

#### **Instructions**

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Gao 1



Section 1. Identifying Inform	ation			
1. Given Name (First Name) Zhiying	2. Surname (Last Name) Gao		3. Date 11-November	r-2020
4. Are you the corresponding author?	Yes V No	Corresponding Xi Chen	g Author's Name	
<ol><li>Manuscript Title Assessment of HCMV-encoded microRN outcomes</li></ol>	IAs in plasma as potential	biomarkers in p	oregnant women with adve	erse pregnancy
6. Manuscript Identifying Number (if you kr ATM-20-7354	now it)	_		
Section 2. The Work Under Co	onsideration for Public	cation		
Did you or your institution <b>at any time</b> rece any aspect of the submitted work (including statistical analysis, etc.)?				
Are there any relevant conflicts of interest				
If yes, please fill out the appropriate info Excess rows can be removed by pressing		e more than or	e entity press the "ADD" b	utton to add a row.
Name of Institution/Company	Grant	n-Financial on upport?	ther? Comments	
Heilongjiang Province Department of Education		<b>✓</b>	Provided funds	
Qiqihar Medical University	<b>✓</b>	✓	Provided funds	
Section 3. Relevant financial	activities outside the	submitted wo	rk.	
Place a check in the appropriate boxes i of compensation) with entities as descri clicking the "Add +" box. You should rep	bed in the instructions. Us	se one line for e	ach entity; add as many lin	es as you need by
Are there any relevant conflicts of interest	est? Yes ✓ No			
Section 4. Intellectual Proper	utur Datanta ( Canada	what c		
intellectual Proper	ty Patents & Copyri	gnts		
Do you have any patents, whether plan	ned, pending or issued, br	oadly relevant	to the work? Yes	✓ No

Gao 2



Section 5.	
Section 5.	Relationships not covered above
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Yes, the follo	wing relationships/conditions/circumstances are present (explain below):
✓ No other rela	tionships/conditions/circumstances that present a potential conflict of interest
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Zhou 1



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Bai 1



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Ding 1



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**Royalties:** Funds are coming in to you or your institution due to your patent

Zheng 1



Section 1. Identifying Inform	nation			
1. Given Name (First Name) Shaohai	2. Surname (Last Name) Zheng		3. Date 11-November-2020	
4. Are you the corresponding author?	Yes Vo	Corresponding Xi Chen	g Author's Name	
<ol><li>Manuscript Title Assessment of HCMV-encoded microRN outcomes</li></ol>	IAs in plasma as potential	biomarkers in p	oregnant women with adverse pregnanc	Cy .
6. Manuscript Identifying Number (if you kr ATM-20-7354	now it)	_		
Section 2. The Work Under Co	onsideration for Public	cation		
Did you or your institution <b>at any time</b> rece any aspect of the submitted work (including statistical analysis, etc.)?			vernment, commercial, private foundation, e vard, study design, manuscript preparation,	tc.) for
Are there any relevant conflicts of interest				
If yes, please fill out the appropriate info Excess rows can be removed by pressin		e more than on	e entity press the "ADD" button to add a	a row.
Name of Institution/Company	Grant	n-Financial upport?	ther? Comments	
Heilongjiang Province Department of Education		<b>✓</b>	Provided funds	
Qiqihar Medical University	<b>✓</b>	<b>✓</b>	Provided funds	
Section 3. Relevant financial	activities outside the s	ubmitted wo	rk.	
of compensation) with entities as descri	bed in the instructions. Us	se one line for e	financial relationships (regardless of am ach entity; add as many lines as you nee ng the 36 months prior to publication	d by
Are there any relevant conflicts of intere	est? Yes ✓ No			
Section 4. Intellectual Proper	ty Patents & Copyric	jhts		
Do you have any patents, whether plan	ned, pending or issued, br	oadly relevant t	to the work? Yes V No	

Zheng 2



Section 5.	
Section 5.	Relationships not covered above
	elationships or activities that readers could perceive to have influenced, or that give the appearance of encing, what you wrote in the submitted work?
Yes, the follow	wing relationships/conditions/circumstances are present (explain below):
✓ No other rela	tionships/conditions/circumstances that present a potential conflict of interest
	anuscript acceptance, journals will ask authors to confirm and, if necessary, update their disclosure statements rnals may ask authors to disclose further information about reported relationships.
Section 6.	Disclosure Statement
Based on the abo	ove disclosures, this form will automatically generate a disclosure statement, which will appear in the box
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paten<sup>.</sup>



