Date:	30	/10	/2021
Date.	30	<i>,</i> 10	/ 2021

Your Name: Mingzhi Zhang

Manuscript Title: Dynamic model for individualized prognosis prediction among Avian Influenza A H7N9 patients

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)
1	All conservation the conservation		planning of the work
1	All support for the present manuscript (e.g., funding,	None	
	provision of study materials,		
	medical writing, article		
İ	processing charges, etc.)		
İ	No time limit for this item.		
		Time frame: past	36 months
2	Grants or contracts from	None	
	any entity (if not indicated		
	in item #1 above).		
3	Royalties or licenses	None	
4	Consulting fees	None	

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

No conflicts of interest to declare.		

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

Date:	30/10/2021
Your I	Name: Ke Xu

Manuscript Title: Dynamic model for individualized prognosis prediction among Avian Influenza A H7N9 patients Manuscript number (if known):

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	·		
7	Support for attending meetings and/or travel	None	
8	Patents planned, issued or	None	
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9	Participation on a Data	None	
9	Safety Monitoring Board or	None	
	Advisory Board		
10	Leadership or fiduciary role	None	
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11	Stock or stock options	None	
12	Receipt of equipment,	None	
	materials, drugs, medical writing, gifts or other		
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13	Other financial or non-	None	
	financial interests		

No conflicts of interest to declare.		

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

Date:	30/10/2021
Your I	Name: Qigang Dai

Manuscript Title: Dynamic model for individualized prognosis prediction among Avian Influenza A H7N9 patients Manuscript number (if known):

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3	Royalties or licenses	None	
4	Consulting fees	None	

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

No conflicts of interest to declare.		

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

Date:	30	/10/	2021

Your Name: Dongfang You

Manuscript Title: Dynamic model for individualized prognosis prediction among Avian Influenza A H7N9 patients

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

No conflicts of interest to declare.		

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

Date:	30/10/2021
Your N	Name: Zhaolei Yu

Manuscript Title: Dynamic model for individualized prognosis prediction among Avian Influenza A H7N9 patients

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	testimony		
	·		
7	Support for attending meetings and/or travel	None	
8	Patents planned, issued or	None	
	pending		
9	Participation on a Data	None	
9	Safety Monitoring Board or	None	
	Advisory Board		
10	Leadership or fiduciary role	None	
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11	Stock or stock options	None	
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Date:	30	/10/	2021

Your Name: Changjun Bao

Manuscript Title: Dynamic model for individualized prognosis prediction among Avian Influenza A H7N9 patients

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2	Grants or contracts from	None	
	any entity (if not indicated		
	in item #1 above).		
3	Royalties or licenses	None	
4	Consulting fees	None	

5	Payment or honoraria for	None	
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	speakers bureaus,		
	manuscript writing or educational events		
6	Payment for expert	None	
	testimony		
	·		
7	Support for attending meetings and/or travel	None	
8	Patents planned, issued or	None	
	pending		
9	Participation on a Data	None	
9	Safety Monitoring Board or	None	
	Advisory Board		
10	Leadership or fiduciary role	None	
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	committee or advocacy group, paid or unpaid		
11	Stock or stock options	None	
12	Receipt of equipment,	None	
	materials, drugs, medical writing, gifts or other		
	services		
13	Other financial or non-	None	
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No conflicts of interest to declare.		

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Date:	30/10/2021
Your I	Name: Yang Zhao

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	manuscript (e.g., funding, provision of study materials,	None	planning of the work			
ļ	medical writing, article processing charges, etc.)					
	No time limit for this item.					
	Time frame: past 36 months					
2	Grants or contracts from	None				
ļ	any entity (if not indicated					
_	in item #1 above).	N				
3	Royalties or licenses	None				
4	Consulting fees	None				
İ						

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

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