

## ICMJE DISCLOSURE FORM

Date: 20/12/2022

Your

Name: Zhikang\_Xu

Manuscript Title: Combination of ultra micro angiography and sound touch elastography for diagnosis of primary Sjögren's syndrome: a foundation study

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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8	Patents planned, issued or pending	<u>      </u> None	
9	Participation on a Data Safety Monitoring Board or Advisory Board	<u>      </u> None	
10	Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid	<u>      </u> None	
11	Stock or stock options	<u>      </u> None	
12	Receipt of equipment, materials, drugs, medical writing, gifts or other services	<u>      </u> None	
13	Other financial or non-financial interests	<u>      </u> None	

**Please summarize the above conflict of interest in the following box:**

None
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**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.

## ICMJE DISCLOSURE FORM

Date: 20/12/2022  
 Your Name: Rumei Li  
 Manuscript Title: Combination of ultra micro angiography and sound touch elastography for diagnosis of primary Sjögren’s syndrome: a foundation study  
 Manuscript number (if known): \_\_\_\_\_

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## ICMJE DISCLOSURE FORM

Date: 20/12/2022

Your Name: Bin Xia

Manuscript Title: Combination of ultra micro angiography and sound touch elastography for diagnosis of primary Sjögren's syndrome: a foundation study

Manuscript number (if known): \_\_\_\_\_

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## ICMJE DISCLOSURE FORM

Date: 20/12/2022

Your Name: Meijuan Jiang

Manuscript Title: Combination of ultra micro angiography and sound touch elastography for diagnosis of primary Sjögren's syndrome: a foundation study

Manuscript number (if known): \_\_\_\_\_

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## ICMJE DISCLOSURE FORM

Date: 20/12/2022

Your Name: Xiaojin Wu

Manuscript Title: Combination of ultra micro angiography and sound touch elastography for diagnosis of primary Sjögren's syndrome: a foundation study

Manuscript number (if known): \_\_\_\_\_

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## ICMJE DISCLOSURE FORM

Date: 20/12/2022

Your Name: Xuanxuan Zhang

Manuscript Title: Combination of ultra micro angiography and sound touch elastography for diagnosis of primary Sjögren's syndrome: a foundation study

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Your Name: Jianlian Pan

Manuscript Title: Combination of ultra micro angiography and sound touch elastography for diagnosis of primary Sjögren's syndrome: a foundation study

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Your Name: Jian chen

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