Date:	_2022/11/9
Your Name:	Xinming Yang
Manuscript Title:	The treatment of post-stroke dysarthria with a combination of different acupuncture
types and language	rehabilitation training: a systematic review and network meta-analysis
Manuscript number (	if known):

In the interest of transparency, we ask you to disclose all relationships/activities/interests listed below that are related to the content of your manuscript. "Related" means any relation with for-profit or not-for-profit third parties whose interests may be affected by the content of the manuscript. Disclosure represents a commitment to transparency and does not necessarily indicate a bias. If you are in doubt about whether to list a relationship/activity/interest, it is preferable that you do so.

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		Name all entities with whom you have this relationship or indicate none (add rows as needed)  Time frame: Since the initial	Specifications/Comments (e.g., if payments were made to you or to your institution)  planning of the work
1	All support for the present manuscript (e.g., funding, provision of study materials, medical writing, article processing charges, etc.)  No time limit for this item.	XNone	
		Time frame: past	36 months
2	Grants or contracts from any entity (if not indicated in item #1 above).	XNone	
3	Royalties or licenses	XNone	
4	Consulting fees	XNone	

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5	Payment or honoraria for	XNone	
	lectures, presentations,		
	speakers bureaus,		
	manuscript writing or		
	educational events		
6	Payment for expert	XNone	
	testimony		
7	Support for attending	X None	
,	meetings and/or travel		
	meetings and/or traver		
8	Patents planned, issued or	X None	
	pending		
	F		
9	Participation on a Data	X None	
,	Safety Monitoring Board or	XNONE	
	Advisory Board		
40	-	V N	
10	Leadership or fiduciary role	XNone	
	in other board, society,		
	committee or advocacy		
	group, paid or unpaid		
11	Stock or stock options	XNone	
12	Receipt of equipment,	X None	
	materials, drugs, medical		
	writing, gifts or other		
	services		
13	Other financial or non-	X None	
13	financial interests	XNOTIE	
	ililaliciai iliterests		

None			

Please place an "X" next to the following statement to indicate your agreement:

Date:	_2022/11/9
Your Name:	Lei Shi
Manuscript Title:	The treatment of post-stroke dysarthria with a combination of different acupuncture
types and language	rehabilitation training: a systematic review and network meta-analysis
Manuscript number (	if known):

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3	Royalties or licenses	XNone	
4	Consulting fees	XNone	

5	Payment or honoraria for	X None	
	lectures, presentations,		
	speakers bureaus,		
	manuscript writing or		
	educational events		
6	Payment for expert	XNone	
	testimony		
7	Support for attending	X None	
/	meetings and/or travel	xnone	
	meetings and/or traver		
8	Patents planned, issued or	XNone	
	pending		
9	Participation on a Data	XNone	
	Safety Monitoring Board or		
10	Advisory Board	V N	
10	Leadership or fiduciary role in other board, society,	XNone	
	committee or advocacy		
	group, paid or unpaid		
11	Stock or stock options	X None	
	,		
12	Receipt of equipment,	XNone	
	materials, drugs, medical		
	writing, gifts or other services		
13	Other financial or non-	X None	
	financial interests		

None			

Please place an "X" next to the following statement to indicate your agreement:

Date:	_2022/11/9
Your Name:	Dawei Ran
Manuscript Title:	The treatment of post-stroke dysarthria with a combination of different acupuncture
types and language	rehabilitation training: a systematic review and network meta-analysis
Manuscript number (	if known):

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3	Royalties or licenses	XNone	
4	Consulting fees	XNone	

5	Payment or honoraria for	XNone	
	lectures, presentations,		
	speakers bureaus,		
	manuscript writing or		
	educational events		
6	Payment for expert	X None	
	testimony		
7	Support for attending	X None	
	meetings and/or travel		
	,		
8	Patents planned, issued or	XNone	
	pending		
9	Participation on a Data	X None	
	Safety Monitoring Board or		
	Advisory Board		
10	Leadership or fiduciary role	X None	
	in other board, society,		
	committee or advocacy		
	group, paid or unpaid		
11	Stock or stock options	X None	
	Stock of Stock options	XNone	
12	Receipt of equipment,	X None	
	materials, drugs, medical	XNone	
	writing, gifts or other		
	services		
13	Other financial or non-	X None	
	financial interests		

None		

Please place an "X" next to the following statement to indicate your agreement:

Date:	_2022/11/9
Your Name:	Menghan Li
Manuscript Title:	The treatment of post-stroke dysarthria with a combination of different acupuncture
types and languag	rehabilitation training: a systematic review and network meta-analysis
Manuscript number	if known):

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		Time frame: past	36 months
2	Grants or contracts from any entity (if not indicated in item #1 above).	XNone	
3	Royalties or licenses	XNone	
4	Consulting fees	XNone	

5	Payment or honoraria for lectures, presentations,	XNone	
	speakers bureaus,		
	manuscript writing or		
	educational events		
6	Payment for expert	XNone	
	testimony		
7	Support for attending meetings and/or travel	XNone	
	,		
8	Patents planned, issued or	XNone	
	pending		
9	Participation on a Data	XNone	
	Safety Monitoring Board or		
	Advisory Board		
10	Leadership or fiduciary role	XNone	
	in other board, society,		
	committee or advocacy		
	group, paid or unpaid		
11	Stock or stock options	XNone	
12	Receipt of equipment,	XNone	
	materials, drugs, medical		
	writing, gifts or other		
	services		
13	Other financial or non-	XNone	
	financial interests		

None			

Please place an "X" next to the following statement to indicate your agreement:

Date:	_2022/11/9
Your Name:	Chenyang Qin
Manuscript Title:	The treatment of post-stroke dysarthria with a combination of different acupuncture
types and language	rehabilitation training: a systematic review and network meta-analysis
Manuscript number (i	if known):

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3	Royalties or licenses	XNone	
4	Consulting fees	XNone	

5	Payment or honoraria for lectures, presentations,	XNone	
	speakers bureaus, manuscript writing or educational events		
6	Payment for expert testimony	XNone	
7	Support for attending meetings and/or travel	XNone	
8	Patents planned, issued or pending	XNone	
9	Participation on a Data	XNone	
	Safety Monitoring Board or Advisory Board		
10	Leadership or fiduciary role	XNone	
	in other board, society, committee or advocacy group, paid or unpaid		
11	Stock or stock options	XNone	
12	Receipt of equipment,	X None	
12	materials, drugs, medical	XNone	
	writing, gifts or other services		
13	Other financial or non- financial interests	XNone	

None			

Please place an "X" next to the following statement to indicate your agreement:

Date:	_2022/11/9
Your Name:	Zimeng An
Manuscript Title:	The treatment of post-stroke dysarthria with a combination of different acupuncture
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Manuscript number (i	f known):

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3	Royalties or licenses	XNone	
4	Consulting fees	XNone	

5	Payment or honoraria for lectures, presentations,	XNone	
	speakers bureaus, manuscript writing or educational events		
6	Payment for expert testimony	XNone	
7	Support for attending meetings and/or travel	XNone	
8	Patents planned, issued or pending	XNone	
9	Participation on a Data	XNone	
	Safety Monitoring Board or Advisory Board		
10	Leadership or fiduciary role	XNone	
	in other board, society, committee or advocacy group, paid or unpaid		
11	Stock or stock options	XNone	
12	Receipt of equipment,	X None	
12	materials, drugs, medical	XNone	
	writing, gifts or other services		
13	Other financial or non- financial interests	XNone	

None			

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