		TENISE DISCI	OSONE I ONIVI	
Date	e:2022/2/1	8		
Your	Name:Jiamen Shen			
Man	uscript Title: The effec	ts of the oral administrati	ion of graphene oxide on the gut microbiota and ultrastruc	ture
of th	e colon of mice			
Man	uscript number (if known):		<del>-</del>	
relat parti to tr	ed to the content of your nies whose interests may be	nanuscript. "Related" mea affected by the content o ecessarily indicate a bias.	relationships/activities/interests listed below that are ans any relation with for-profit or not-for-profit third of the manuscript. Disclosure represents a commitment of the second of	
	following questions apply t uscript only.	o the author's relationshi	ps/activities/interests as they relate to the <u>current</u>	
to th med	ne epidemiology of hyperter ication, even if that medica	nsion, you should declare tion is not mentioned in t	·	
	em #1 below, report all sup time frame for disclosure is		d in this manuscript without time limit. For all other items	i,
		Name all entities with	Specifications/Comments	
		whom you have this	(e.g., if payments were made to you or to your	
		relationship or indicate	institution)	
		none (add rows as	,	
		needed)		
		Time frame: Since the initia	al planning of the work	
1	All support for the present	XNone		
	manuscript (e.g., funding,			
	provision of study materials,			
	medical writing, article			

Time frame: past 36 months

X\_None

X\_None

X\_\_None

processing charges, etc.)

No time limit for this item.

Grants or contracts from any entity (if not indicated

in item #1 above).

Consulting fees

Royalties or licenses

2

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5	Payment or honoraria for	XNone	
	lectures, presentations,		
	speakers bureaus,		
	manuscript writing or		
	educational events		
6	Payment for expert	XNone	
	testimony		
7	Support for attending meetings and/or travel	XNone	
8	Patents planned, issued or	XNone	
	pending		
9	Participation on a Data	XNone	
	Safety Monitoring Board or		
	Advisory Board		
10	Leadership or fiduciary role	XNone	
	in other board, society,		
	committee or advocacy		
	group, paid or unpaid		
11	Stock or stock options	XNone	
12	Receipt of equipment,	XNone	
	materials, drugs, medical		
	writing, gifts or other services		
13	Other financial or non-	XNone	
	financial interests		

None			

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

Dat	e: 2022/2/	18					
	r Name:Jiatian Dong						
			ion of graphene oxide on the gut microbiota and ultrastructure				
	of the colon of mice Manuscript number (if known):						
Mai	nuscript number (if known	):					
rela part to t rela The man The to t med	tted to the content of your ties whose interests may be ransparency and does not ationship/activity/interest, of following questions apply nuscript only.  The author's relationships/act he epidemiology of hypert dication, even if that medication.	manuscript. "Related" mea e affected by the content of necessarily indicate a bias. it is preferable that you do to the author's relationshi ivities/interests should be ension, you should declare cation is not mentioned in the pport for the work reporte	ps/activities/interests as they relate to the <u>current</u> <u>defined broadly</u> . For example, if your manuscript pertains all relationships with manufacturers of antihypertensive				
		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 initi	al planning of the work				
1	All support for the present manuscript (e.g., funding, provision of study materials, medical writing, article processing charges, etc.)  No time limit for this item.	XNone					
		Time frame: pas	st 36 months				

Grants or contracts from

in item #1 above).

Consulting fees

Royalties or licenses

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any entity (if not indicated

X\_None

X\_None

X\_\_None

5	Payment or honoraria for	XNone	
	lectures, presentations,		
	speakers bureaus,		
	manuscript writing or		
	educational events	V None	
6	Payment for expert testimony	XNone	
	cestimony		
7	Support for attending	XNone	
	meetings and/or travel		
8	Patents planned, issued or	X None	
	pending		
	h 2		
9	Participation on a Data	XNone	
	Safety Monitoring Board or		
	Advisory Board		
10	Leadership or fiduciary role	XNone	
	in other board, society,		
	committee or advocacy		
11	group, paid or unpaid	X None	
11	Stock or stock options	XNone	
12	Receipt of equipment,	X None	
	materials, drugs, medical		
	writing, gifts or other		
	services		
13	Other financial or non-	XNone	
	financial interests		

