Date: May 1 2023

Your Name: Chang-Juan Hao

Manuscript Title: <u>Upper Trapezius Muscle Elasticity in Cervical Myofascial Pain Syndrome Measured Using Real-time</u>

Ultrasound Shear-Wave Elastography

Manuscript number (if known): QIMS-22-797

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
1	All support for the present	X_None	
	manuscript (e.g., funding, 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	<u>X</u> None	
	any entity (if not indicated		
	in item #1 above).		
3	Royalties or licenses	X_None	
4	Consulting fees	X None	

5	Payment or honoraria for lectures, presentations,	X_None			
	speakers bureaus,				
	manuscript writing or				
	educational events				
6	Payment for expert	<u>X</u> None			
	testimony				
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7	Support for attending meetings and/or travel	X_None			
8	Patents planned, issued or	<u>X</u> None			
	pending				
9	Participation on a Data	X_None			
	Safety Monitoring Board or				
10	Advisory Board Leadership or fiduciary role	V. Nana			
10	in other board, society,	X_None			
	committee or advocacy				
	group, paid or unpaid				
11	Stock or stock options	X None			
	·				
12	Receipt of equipment,	<u>X</u> None			
	materials, drugs, medical				
	writing, gifts or other				
12	services Other financial or non-	V. Nene			
13	financial interests	X_None			
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	Please summarize the above conflict of interest in the following box: Chang-Juan Hao have no conflicts of interest to declare.				
Ple	ase place an "X" next to the	e following statement to in	ndicate your agreement:		

Date: May 1 2023

Your Name:Xiao-Yan Kang

Manuscript Title: <u>Upper Trapezius Muscle Elasticity in Cervical Myofascial Pain Syndrome Measured Using Real-time</u>

Ultrasound Shear-Wave Elastography

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	any entity (if not indicated		
	in item #1 above).		
3	Royalties or licenses	<u>X</u> None	
4	Consulting fees	X_None	

5	Payment or honoraria for lectures, presentations,	X_None			
	speakers bureaus,				
	manuscript writing or				
	educational events				
6	Payment for expert	<u>X</u> None			
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7	Support for attending meetings and/or travel	X_None			
8	Patents planned, issued or	X_None			
	pending				
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9	Safety Monitoring Board or	X None			
	Advisory Board				
10	Leadership or fiduciary role	X None			
	in other board, society,				
	committee or advocacy				
	group, paid or unpaid				
11	Stock or stock options	<u>X</u> None			
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12	Receipt of equipment, materials, drugs, medical	X_None			
	writing, gifts or other				
	services				
13	Other financial or non-	X_None			
	financial interests				
	Please summarize the above conflict of interest in the following box: Xiao-Yan Kang have no conflicts of interest to declare.				
Dia	ase place an "Y" next to the	a following statement to in	dicate your agreement:		

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

Date: May 1 2023

Your Name: Chun-Song Kang

Manuscript Title: <u>Upper Trapezius Muscle Elasticity in Cervical Myofascial Pain Syndrome Measured Using Real-time</u>

Ultrasound Shear-Wave Elastography

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3	Royalties or licenses	XNone	
4	Consulting fees	X_None	

5	Payment or honoraria for lectures, presentations,	X_None	
	speakers bureaus,		
	manuscript writing or		
	educational events		
6	Payment for expert	X_None	
	testimony		
7	Support for attending meetings and/or travel	X_None	
8	Patents planned, issued or	X_None	
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9	Participation on a Data	X_None	
	Safety Monitoring Board or Advisory Board		
10	Leadership or fiduciary role	X None	
10	in other board, society,	X_None	
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11	Stock or stock options	X None	
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12	Receipt of equipment, materials, drugs, medical writing, gifts or other	<u>X</u> None	
10	services		
13	Other financial or non- financial interests	X_None	
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	Cl C IZ 1		1
	Chun-Song Kang have no	conflicts of interest to de	eclare.
L			
Ple	ease place an "X" next to the	e following statement to ir	dicate vour agreement:

Date: May 1 2023
Your Name: Ting-Ting Li

Manuscript Title: Upper Trapezius Muscle Elasticity in Cervical Myofascial Pain Syndrome Measured Using Real-time

Ultrasound Shear-Wave Elastography

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		Time frame: past	36 months
2	Grants or contracts from	X_None	
	any entity (if not indicated		
	in item #1 above).		
3	Royalties or licenses	XNone	
4	Consulting fees	X_None	

5	Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or educational events	X None	
6	Payment for expert testimony	X_None	
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7	Support for attending meetings and/or travel	XNone	
0	Datants planned issued or	X None	
8	Patents planned, issued or pending	X_None	
	pending		
9	Participation on a Data	X None	
	Safety Monitoring Board or		
	Advisory Board		
10	Leadership or fiduciary role	X_None	
	in other board, society,		
	committee or advocacy		
11	group, paid or unpaid Stock or stock options	X None	
11	Stock of Stock options	<u>X_NOTE</u>	
12	Receipt of equipment,	X None	
	materials, drugs, medical		
	writing, gifts or other		
	services		
13	Other financial or non- financial interests	X_None	
	financiai interests		
	ase summarize the above c		
Ple	ase place an "X" next to the	e following statement to ir	ndicate your agreement:

Date: May 1 2023

Your Name: Jian-Zhong Huo

Manuscript Title: <u>Upper Trapezius Muscle Elasticity in Cervical Myofascial Pain Syndrome Measured Using Real-time</u>

