Date:Jan. 06, 20	<u> </u>
Your Name:_Zheny	<u>u Yang</u>
Manuscript Title:	Rectal foreign bodies in older men: humanistic care and a novel challenge for society
Manuscript numbe	r (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)	Specifications/Comments (e.g., if payments were made to you or to your institution)
		Time frame: Since the initial	planning of the work
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		Time frame: past	36 months
2	Grants or contracts from any entity (if not indicated in item #1 above).	<u>None</u>	
3	Royalties or licenses	None	
4	Consulting fees	None	

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

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

Date:							
Your Name: Peiyuan Xin							
Manuscript Title: Rectal foreign bodies in older men: humanistic care and a novel challenge for society							
Manuscript number (if known):							

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

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

Date:Jan. 06, 2022
Your Name: Shuai Zhou
Manuscript Title: Rectal foreign bodies in older men: humanistic care and a novel challenge for society
Manuscript number (if known):

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

None.			

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

Date: <u></u>								
Your Name:_ <u>Chuxin Zhou</u>								
Manuscript Title: Rectal foreign bodies in older men: humanistic care and a novel challenge for society								
Manuscript number (if known):								

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

None.			

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

Date:Jan. 06, 2022
Your Name: Xianli He
Manuscript Title: Rectal foreign bodies in older men: humanistic care and a novel challenge for society
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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		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 lectures, presentations,	<u>None</u>	
	speakers bureaus, manuscript writing or educational events		
6	Payment for expert testimony	None	
7	Support for attending meetings and/or travel	None	
8	Patents planned, issued or pending	<u>None</u>	
9	Participation on a Data	<u>None</u>	
	Safety Monitoring Board or		
	Advisory Board		
10	Leadership or fiduciary role in other board, society, committee or advocacy	<u>None</u>	
	group, paid or unpaid		
11		NI	
11	Stock or stock options	None	
12	Receipt of equipment,	None	
12	materials, drugs, medical	None	
	writing, gifts or other services		
12	Other financial or non-	None	
13	other financial or non- financial interests	None	
	inialiciai iniciests		

None.			

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

Date:Jan. 06, 20	<u> </u>							
Your Name: Guoqiang Bao								
Manuscript Title:	Rectal foreign bodies in older men: humanistic care and a novel challenge for society							
Manuscript numbe	r (if known):							

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3	Royalties or licenses	None	
4	Consulting fees	None	

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