None			

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

Dat	o. 2022/2/1	0		
	r Name: Jiaying Zhao	·o		
		ts of the oral administrati	on of graphene oxide on the gut microbiota and ultrastructu	re
	he colon of mice	nto or the oral damminotide.	on or graphene oxide on the gat interoprote and altrastracta	
	nuscript number (if known):			
In t	he interest of transparency,	we ask you to disclose all	relationships/activities/interests listed below that are	
rela	ted to the content of your n	nanuscript. "Related" mea	ans any relation with for-profit or not-for-profit third	
•		•	f the manuscript. Disclosure represents a commitment	
		•	If you are in doubt about whether to list a	
rela	tionship/activity/interest, it	is preferable that you do	so.	
		o the author's relationshi	ps/activities/interests as they relate to the <u>current</u>	
mai	nuscript only.			
The	author's relationships (activ	vitios /intorosts should bo	defined breadly. For example, if your manuscript partains	
		-	defined broadly. For example, if your manuscript pertains all relationships with manufacturers of antihypertensive	
			·	
med	dication, even if that medica	tion is not mentioned in t	ne manuscript.	
In it	om #1 holow roport all sun	nort for the work reports	d in this manuscript without time limit. For all other items,	
	time frame for disclosure is	-	u in this manuscript without time innit. For an other items,	
tile	time mame for disclosure is	the past 50 months.		
		Name all entities with	Specifications/Comments	
		whom you have this	(e.g., if payments were made to you or to your	
		relationship or indicate	institution)	
		none (add rows as		
		needed)		
	T	Time frame: Since the initia	al planning of the work	
1	All support for the present	XNone		
	manuscript (e.g., funding,			
	provision of study materials, medical writing, article			
	processing charges, etc.)			
	No time limit for this item.			
	time initial to this itelli.			

Time frame: past 36 months

X\_None

X\_None

X\_\_None

Grants or contracts from

in item #1 above).

Consulting fees

Royalties or licenses

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any entity (if not indicated

5	Payment or honoraria for	XNone	
	lectures, presentations,		
	speakers bureaus,		
	manuscript writing or		
	educational events		
6	Payment for expert	XNone	
	testimony		
7	Support for attending meetings and/or travel	XNone	
	-		
8	Patents planned, issued or	XNone	
	pending		
9	Participation on a Data	XNone	
	Safety Monitoring Board or		
	Advisory Board		
10	Leadership or fiduciary role	XNone	
	in other board, society,		
	committee or advocacy group, paid or unpaid		
11	Stock or stock options	XNone	
12	Receipt of equipment,	XNone	
	materials, drugs, medical		
	writing, gifts or other services		
13	Other financial or non-	XNone	
	financial interests		
Plea	se summarize the above co	nflict of interest in the follo	owing box:

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

None

Dat	o· 2022/2/1	Ω				
You	r Name: Tao Ye	8				
Mai of t	Date:2022/2/18					
rela part to t	ted to the content of your n ties whose interests may be	nanuscript. "Related" mea affected by the content o ecessarily indicate a bias.	relationships/activities/interests listed below that are ans any relation with for-profit or not-for-profit third of the manuscript. Disclosure represents a commitment If you are in doubt about whether to list a so.			
	following questions apply t nuscript only.	o the author's relationshi	ps/activities/interests as they relate to the <u>current</u>			
to t	•	nsion, you should declare	defined broadly. For example, if your manuscript pertain all relationships with manufacturers of antihypertensive the manuscript.			
	em #1 below, report all sup time frame for disclosure is		d in this manuscript without time limit. For all other ite	ems,		
		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 initi	al planning of the work			
1	All support for the present	XNone				
	manuscript (e.g., funding, provision of study materials,					

Time frame: past 36 months

X\_None

X\_None

X\_None

medical writing, article processing charges, etc.)

No time limit for this item.

Grants or contracts from any entity (if not indicated

in item #1 above).

Consulting fees

Royalties or licenses

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5	Payment or honoraria for	XNone	
	lectures, presentations,		
	speakers bureaus,		
	manuscript writing or		
	educational events	V None	
6	Payment for expert testimony	XNone	
	cestimony		
7	Support for attending	XNone	
	meetings and/or travel		
8	Patents planned, issued or	X None	
	pending		
	h 2		
9	Participation on a Data	XNone	
	Safety Monitoring Board or		
	Advisory Board		
10	Leadership or fiduciary role	XNone	
	in other board, society,		
	committee or advocacy		
11	group, paid or unpaid	X None	
11	Stock or stock options	XNone	
12	Receipt of equipment,	X None	
	materials, drugs, medical		
	writing, gifts or other		
	services		
13	Other financial or non-	XNone	
	financial interests		

None			

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

Date:	_2022/2/18
	g Gong
	$\_$ The effects of the oral administration of graphene oxide on the gut microbiota and ultrastructure
of the colon of mice	
Manuscript number	(if known):
related to the conterparties whose interesto transparency and	Insparency, we ask you to disclose all relationships/activities/interests listed below that are not of your manuscript. "Related" means any relation with for-profit or not-for-profit third sts may be affected by the content of the manuscript. Disclosure represents a commitment does not necessarily indicate a bias. If you are in doubt about whether to list a /interest, it is preferable that you do so.
The following questi manuscript only.	ons apply to the author's relationships/activities/interests as they relate to the <u>current</u>
	ships/activities/interests should be <u>defined broadly</u> . For example, if your manuscript pertains of hypertension, you should declare all relationships with manufacturers of antihypertensive

In item #1 below, report all support for the work reported in this manuscript without time limit. For all other items,

medication, even if that medication is not mentioned in the manuscript.

the time frame for disclosure is the past 36 months.

