

ICMJE Form for Disclosure of Potential Conflicts of Interest

Instructions

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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) Lijun	2. Surname (Last Name) He	3. Date 26-August-2020
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Xuan Liao
5. Manuscript Title Changes in visual function and quality of life in patients with senile cataract following phacoemulsification		
6. Manuscript Identifying Number (if you know it) APM-20-1709		

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Dr. He has nothing to disclose.

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1. Given Name (First Name) Yinjuan	2. Surname (Last Name) Cui	3. Date 26-August-2020
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Xuan Liao
5. Manuscript Title Changes in visual function and quality of life in patients with senile cataract following phacoemulsification		
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1. Given Name (First Name) Xiaoli	2. Surname (Last Name) Tang	3. Date 26-August-2020
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Xuan Liao
5. Manuscript Title Changes in visual function and quality of life in patients with senile cataract following phacoemulsification		
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4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Xuan Liao
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1. Given Name (First Name) Qin	2. Surname (Last Name) Huang	3. Date 26-August-2020
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Xuan Liao
5. Manuscript Title Changes in visual function and quality of life in patients with senile cataract following phacoemulsification		
6. Manuscript Identifying Number (if you know it) APM-20-1709		

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

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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Dr. Huang 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) Haiyan	2. Surname (Last Name) Lei	3. Date 26-August-2020
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Xuan Liao
5. Manuscript Title Changes in visual function and quality of life in patients with senile cataract following phacoemulsification		
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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

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1. Given Name (First Name) Hui	2. Surname (Last Name) Li	3. Date 26-August-2020
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Section 1. Identifying Information

1. Given Name (First Name)

Xuan

2. Surname (Last Name)

Liao

3. Date

26-August-2020

4. Are you the corresponding author?

Yes No

5. Manuscript Title

Changes in visual function and quality of life in patients with senile cataract following phacoemulsification

6. Manuscript Identifying Number (if you know it)

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