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3	Royalties or licenses	X_None	
4	Consulting fees	X None	

5	Payment or honoraria for lectures, presentations,	X_None	
	speakers bureaus,		
	manuscript writing or		
	educational events		
6	Payment for expert	X_None	
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7	Support for attending meetings and/or travel	<u>X</u> None	
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8	Patents planned, issued or	X_None	
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10	Leadership or fiduciary role	X None	
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	ase summarize the above c		
DIA	asa nlaca an "Y" novt to the	a following statement to in	dicate your agreement:

Date: May 1 2023
Your Name: Qian Xu

Manuscript Title: <u>Upper Trapezius Muscle Elasticity in Cervical Myofascial Pain Syndrome Measured Using Real-time</u>

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3	Royalties or licenses	XNone	
4	Consulting fees	X_None	

5	Payment or honoraria for lectures, presentations,	X_None			
	speakers bureaus,				
	manuscript writing or				
	educational events				
6	Payment for expert	<u>X</u> None			
	testimony				
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7	Support for attending meetings and/or travel	<u>X</u> None			
8	Patents planned, issued or	X_None			
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9	Participation on a Data	X_None			
	Safety Monitoring Board or Advisory Board				
10	Leadership or fiduciary role	X None			
10	in other board, society,	X_None			
	committee or advocacy				
	group, paid or unpaid				
11	Stock or stock options	X_None			
12	Receipt of equipment,	<u>X</u> None			
	materials, drugs, medical				
	writing, gifts or other services				
13	Other financial or non-	X None			
13	financial interests	<u>X_None</u>			
Ple	Please summarize the above conflict of interest in the following box:				
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	Qian Xu have no conflict	of interest to declare.			
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Ple	ase place an "X" next to the	e following statement to in	ndicate your agreement:		

Date: May 1 2023 Your Name: Wen-Li Xiao

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3	Royalties or licenses	X_None	
4	Consulting fees	X None	

5	Payment or honoraria for	<u>X</u> None			
	lectures, presentations, speakers bureaus,				
	manuscript writing or				
	educational events				
6	Payment for expert	X_None			
	testimony				
7	Support for attending meetings and/or travel	<u>X</u> None			
8	Patents planned, issued or	X_None			
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9	Participation on a Data	X_None			
	Safety Monitoring Board or				
10	Advisory Board	V Name			
10	Leadership or fiduciary role in other board, society,	<u>X</u> None			
	committee or advocacy				
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11	Stock or stock options	X None			
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12	Receipt of equipment,	<u>X</u> None			
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	writing, gifts or other services				
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	Please summarize the above conflict of interest in the following box:				
	Wen-Li Xiao have no conflict of interest to declare.				
DIA	ease place an "X" next to the	a fallowing statement to it	adicate your agreement:		
rie	ase place all A liext to til	z ronownig statemient to il	idicate your agreement.		

Date: May 1 2023

Your Name: Zhe-Xia Zhao

Manuscript Title: <u>Upper Trapezius Muscle Elasticity in Cervical Myofascial Pain Syndrome Measured Using Real-time</u>

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5	Payment or honoraria for	<u>X</u> None			
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6	Payment for expert	X_None			
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11	Stock or stock options	<u>X</u> None			
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PIE	Please summarize the above conflict of interest in the following box:				
	Zhe-Xia Zhao have no conflict of interest to declare.				
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Ple	ease place an "X" next to the	e following statement to ir	dicate vour agreement:		

Date: <u>May 1 2023</u> Your Name:<u>Xing-Hua Ji</u>

Manuscript Title: Upper Trapezius Muscle Elasticity in Cervical Myofascial Pain Syndrome Measured Using Real-time

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		Time frame: past	36 months
2	Grants or contracts from any entity (if not indicated in item #1 above).	X_None	
3	Royalties or licenses	X_None	
4	Consulting fees	X_None	

5	Payment or honoraria for	<u>X</u> None			
	lectures, presentations, speakers bureaus,				
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11	Stock or stock options	<u>X</u> None			
12	Receipt of equipment,	<u>X</u> None			
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Ple	Please summarize the above conflict of interest in the following box:				
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	Xing-Hua Ji have no conflict of interest to declare.				
<u>-</u>					
Ple	ease place an "X" next to the	e following statement to in	dicate vour agreement:		

Date: May 1 2023

Your Name: Quan-Bin Zhang

Manuscript Title: <u>Upper Trapezius Muscle Elasticity in Cervical Myofascial Pain Syndrome Measured Using Real-time</u>

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3	Royalties or licenses	X_None	
4	Consulting fees	XNone	

5	Payment or honoraria for lectures, presentations,	<u>X</u> None			
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	educational events				
6	Payment for expert	<u>X</u> None			
	testimony				
7	Support for attending meetings and/or travel	<u>X</u> None			
8	Patents planned, issued or	<u>X</u> None			
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9	Participation on a Data	X_None			
	Safety Monitoring Board or				
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10	Leadership or fiduciary role	<u>X</u> None			
	in other board, society, committee or advocacy				
	group, paid or unpaid				
11	Stock or stock options	X None			
	Stock of Stock options	<u>X</u>			
12	Receipt of equipment,	X None			
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	financial interests				
Ple	Please summarize the above conflict of interest in the following box:				
	Ouan-Rin 7hang have no	conflict of interest to dec	lare		
	Quan-Bin Zhang have no conflict of interest to declare.				
Ple	ease place an "X" next to the	e following statement to ir	dicate your agreement:		