

## ICMJE Form for Disclosure of Potential Conflicts of Interest

### Instructions

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## ICMJE Form for Disclosure of Potential Conflicts of Interest

### Section 1. Identifying Information

1. Given Name (First Name)  
Cuncun

2. Surname (Last Name)  
Lu

3. Date  
15-June-2020

4. Are you the corresponding author?

Yes  No

Corresponding Author's Name  
Kehu Yang, Long Ge

5. Manuscript Title  
Coronavirus disease (COVID 2019): Protocol for a living overview of systematic reviews

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APM-20-1130

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Dr. Lu has nothing to disclose.

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1. Given Name (First Name) Tingting	2. Surname (Last Name) Lu	3. Date 15-June-2020
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Kehu Yang, Long Ge
5. Manuscript Title Coronavirus disease (COVID 2019): Protocol for a living overview of systematic reviews		
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1. Given Name (First Name)  
Bei

2. Surname (Last Name)  
Pan

3. Date  
15-June-2020

4. Are you the corresponding author?

Yes  No

Corresponding Author's Name  
Kehu Yang, Long Ge

5. Manuscript Title  
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1. Given Name (First Name) Qi	2. Surname (Last Name) Wang	3. Date 15-June-2020
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Kehu Yang, Long Ge
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**Royalties:** Funds are coming in to you or your institution due to your patent



## ICMJJE Form for Disclosure of Potential Conflicts of Interest

### Section 1. Identifying Information

1. Given Name (First Name) Qian	2. Surname (Last Name) Zhang	3. Date 15-June-2020
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Kehu Yang, Long Ge
5. Manuscript Title Coronavirus disease (COVID 2019): Protocol for a living overview of systematic reviews		
6. Manuscript Identifying Number (if you know it) APM-20-1130		

### 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

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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

## ICMJE Form for Disclosure of Potential Conflicts of Interest

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### Section 5. Relationships not covered above

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### Section 6. Disclosure Statement

Based on the above disclosures, this form will automatically generate a disclosure statement, which will appear in the box below.

Dr. Zhang has nothing to disclose.

### Evaluation and Feedback

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## ICMJE Form for Disclosure of Potential Conflicts of Interest

### Section 1. Identifying Information

1. Given Name (First Name) Yunhua	2. Surname (Last Name) Wang	3. Date 15-June-2020
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Kehu Yang, Long Ge
5. Manuscript Title Coronavirus disease (COVID 2019): Protocol for a living overview of systematic reviews		
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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)  
Yihui

2. Surname (Last Name)  
Wang

3. Date  
15-June-2020

4. Are you the corresponding author?

Yes  No

Corresponding Author's Name  
Kehu Yang, Long Ge

5. Manuscript Title  
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6. Manuscript Identifying Number (if you know it)  
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Dr. Wang has nothing to disclose.

### Evaluation and Feedback

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## ICMJE Form for Disclosure of Potential Conflicts of Interest

### Section 1. Identifying Information

1. Given Name (First Name) Xiuxia	2. Surname (Last Name) Li	3. Date 15-June-2020
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Kehu Yang, Long Ge
5. Manuscript Title Coronavirus disease (COVID 2019): Protocol for a living overview of systematic reviews		
6. Manuscript Identifying Number (if you know it) APM-20-1130		

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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

## ICMJE Form for Disclosure of Potential Conflicts of Interest

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### Section 6. Disclosure Statement

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Dr. Li has nothing to disclose.

### Evaluation and Feedback

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## ICMJE Form for Disclosure of Potential Conflicts of Interest

### Section 1. Identifying Information

1. Given Name (First Name) Yue	2. Surname (Last Name) Ruan	3. Date 15-June-2020
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Kehu Yang, Long Ge
5. Manuscript Title Coronavirus disease (COVID 2019): Protocol for a living overview of systematic reviews		
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Dr. Ruan 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) Lian	2. Surname (Last Name) Chen	3. Date 15-June-2020
4. Are you the corresponding author? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Corresponding Author's Name
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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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## 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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## ICMJE Form for Disclosure of Potential Conflicts of Interest

### Section 1. Identifying Information

1. Given Name (First Name) Honghao	2. Surname (Last Name) Lai	3. Date 15-June-2020
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Kehu Yang, Long Ge
5. Manuscript Title Coronavirus disease (COVID 2019): Protocol for a living overview of systematic reviews		
6. Manuscript Identifying Number (if you know it) APM-20-1130		

### 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

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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

## ICMJE Form for Disclosure of Potential Conflicts of Interest

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Dr. Lai 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) Tianzhu	2. Surname (Last Name) Qin	3. Date 15-June-2020
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Kehu Yang, Long Ge
5. Manuscript Title Coronavirus disease (COVID 2019): Protocol for a living overview of systematic reviews		
6. Manuscript Identifying Number (if you know it) APM-20-1130		

### 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

## ICMJE Form for Disclosure of Potential Conflicts of Interest

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### Section 5. Relationships not covered above

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Dr. Qin 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)  
Long

2. Surname (Last Name)  
Ge

3. Date  
15-June-2020

4. Are you the corresponding author?  Yes  No

5. Manuscript Title  
Coronavirus disease (COVID 2019): Protocol for a living overview of systematic reviews

6. Manuscript Identifying Number (if you know it)  
APM-20-1130

### Section 2. The Work Under Consideration for Publication

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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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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

## ICMJE Form for Disclosure of Potential Conflicts of Interest

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### Section 5. Relationships not covered above

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Dr. Ge 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)  
Kehu

2. Surname (Last Name)  
Yang

3. Date  
15-June-2020

4. Are you the corresponding author?  Yes  No

5. Manuscript Title  
Coronavirus disease (COVID 2019): Protocol for a living overview of systematic reviews

6. Manuscript Identifying Number (if you know it)  
APM-20-1130

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Are there any relevant conflicts of interest?  Yes  No

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