary, update their disclosure statements On occasion, journals may ask authors to disclose further information about reported relationships. |
| Section 6. Disclosure Statement |
| Disclosure Statement |
| Based on the above disclosures, this form will automatically generate a disclosure statement, which will appear in the box below. |
| Dr. Chen has nothing to disclose. |

Evaluation and Feedback

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Chen 3



Instructions

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.

Identifying information.

The work under consideration for publication.

This section asks for information about the work that you have submitted for publication. The time frame for this reporting is that of the work itself, from the initial conception and planning to the present. The requested information is about resources that you received, either directly or indirectly (via your institution), to enable you to complete the work. Checking "No" means that you did the work without receiving any financial support from any third party -- that is, the work was supported by funds from the same institution that pays your salary and that institution did not receive third-party funds with which to pay you. If you or your institution received funds from a third party to support the work, such as a government granting agency, charitable foundation or commercial sponsor, check

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For grants you have received for work outside the submitted work, you should disclose support ONLY from entities that could be perceived to be affected financially by the published work, such as drug companies, or foundations supported by entities that could be perceived to have a financial stake in the outcome. Public funding sources, such as government agencies, charitable foundations or academic institutions, need not be disclosed. For example, if a government agency sponsored a study in which you have been involved and drugs were provided by a pharmaceutical company, you need only list the pharmaceutical company.

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

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Definitions.

Entity: government agency, foundation, commercial sponsor, academic institution, etc.

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Personal Fees: Monies paid to you for services rendered, generally honoraria, royalties, or fees for consulting, lectures, speakers bureaus, expert testimony, employment, or other affiliations

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

patent

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| Section 1. | unation. | |
|---|--|--------------------------|
| Identifying Inform | nation | |
| Given Name (First Name) Kefang | 2. Surname (Last Name) Lai | 3. Date 31-March-2020 |
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| | | |
| Section 2. The Work Under C | Consideration for Publication | |
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Lai 2



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Lai 3