

ICMJE DISCLOSURE FORM

Date: May 5th, 2022

Your Name: Yingyan Qin

Manuscript Title: Impact of lens opacity and axial length on concomitant screening of maculopathy by swept-source optical coherence tomography-based optical biometer

Manuscript number: ATM-22-341

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)
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Time frame: past 36 months			
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9	Participation on a Data Safety Monitoring Board or Advisory Board	<u> X </u> None	
10	Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid	<u> X </u> None	
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None.

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

X I certify that I have answered every question and have not altered the wording of any of the questions on this form.

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Date: May 5th, 2022

Your Name: Shaobi Ye

Manuscript Title: Impact of lens opacity and axial length on concomitant screening of maculopathy by swept-source optical coherence tomography-based optical biometer

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Date: May 5th, 2022

Your Name: Liangping Liu

Manuscript Title: Impact of lens opacity and axial length on concomitant screening of maculopathy by swept-source optical coherence tomography-based optical biometer

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