		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
1	All support for the present manuscript (e.g., funding, provision of study materials, medical writing, article processing charges, etc.)  No time limit for this item.	XNone	
		Time frame: past	36 months
2	Grants or contracts from any entity (if not indicated in item #1 above).	XNone	
3	Royalties or licenses	X_None	
4	Consulting fees	XNone	

5	Payment or honoraria for	XNone	
	lectures, presentations,		
	speakers bureaus,		
	manuscript writing or		
	educational events		
6	Payment for expert	XNone	
	testimony		
7	Support for attending meetings and/or travel	XNone	
	-		
8	Patents planned, issued or	XNone	
	pending		
9	Participation on a Data	XNone	
	Safety Monitoring Board or		
	Advisory Board		
10	Leadership or fiduciary role	XNone	
	in other board, society,		
	committee or advocacy group, paid or unpaid		
11	Stock or stock options	XNone	
12	Receipt of equipment,	XNone	
	materials, drugs, medical		
	writing, gifts or other services		
13	Other financial or non-	XNone	
	financial interests		
Plea	se summarize the above co	nflict of interest in the follo	owing box:

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

None

## ICM IF DISCLOSURE FORM

	ICIVIJE DISCLOSURE FORIVI				
Date	e:2022/2/:	18		_	
	r Name:Huipeng Wang_				
Man	uscript Title: The effe	cts of the oral administrati	ion of graphene oxide on the gut microbiota and ultras	structure	
	ne colon of mice				
Man	uscript number (if known)	:			
relat part to tr	ted to the content of your i ies whose interests may be	manuscript. "Related" mea e affected by the content on necessarily indicate a bias.	relationships/activities/interests listed below that are ans any relation with for-profit or not-for-profit third of the manuscript. Disclosure represents a commitment If you are in doubt about whether to list a so.		
	following questions apply to suscript only.	to the author's relationshi	ps/activities/interests as they relate to the <u>current</u>		
to th	•	ension, you should declare	defined broadly. For example, if your manuscript perta all relationships with manufacturers of antihypertensi the manuscript.		
	em #1 below, report all sup time frame for disclosure is	•	d in this manuscript without time limit. For all other it	tems,	
		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 initia	al planning of the work	1	
1	All support for the present	X None		1	
	manuscript (e.g., funding, provision of study materials,				

Time frame: past 36 months

X\_None

X\_None

X\_\_None

medical writing, article processing charges, etc.)

No time limit for this item.

Grants or contracts from any entity (if not indicated

in item #1 above).

Consulting fees

Royalties or licenses

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5	Payment or honoraria for	XNone	
	lectures, presentations,		
	speakers bureaus,		
	manuscript writing or		
	educational events		
6	Payment for expert	XNone	
	testimony		
7	Support for attending meetings and/or travel	XNone	
8	Patents planned, issued or	XNone	
	pending		
9	Participation on a Data	XNone	
	Safety Monitoring Board or		
	Advisory Board		
10	Leadership or fiduciary role	XNone	
	in other board, society,		
	committee or advocacy		
	group, paid or unpaid		
11	Stock or stock options	XNone	
12	Receipt of equipment,	XNone	
	materials, drugs, medical		
	writing, gifts or other services		
13	Other financial or non-	XNone	
	financial interests		

None		

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

		ICMIJE DISCLO	JSURE FURIVI	
		.8		
	r Name:Wenjie Chen			
Mar	nuscript Title: The effec	cts of the oral administratio	n of graphene oxide on the gut microbiota and ultrasti	ructure
of th	ne colon of mice			
Mar	nuscript number (if known):			
relate part to tr	ted to the content of your r ies whose interests may be	nanuscript. "Related" mear affected by the content of ecessarily indicate a bias. I	elationships/activities/interests listed below that are as any relation with for-profit or not-for-profit third the manuscript. Disclosure represents a commitment f you are in doubt about whether to list a so.	
	following questions apply t uscript only.	o the author's relationship	s/activities/interests as they relate to the <u>current</u>	
to th	•	nsion, you should declare a	efined broadly. For example, if your manuscript pertain II relationships with manufacturers of antihypertensive manuscript.	
	em #1 below, report all sup time frame for disclosure is	•	in this manuscript without time limit. For all other ite	ms,
		Name all entities with	Specifications/Comments	
		whom you have this	(e.g., if payments were made to you or to your	
		relationship or indicate	institution)	
		none (add rows as		
		needed)		
		Time frame: Since the initial	planning of the work	
1	All support for the present	XNone		

		whom you have this relationship or indicate none (add rows as needed)	(e.g., if payments were made to you or to your institution)
		Time frame: Since the initial	planning of the work
1	All support for the present manuscript (e.g., funding, provision of study materials, medical writing, article processing charges, etc.)  No time limit for this item.	XNone	
		Time frame: past	36 months
2	Grants or contracts from any entity (if not indicated in item #1 above).	XNone	
3	Royalties or licenses	X_None	
4	Consulting fees	XNone	

