| Da | te:Dec-28-2021 | | |
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| Yo | ur Name:Fang Zhang_ | | |
| Ma | anuscript Title: Co-existen | ce of Graves' disease and p | orimary hyperparathyroidism: a case description |
| Ma | anuscript number (if known) | : QIMS-21-956 | |
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| | | | relationships/activities/interests listed below that are 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 |
| | ationship/activity/interest, | - | • |
| | e following questions apply anuscript only. | to the author's relationshi | ps/activities/interests as they relate to the <u>current</u> |
| to | • | ension, you should declare | defined broadly. For example, if your manuscript pertains all relationships with manufacturers of antihypertensive the manuscript. |
| | item #1 below, report all su e time frame for disclosure i | | d 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 | institution) |
| | | none (add rows as | |
| | | needed) | |
| | | Time frame: Since the initial | planning of the work |
| 1 | All support for the present | XNone | |
| | manuscript (e.g., funding, | | |
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| | provision of study materials, | | |
| | provision of study materials, medical writing, article | | |
| | provision of study materials, medical writing, article processing charges, etc.) | | |
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| | 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). | XNone | 36 months |
| | 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). | XNone | 36 months |

| 5 | Payment or honoraria for lectures, presentations, | XNone | |
|-----|--|----------------------------|----------------|
| | speakers bureaus, manuscript writing or educational events | | |
| 6 | Payment for expert testimony | X None | |
| | testimony | | |
| 7 | Support for attending meetings and/or travel | X None | |
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| 8 | Patents planned, issued or | X None | |
| | pending | | |
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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, | XNone | |
| | committee or advocacy | | |
| | group, paid or unpaid | | |
| 11 | Stock or stock options | X None | |
| | · | | |
| | | | |
| 12 | Receipt of equipment, | X None | |
| | materials, drugs, medical | | |
| | writing, gifts or other services | | |
| 13 | Other financial or non- financial interests | X None | |
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| Ple | ease summarize the above c | onflict of interest in the | following box: |
| | None. | | |
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| Da | te:Dec, 28 th , 2021 | | |
|---------------------|--|--|---|
| Yo | ur Name:Xiaohui Pan_ | | |
| Ma | anuscript Title: Co-existen | ce of Graves' disease and p | orimary hyperparathyroidism: a case description |
| Ma | anuscript number (if known) |): QIMS-21-956 | |
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| rel pa to rel Th ma | ated to the content of your rties whose interests may be transparency and does not ationship/activity/interest, e following questions apply anuscript only. e author's relationships/activity/interest, | manuscript. "Related" mea e affected by the content on necessarily indicate a bias. it is preferable that you do to the author's relationship ivities/interests should be ension, you should declare | 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 |
| | item #1 below, report all su e time frame for disclosure i | | d 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 | institution) |
| | | none (add rows as | |
| | | needed) | |
| | | 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. | | |
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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 | |
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| 1 | Consulting fees | X None | |
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| 5 | Payment or honoraria for lectures, presentations, | XNone | |
|-----|--|----------------------------|----------------|
| | speakers bureaus, manuscript writing or educational events | | |
| 6 | Payment for expert testimony | X None | |
| | testimony | | |
| 7 | Support for attending meetings and/or travel | X None | |
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| 8 | Patents planned, issued or | X None | |
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| 10 | Leadership or fiduciary role in other board, society, | XNone | |
| | committee or advocacy | | |
| | group, paid or unpaid | | |
| 11 | Stock or stock options | X None | |
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| 12 | Receipt of equipment, | X None | |
| | materials, drugs, medical | | |
| | writing, gifts or other services | | |
| 13 | Other financial or non- financial interests | X None | |
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| Ple | ease summarize the above c | onflict of interest in the | following box: |
| | None. | | |
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| Date:Dec, 28 th , 2021 | |
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| Your Name:Nanwei Tong | |
| Manuscript Title: Co-existence of Graves' disease and primary hyperparathyroidism: a case description | n |
| Manuscript number (if known): QIMS-21-956 | |
| 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-profi | |
| parties whose interests may be affected by the content of the manuscript. Disclosure represents a com- | |
| 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. | |
| The following questions apply to the author's relationships/activities/interests as they relate to the <u>cur</u> <u>manuscript only</u> . | <u>rent</u> |
| The author's relationships/activities/interests should be <u>defined broadly</u> . For example, if your manuscri | nt nertains |
| to the epidemiology of hypertension, you should declare all relationships with manufacturers of antihy | |
| medication, even if that medication is not mentioned in the manuscript. | |
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| In item #1 below, report all support for the work reported in this manuscript without time limit. For all the time frame for disclosure is the past 36 months. | otner items, |
| the time frame for disclosure is the past so months. | |
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| 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) | |
| relationship or indicate institution) | |
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| | speakers bureaus, manuscript writing or educational events | | |
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| | testimony | | |
| 7 | Support for attending meetings and/or travel | X None | |
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| 8 | Patents planned, issued or | X None | |
| | pending | | |
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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, | XNone | |
| | committee or advocacy | | |
| | group, paid or unpaid | | |
| 11 | Stock or stock options | X None | |
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| 12 | Receipt of equipment, | X None | |
| | materials, drugs, medical | | |
| | writing, gifts or other services | | |
| 13 | Other financial or non- financial interests | X None | |
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| Ple | ease summarize the above c | onflict of interest in the | following box: |
| | None. | | |
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| | ur Name:Qingguo Lü_ | | |
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| Ma | nuscript Title: Co-existen | ce of Graves' disease and p | primary hyperparathyroidism: a case description |
| Ma | nuscript number (if known) |): QIMS-21-956 | |
| rel parto rel The ma | ated to the content of your rties whose interests may be transparency and does not ationship/activity/interest, e following questions apply muscript only. e author's relationships/activite epidemiology of hypertedication, 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 initia | l 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 | |
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| | committee or advocacy | | |
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| 12 | Receipt of equipment, | X None | |
| | materials, drugs, medical | | |
| | writing, gifts or other services | | |
| 13 | Other financial or non- financial interests | X None | |
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| Ple | ease summarize the above c | onflict of interest in the | following box: |
| | None. | | |
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