Section 1. Identifying Inform	ation		
1. Given Name (First Name) Yuewen	2. Surname (Last Name) Li		3. Date 11-November-2020
4. Are you the corresponding author?	☐ Yes ✓ No	Corresponding Auth	nor's Name
<ol><li>Manuscript Title Assessment of HCMV-encoded microRN outcomes</li></ol>	IAs in plasma as potential	biomarkers in pregn	ant women with adverse pregnancy
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Did you or your institution <b>at any time</b> received any aspect of the submitted work (including statistical analysis, etc.)?  Are there any relevant conflicts of interesting the state of t	but not limited to grants, da		nent, commercial, private foundation, etc.) for tudy design, manuscript preparation,
•	ormation below. If you hav	re more than one ent	tity press the "ADD" button to add a row.
Name of Institution/Company	Grant	n-Financial Other	Comments
Heilongjiang Province Department of Education	<b>V</b>	<b>✓</b>	Provided funds
Qiqihar Medical University	<b>V</b>	<b>✓</b>	Provided funds
Section 3. Relevant financial	activities outside the s	submitted work.	
Place a check in the appropriate boxes i of compensation) with entities as descri clicking the "Add +" box. You should rep	bed in the instructions. Us	se one line for each e	entity; add as many lines as you need by
Are there any relevant conflicts of intere	est? Yes ✓ No		
Section 4. Intellectual Proper			
Intellectual Proper	ty Patents & Copyric	ghts	
Do you have any patents, whether plane	ned, pending or issued, br	oadly relevant to the	e work? ☐ Yes ✓ No



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Section 6.	
Section 6.	Disclosure Statement
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Section 1. Identifying Inform	nation		
1. Given Name (First Name) Xiulan	2. Surname (Last Name) Li		3. Date 11-November-2020
4. Are you the corresponding author?	☐ Yes ✓ No	Corresponding Auth	or's Name
<ol><li>Manuscript Title Assessment of HCMV-encoded microRI outcomes</li></ol>	•	biomarkers in pregn	ant women with adverse pregnancy
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•		e more than one ent	ity press the "ADD" button to add a row.
Excess rows can be removed by pressin			
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Wang 1



Section 1. Identifying Inform	ation		
1. Given Name (First Name) Xiaojuan	2. Surname (Last Name) Wang		3. Date 11-November-2020
4. Are you the corresponding author?	Yes Vo	Corresponding Xi Chen	Author's Name
<ol><li>Manuscript Title Assessment of HCMV-encoded microRN outcomes</li></ol>	IAs in plasma as potential	biomarkers in pr	regnant women with adverse pregnancy
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If yes, please fill out the appropriate info Excess rows can be removed by pressin		e more than one	e entity press the "ADD" button to add a row.
Name of Institution/Company	Grant	n-Financial Oth	her? Comments
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Continue			
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Do you have any patents, whether plan	ned, pending or issued, br	oadly relevant to	o the work? Yes V No

Wang 2



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Jin 1



Section 1. Identifying Inform	nation			
1. Given Name (First Name) Ming	2. Surname (Last Name) Jin		3. Date 11-Novembe	er-2020
4. Are you the corresponding author?	☐ Yes ✓ No	Corresponding Xi Chen	g Author's Name	
<ol><li>Manuscript Title Assessment of HCMV-encoded microRN outcomes</li></ol>	NAs in plasma as potential	biomarkers in p	oregnant women with adv	erse pregnancy
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Jin 2



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Shangting 1



Section 1. Identifying Inform	ation		
1. Given Name (First Name) Huizi	2. Surname (Last Name) Shangting		3. Date 11-November-2020
4. Are you the corresponding author?	☐ Yes ✓ No	Corresponding A Xi Chen	uthor's Name
<ol><li>Manuscript Title Assessment of HCMV-encoded microRN outcomes</li></ol>	IAs in plasma as potential	biomarkers in pre	gnant women with adverse pregnancy
6. Manuscript Identifying Number (if you kn ATM-20-7354	now it)	_	
Section 2. The Work Under Co	onsideration for Public	cation	
Did you or your institution <b>at any time</b> recei any aspect of the submitted work (including statistical analysis, etc.)?			nment, commercial, private foundation, etc.) for d, study design, manuscript preparation,
Are there any relevant conflicts of intere			
If yes, please fill out the appropriate info Excess rows can be removed by pressing		e more than one	entity press the "ADD" button to add a row.
Name of Institution/Company	Grant	n-Financial Othe	Comments
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Qiqihar Medical University	<b>✓</b>	<b>✓</b>	Provided funds
Section 3. Relevant financial	activities outside the s	submitted work	<b></b>
	bed in the instructions. Us	se one line for eac	nancial relationships (regardless of amount h entity; add as many lines as you need by the <b>36 months prior to publication</b> .
Are there any relevant conflicts of interest	est? Yes V No		
Section 4. Intellectual Proper			
Intellectual Proper	ty Patents & Copyric	ghts	
Do you have any patents, whether plant	ned, pending or issued, br	oadly relevant to	the work? Yes V No

Shangting 2



Section 5.	
Section 5.	Relationships not covered above
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Yes, the follo	wing relationships/conditions/circumstances are present (explain below):
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Qiu 1



Section 1. Identifying Inform	nation		
1. Given Name (First Name) Changchun	2. Surname (Last Name) Qiu		3. Date 11-November-2020
4. Are you the corresponding author?	Yes 🗸 No	Corresponding Xi Chen	Author's Name
5. Manuscript Title Assessment of HCMV-encoded microRN outcomes	NAs in plasma as potential	biomarkers in pr	regnant women with adverse pregnancy
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1. Given Name (First Name) Cheng	2. Surname (Last Name) Wang		3. Date 11-November-2020		
4. Are you the corresponding author?	☐ Yes ✓ No	Corresponding Author's Name Xi Chen			
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4. Are you the corresponding author?	Yes 🗸 No	es No Corresponding Author's Name Xi Chen			
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### 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.

