

#### 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.

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Continu 1		
Section 1. Identifying Inform	nation	
1. Given Name (First Name) Bingyao	2. Surname (Last Name) Tan	3. Date 18-May-2020
4. Are you the corresponding author?	Yes 🖌 No	Corresponding Author's Name Leopold Schmetterer
5. Manuscript Title Approaches to quantify OCTA metrics		
6. Manuscript Identifying Number (if you kr ATM-2020-OCT-03(ATM-20-3246)	now it)	-
Section 2. The Work Under C		
The Work Under Co	onsideration for Public	tation
any aspect of the submitted work (including statistical analysis, etc.)? Are there any relevant conflicts of intere	g but not limited to grants, da	a third party (government, commercial, private foundation, etc.) for ta monitoring board, study design, manuscript preparation,
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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 e <b>present during the 36 months prior to publication</b> .
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Do you have any patents, whether plan	ned, pending or issued, br	oadly relevant to the work? Yes 🖌 No



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# Section 6. Disclosure Statement

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Dr. Tan has nothing to disclose.

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patent

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4. Are you the cor	responding author?	Yes 🖌 No		Corresponding Author's Name Leopold Schmetterer	
5. Manuscript Title Approaches to q	e Juantify OCTA metrics				
	ntifying Number (if you kn 03(ATM-20-3246)	iow it)			
Section 2.	The Work Under Co	onsiderat	tion for Public	ation	
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Section 4.	Intellectual Proper	tv Pate	ents & Copyria	hts	

Do you have any patents, whether planned, pending or issued, broadly relevant to the work? Yes V No



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Dr. Ranele has nothing to disclose.

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1. Given Name (Fin Jacqueline	rst Name)	2. Surname (Last Name) Chua		3. Date 18-May-2020		
4. Are you the cor	responding author?	Yes	✓ No	Corresponding Author's Name		
5. Manuscript Title Approaches to q	e uantify OCTA metrics					
6. Manuscript Ider	ntifying Number (if you kn	iow it)				
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Do you have any	patents, whether plan	ned, pendir	ng or issued, bro	oadly relevant to the work? 🗌 Yes 🖌 No		



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Dr. Chua has nothing to disclose.

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1. Given Name (First Name) Damon	2. Surname (Last Name) Wong	3. Date 18-May-2020			
4. Are you the corresponding author?	Yes 🖌 No	Corresponding Author's Name Leopold Schmetterer			
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Do you have any patents, whether plan					



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1. Given Name (First Name) XINWEN	2. Surname (Last Name) YAO	3. Date 18-May-2020			
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#### **Evaluation and Feedback**



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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.

### 1. Identifying information.

## 2. 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 "Yes".

# 3. Relevant financial activities outside the submitted work.

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Section 1.					
Identifying Ir	Identifying Information				
1. Given Name (First Name) Doreen	2. Surname (Last Name) Schmidl	3. Date 18-May-2020			
4. Are you the corresponding author	? Yes 🖌 No	Corresponding Author's Name Leopold Schmetterer			
5. Manuscript Title Approaches to quantify OCTA me	trics				
6. Manuscript Identifying Number (if ATM-2020-OCT-03(ATM-20-3246)	-	_			
Section 2. The Work Unit					
The Work Une	der Consideration for Public	ation			
Did you or your institution <b>at any time</b> 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 V No					
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Do you have any patents, whethe	r planned, pending or issued, br	oadly relevant to the work? 🗌 Yes 🛛 🖌 No			



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Dr. Schmidl has nothing to disclose.

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Section 1.	Identifying Inform	nation			
1. Given Name (Fin René	e (First Name) 2. Surname (Last Name) Werkmeister		3. Date 18-May-2020		
4. Are you the cor	responding author?	Yes 🖌 No	Corresponding Author's Name Leopold Schmetterer		
5. Manuscript Title Approaches to q	e uantify OCTA metrics				
	ntifying Number (if you kr 03(ATM-20-3246)	now it)	_		
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Do you have any	patents, whether plan	ned, pending or issued, b	roadly relevant to the work? Yes 🖌 No		



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Do you have any	patents, whether plan	ned, pending or is	ssued, broadly relev	ant to the work?	Yes	✓ No	



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