Date: <u>2022/04/22</u>
Your Name: Chengzhu Cao
Manuscript Title: The combined use of acetazolamide and Rhodiola in the prevention and treatment of altitude sickness
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 support for the present manuscript (e.g., funding, provision of study materials, medical writing, article processing charges, etc.) No time limit for this item.	_√None	
3	Grants or contracts from any entity (if not indicated in item #1 above). Royalties or licenses	Time frame: past $_{\underline{}}$ None $_{\underline{}}$ None	36 months
4	Consulting fees	√None	

5	Payment or honoraria for lectures, presentations,	
	speakers bureaus,	
	manuscript writing or	
	educational events	
6	Payment for expert	<u>√</u> None
	testimony	
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7	Support for attending meetings and/or travel	√None
8	Patents planned, issued or	<u>√</u> None
	pending	
9	Participation on a Data	<u>√</u> None
	Safety Monitoring Board or Advisory Board	
	•	
10	Leadership or fiduciary role in other board, society,	<u>√</u> _None
	committee or advocacy	
	group, paid or unpaid	
11	Stock or stock options	
12	Receipt of equipment,	
	materials, drugs, medical writing, gifts or other	
	services	
13	Other financial or non-	√ None
	financial interests	
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Date: _	<u>2022/04/22</u>
Your Na	me: Huan Zhang
Manuso	ript Title: The combined use of acetazolamide and Rhodiola in the prevention and treatment of altitude sickness
Manuso	ript number (if known):

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3	Royalties or licenses	None	
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	speakers bureaus,	
	manuscript writing or	
	educational events	
6	Payment for expert	<u>√</u> None
	testimony	
_	C	
7	Support for attending meetings and/or travel	√None
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	pending	
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	committee or advocacy	
	group, paid or unpaid	
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	services	
13	Other financial or non-	√ None
	financial interests	
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Date: <u>2022/04/22</u>
Your Name: Yongchun Huang
Manuscript Title: The combined use of acetazolamide and Rhodiola in the prevention and treatment of altitude sickness
Manuscript number (if known):

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3	Royalties or licenses	None	
4	Consulting fees	None	

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	speakers bureaus,	
	manuscript writing or	
	educational events	
6	Payment for expert	<u>√</u> None
	testimony	
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7	Support for attending meetings and/or travel	√None
8	Patents planned, issued or	<u>√</u> None
	pending	
9	Participation on a Data	<u>√</u> None
	Safety Monitoring Board or Advisory Board	
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10	Leadership or fiduciary role in other board, society,	<u>√</u> _None
	committee or advocacy	
	group, paid or unpaid	
11	Stock or stock options	
12	Receipt of equipment,	
	materials, drugs, medical writing, gifts or other	
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13	Other financial or non-	√ None
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Please place an "X" next to the following statement to indicate your agreement:

Date: <u>2022/04/22</u>
Your Name: Yameng Mao
Manuscript Title: The combined use of acetazolamide and Rhodiola in the prevention and treatment of altitude sickness
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3	Royalties or licenses	√None	
4	Consulting fees	<u>√</u> _None	

5	Payment or honoraria for	_√None	
	lectures, presentations,		
	speakers bureaus,		
	manuscript writing or		
6	educational events Payment for expert	<i>I</i>	
0	testimony	√_None	
	testimony		
7	Support for attending	A Name	
'	meetings and/or travel	<u>√</u> None	
8	Patents planned, issued or	<u>√</u> None	
	pending		
9	Participation on a Data	_ <u>√</u> None	
	Safety Monitoring Board or		
	Advisory Board		
10	Leadership or fiduciary role	<u>√</u> None	
	in other board, society, committee or advocacy		
	group, paid or unpaid		
11	Stock or stock options	√ None	
12	Receipt of equipment,	<u>√</u> None	
	materials, drugs, medical		
	writing, gifts or other		
43	services	1	
13	Other financial or non- financial interests	√_None	
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8	Patents planned, issued or	<u>√</u> None	
	pending		
9	Participation on a Data	_ <u>√</u> None	
	Safety Monitoring Board or		
	Advisory Board		
10	Leadership or fiduciary role	<u>√</u> None	
	in other board, society, committee or advocacy		
	group, paid or unpaid		
11	Stock or stock options	√ None	
12	Receipt of equipment,	<u>√</u> None	
	materials, drugs, medical		
	writing, gifts or other		
43	services	1	
13	Other financial or non- financial interests	√_None	
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Date:
Your Name: Shoude Zhang
Manuscript Title: The combined use of acetazolamide and Rhodiola in the prevention and treatment of altitude sickness
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0	testimony	√_None	
	testimony		
7	Support for attending	A Name	
'	meetings and/or travel	<u>√</u> None	
8	Patents planned, issued or	<u>√</u> None	
	pending		
9	Participation on a Data	_ <u>√</u> None	
	Safety Monitoring Board or		
	Advisory Board		
10	Leadership or fiduciary role	<u>√</u> None	
	in other board, society, committee or advocacy		
	group, paid or unpaid		
11	Stock or stock options	√ None	
12	Receipt of equipment,	<u>√</u> None	
	materials, drugs, medical		
	writing, gifts or other		
43	services	1	
13	Other financial or non- financial interests	√_None	
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	Time frame: past 36 months				
2	Grants or contracts from any entity (if not indicated in item #1 above).	√None			
3	Royalties or licenses	√None			
4	Consulting fees	<u>√</u> _None			

5	Payment or honoraria for lectures, presentations,	_√None		
	speakers bureaus,			
	manuscript writing or			
_	educational events	<i>I</i>		
6	Payment for expert testimony	<u>√</u> _None		
	testimony			
7	Support for attending	<i>1</i>		
	meetings and/or travel	<u>√</u> _None		
	meetings and/or travel			
8	Patents planned, issued or pending	<u>√</u> None		
9	Participation on a Data	_ <u>√</u> None		
	Safety Monitoring Board or			
	Advisory Board	_		
10	Leadership or fiduciary role	<u>√</u> None		
	in other board, society, committee or advocacy group, paid or unpaid			
11	Stock or stock options	√ None		
		<u>v</u> wone		
12	Receipt of equipment, materials, drugs, medical writing, gifts or other	√ None		
	services			
13	Other financial or non- financial interests	√None		
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