This section asks about your financial relationships with entities in the bio-medical arena that could be perceived to influence, or that give the appearance of potentially influencing, what you wrote in the submitted work. You should disclose interactions with ANY entity that could be considered broadly relevant to the work. For example, if your article is about testing an epidermal growth factor receptor (EGFR) antagonist in lung cancer, you should report all associations with entities pursuing diagnostic or therapeutic strategies in cancer in general, not just in the area of EGFR or lung cancer.

Report all sources of revenue paid (or promised to be paid) directly to you or your institution on your behalf over the 36 months prior to submission of the work. This should include all monies from sources with relevance to the submitted work, not just monies from the entity that sponsored the research. Please note that your interactions with the work's sponsor that are outside the submitted work should also be listed here. If there is any question, it is usually better to disclose a relationship than not to do so.

For grants you have received for work outside the submitted work, you should disclose support ONLY from entities that could be perceived to be affected financially by the published work, such as drug companies, or foundations supported by entities that could be perceived to have a financial stake in the outcome. Public funding sources, such as government agencies, charitable foundations or academic institutions, need not be disclosed. For example, if a government agency sponsored a study in which you have been involved and drugs were provided by a pharmaceutical company, you need only list the pharmaceutical company.

## 4. Intellectual Property.

This section asks about patents and copyrights, whether pending, issued, licensed and/or receiving royalties.

## Relationships not covered above.

Use this section to report other relationships or activities that readers could perceive to have influenced, or that give the appearance of potentially influencing, what you wrote in the submitted work.

#### Definitions.

**Entity:** government agency, foundation, commercial sponsor, academic institution, etc.

**Grant:** A grant from an entity, generally [but not always] paid to your organization

**Personal Fees:** Monies paid to you for services rendered, generally honoraria, royalties, or fees for consulting, lectures, speakers bureaus, expert testimony, employment, or other affiliations

**Non-Financial Support:** Examples include drugs/equipment supplied by the entity, travel paid by the entity, writing assistance, administrative support, etc.

Other: Anything not covered under the previous three boxes

**Pending:** The patent has been filed but not issued

**Issued:** The patent has been issued by the agency

**Licensed:** The patent has been licensed to an entity, whether earning royalties or not

**Royalties:** Funds are coming in to you or your institution due to your patent

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Section 1.	Identifying Inform	ation				
1. Given Name (Fi Xi	rst Name)	2. Surname (Last Nar Chen	me)		3. Date 11-November-2020	
4. Are you the cor	responding author?	onding author? ✓ Yes No				
outcomes		•	ential biomarkers	in pregnant v	women with adverse pregnancy	
	ı					
Section 2.	The Work Under Co	onsideration for P	ublication			
any aspect of the s statistical analysis, Are there any rel	ubmitted work (including etc.)? evant conflicts of intere	but not limited to gran	nts, data monitorin	g board, study	commercial, private foundation, etc., design, manuscript preparation, oress the "ADD" button to add a re	
	be removed by pressing	-	u nave more tha	n one entity p	bless the ADD button to add a n	Ow.
Name of Institut	ion/Company	Grant? Personal Fees?	Non-Financial	Other? C	omments	
Heilongjiang Provinc Education	e Department of	✓	<b>✓</b>	Pro	vided funds	
Qiqihar Medical Univ	ersity		<b>✓</b>	Pro	vided funds	
Section 3.						
Section 3.	Relevant financial a	activities outside	the submitted	work.		
of compensation clicking the "Add	n) with entities as descril	bed in the instruction ort relationships tha	ns. Use one line f t were <b>present c</b>	or each entity	relationships (regardless of amou v; add as many lines as you need l is months prior to publication.	
	ı					
Section 4.	Intellectual Proper	ty Patents & Co	pyrights			
Do you have any	patents, whether planr	ned, pending or issue	ed, broadly relev	ant to the wor	rk? Yes 🗸 No	

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Section 5. Polationships not severed above				
Relationships not covered above				
Are there other relationships or activities that readers could perceive to have influenced, or that give the appearance of potentially influencing, what you wrote in the submitted work?				
Yes, the following relationships/conditions/circumstances are present (explain below):				
✓ No other relationships/conditions/circumstances that present a potential conflict of interest				
At the time of manuscript acceptance, journals will ask authors to confirm and, if necessary, update their disclosure statements On occasion, journals may ask authors to disclose further information about reported relationships.				
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. Xi Chen reports grants and non-financial support from Heilongjiang Province Department of Education, grants and non-financial support from Qiqihar Medical University, during the conduct of the study; .				

#### **Evaluation and Feedback**

Please visit <a href="http://www.icmje.org/cgi-bin/feedback">http://www.icmje.org/cgi-bin/feedback</a> to provide feedback on your experience with completing this form.

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