

ICMJE Form for Disclosure of Potential Conflicts of Interest

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.

1. Identifying information.

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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".

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

ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name) Seung Jin	2. Surname (Last Name) Jung	3. Date 04-January-1976
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Jin-Man Jung
5. Manuscript Title Antiplatelet Regimens for Asian Patients with Ischemic Stroke or Transient Ischemic Attack: A Systematic Review and Network Meta-analysis		
6. Manuscript Identifying Number (if you know it) ATM-20-7951		

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

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Section 6. Disclosure Statement

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Dr. Jung 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) SUNG RYUL	2. Surname (Last Name) SHIM	3. Date 22-January-2021
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Jin-Man Jung
5. Manuscript Title Antiplatelet Regimens in Asian Patients with Ischemic Stroke or Transient Ischemic Attack: A Network Meta-analysis		
6. Manuscript Identifying Number (if you know it) ATM-20-7951		

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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

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Dr. SHIM has nothing to disclose.

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Section 1. Identifying Information

1. Given Name (First Name) Bum Joon	2. Surname (Last Name) Kim	3. Date 01-February-2021
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Jin-Man Jung
5. Manuscript Title Antiplatelet Regimens for Asian Patients with Ischemic Stroke or Transient Ischemic Attack: A Systematic Review and Network Meta-analysis		
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1. Given Name (First Name)
Jin-man

2. Surname (Last Name)
Jung

3. Date
22-January-2021

4. Are you the corresponding author? Yes No

5. Manuscript Title
Antiplatelet Regimens in Asian Patients with Ischemic Stroke or Transient Ischemic Attack: A Network Meta-analysis

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Are there any relevant conflicts of interest? Yes No

If yes, please fill out the appropriate information below.

Name of Entity	Grant?	Personal Fees?	Non-Financial Support?	Other?	Comments
Pfizer Pharmaceutical Company	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	lecture honoraria
Sanofi-Aventis Pharmaceutical Company	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	lecture honoraria
Daewoong Pharmaceutical Company	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	consulting fee
Otuska	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	lecture honoraria
Hanmi Pharmaceutical Company	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	lecture honorari

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Dr. Jung reports other from Pfizer Pharmaceutical Company, other from Sanofi-Aventis Pharmaceutical Company, other from Daewoong Pharmaceutical Company, other from Otuska, other from Hanmi Pharmaceutical Company, outside the submitted work; .

Evaluation and Feedback

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