5	Payment or honoraria for	XNone	
	lectures, presentations,		
	speakers bureaus,		
	manuscript writing or		
	educational events		
6	Payment for expert	XNone	
	testimony		
7	Support for attending meetings and/or travel	XNone	
8	Patents planned, issued or	XNone	
	pending		
9	Participation on a Data	XNone	
	Safety Monitoring Board or		
	Advisory Board		
10	Leadership or fiduciary role	XNone	
	in other board, society,		
	committee or advocacy		
	group, paid or unpaid		
11	Stock or stock options	XNone	
12	Receipt of equipment,	XNone	
	materials, drugs, medical		
	writing, gifts or other services		
13	Other financial or non-	XNone	
	financial interests		

None		

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

		TENTE DISCE	OSONE I ONIVI					
Date	e:2022/2/2	18						
You	ur Name:Mingsheng Fu							
Mar	lanuscript Title: The effects of the oral administration of graphene oxide on the gut microbiota and ultrastructure							
of the	ne colon of mice							
Mar	nuscript number (if known)	:						
rela part to ti	ted to the content of your in ties whose interests may be ransparency and does not r	manuscript. "Related" mea e affected by the content of	relationships/activities/interests listed below that are ns any relation with for-profit or not-for-profit third the manuscript. Disclosure represents a commitment If you are in doubt about whether to list a so.					
	following questions apply nuscript only.	to the author's relationship	s/activities/interests as they relate to the <u>current</u>					
to tl	he epidemiology of hyperte	_	lefined broadly. For example, if your manuscript pertains all relationships with manufacturers of antihypertensive ne manuscript.					
	em #1 below, report all sup time frame for disclosure is	•	in this manuscript without time limit. For all other items,					
		Name all entities with	Specifications/Comments					
		whom you have this relationship or indicate none (add rows as needed)	(e.g., if payments were made to you or to your institution)					
		Time frame: Since the initia	l planning of the work					
1	All support for the present	XNone						

Time frame: past 36 months

X\_None

X\_None

X\_\_None

manuscript (e.g., funding, provision of study materials, medical writing, article processing charges, etc.)

No time limit for this item.

Grants or contracts from any entity (if not indicated

in item #1 above).

Consulting fees

Royalties or licenses

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3

5	Payment or honoraria for	XNone	
	lectures, presentations,		
	speakers bureaus,		
	manuscript writing or		
	educational events		
6	Payment for expert	XNone	
	testimony		
7	Support for attending meetings and/or travel	XNone	
8	Patents planned, issued or	XNone	
	pending		
9	Participation on a Data	XNone	
	Safety Monitoring Board or		
	Advisory Board		
10	Leadership or fiduciary role	XNone	
	in other board, society,		
	committee or advocacy		
	group, paid or unpaid		
11	Stock or stock options	XNone	
12	Receipt of equipment,	XNone	
	materials, drugs, medical		
	writing, gifts or other services		
13	Other financial or non-	XNone	
	financial interests		

None		

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

Date	e:2022/2/1	.8		
	ır Name: Yuankun Cai			
Mai	nuscript Title: The effec	ts of the oral administration	on of graphene oxide on the gut microbiota and ultrastructure	3
	he colon of mice			
Maı	nuscript number (if known):			
rela part to t	ated to the content of your nation that the tender in the	nanuscript. "Related" mean affected by the content of ecessarily indicate a bias.	relationships/activities/interests listed below that are ns any relation with for-profit or not-for-profit third the manuscript. Disclosure represents a commitment of the second	
	e following questions apply to nuscript only.	o the author's relationship	s/activities/interests as they relate to the <u>current</u>	
to ti med In it	he epidemiology of hypertendication, even if that medica	nsion, you should declare a stion is not mentioned in the port for the work reported	efined broadly. For example, if your manuscript pertains all relationships with manufacturers of antihypertensive ne manuscript.  in this manuscript without time limit. For all other items,	
		Name all entities with	Specifications/Comments	
		whom you have this	(e.g., if payments were made to you or to your	
		relationship or indicate none (add rows as needed)	institution)	
		none (add rows as		

Time frame: past 36 months

X\_None

X\_None

X\_\_None

Grants or contracts from

in item #1 above).

Consulting fees

Royalties or licenses

3

4

any entity (if not indicated

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

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