

## 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) Meng	2. Surname (Last Name) Yuan	3. Date 10-June-2020
4. Are you the corresponding author? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Corresponding Author's Name Haotian Lin
5. Manuscript Title Exploring the Growth Patterns of Medical Demand for Eye Care: A Longitudinal Hospital-level Study Over Ten Years In China		
6. Manuscript Identifying Number (if you know it) ATM-20-2939		

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Are there any relevant conflicts of interest? ☐ Yes ☒ No

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I am attending the internships at ZOC

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Dr. Yuan reports and I am attending the internships at ZOC.

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1. Given Name (First Name) Wenben	2. Surname (Last Name) Chen	3. Date 10-June-2020
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### Section 1.

#### Identifying Information

1. Given Name (First Name)

Ting

2. Surname (Last Name)

Wang

3. Date

10-June-2020

4. Are you the corresponding author?

☐ Yes

☒ No

Corresponding Author's Name

Haotian Lin

5. Manuscript Title

Exploring the Growth Patterns of Medical Demand for Eye Care: A Longitudinal Hospital-level Study Over Ten Years In China

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an undergraduate of PhD at ZOC

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Dr. Song has nothing to disclose.

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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)

Chuan

2. Surname (Last Name)

Chen

3. Date

10-June-2020

4. Are you the corresponding author?

☐ Yes

☒ No

Corresponding Author's Name

Haotian Lin

5. Manuscript Title

Exploring the Growth Patterns of Medical Demand for Eye Care: A Longitudinal Hospital-level Study Over Ten Years In China

6. Manuscript Identifying Number (if you know it)

ATM-20-2939

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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

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#### 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. Chen 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) Yahan	2. Surname (Last Name) Yang	3. Date 10-June-2020
4. Are you the corresponding author? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Corresponding Author's Name Haotian Lin
5. Manuscript Title Exploring the Growth Patterns of Medical Demand for Eye Care: A Longitudinal Hospital-level Study Over Ten Years In China		
6. Manuscript Identifying Number (if you know it) ATM-20-2939		

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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

---

### Section 5.

#### Relationships not covered above

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an undergraduate of PhD at ZOC

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Dr. Yang reports and an undergraduate of PhD at ZOC.

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## ICMJE Form for Disclosure of Potential Conflicts of Interest

### Section 1.

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Yizhi

2. Surname (Last Name)

Liu

3. Date

10-June-2020

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☐ Yes

☒ No

Corresponding Author's Name

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the President of Zhongshan Ophthalmic Centre

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2. Surname (Last Name)

Li

3. Date

10-June-2020

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☐ Yes

☒ No

Corresponding Author's Name

Haotian Lin

5. Manuscript Title

Exploring the Growth Patterns of Medical Demand for Eye Care: A Longitudinal Hospital-level Study Over Ten Years In China

6. Manuscript Identifying Number (if you know it)

ATM-20-2939

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☒ No

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Dr. Li has nothing to disclose.

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### Section 1. Identifying Information

1. Given Name (First Name) Haotian	2. Surname (Last Name) Lin	3. Date 10-June-2020
4. Are you the corresponding author? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
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Are there any relevant conflicts of interest? ☒ Yes ☐ No

If yes, please fill out the appropriate information below. If you have more than one entity press the "ADD" button to add a row. Excess rows can be removed by pressing the "X" button.

Name of Institution/Company	Grant?	Personal Fees?	Non-Financial Support?	Other?	Comments
National Key R&D Program of China (2018YFC0116500)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Research grant
Science and Technology Planning Projects of Guangdong Province (2018B010109008)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Research grant

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the Vice President of Zhongshan Ophthalmic Centre

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Dr. Lin reports grants from National Key R&D Program of China (2018YFC0116500), grants from Science and Technology Planning Projects of Guangdong Province (2018B010109008), during the conduct of the study; and the Vice President of Zhongshan Ophthalmic Centre.

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