Date:	_May	15,	2023
Your Na	ame:_		_Xiang Gao
Manusc	cript T	itle:_	Analysis on the clinical features of children infected with the SARS-CoV-2 Omicron variant- a
retrosp	ective	obs	ervational cohort study
Manusc	cript n	umb	per (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.

The following questions apply to the author's relationships/activities/interests as they relate to the <u>current manuscript only</u>.

The author's relationships/activities/interests should be <u>defined broadly</u>. For example, if your manuscript pertains to the epidemiology of hypertension, you should declare all relationships with manufacturers of antihypertensive medication, even if that medication is not mentioned in the manuscript.

		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)
	T	Time frame: Since the initial	planning of the work
1	All support for the present	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	None	
	any entity (if not indicated		
	in item #1 above).		
3	Royalties or licenses	None	
4	Consulting fees	None	

		T			
5	Payment or honoraria for	None			
	lectures, presentations,				
	speakers bureaus,				
	manuscript writing or				
	educational events				
6	Payment for expert	None			
	testimony				
	•				
7	Support for attending	None			
,	meetings and/or travel				
	meetings and/or traver				
8	Patents planned, issued or	None			
	pending				
9	Participation on a Data	None			
	Safety Monitoring Board or				
	Advisory Board				
10	Leadership or fiduciary role	None			
	in other board, society,				
	committee or advocacy				
	group, paid or unpaid				
11	Stock or stock options	None			
12	Receipt of equipment,	None			
	materials, drugs, medical				
	writing, gifts or other				
	services				
13	Other financial or non-	None			
	financial interests				
Pla	ease summarize the above co	onflict of interest in the fo	allowing hox:		
	and Janimarize the above to				
	None.				
	140116.				

Date:May 15,	2023
Your Name:	_Debao Li
<b>Manuscript Title:</b>	Analysis on the clinical features of children infected with the SARS-CoV-2 Omicron variant- a
retrospective obs	servational cohort study
Manuscript numl	per (if known):

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	speakers bureaus,				
	manuscript writing or				
	educational events				
6	Payment for expert	None			
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7	Support for attending	None			
,	meetings and/or travel				
	meetings and/or traver				
8	Patents planned, issued or	None			
	pending				
9	Participation on a Data	None			
	Safety Monitoring Board or				
	Advisory Board				
10	Leadership or fiduciary role	None			
	in other board, society,				
	committee or advocacy				
	group, paid or unpaid				
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12	Receipt of equipment,	None			
	materials, drugs, medical				
	writing, gifts or other				
	services				
13	Other financial or non-	None			
	financial interests				
Pla	ease summarize the above co	onflict of interest in the fo	allowing hox:		
	and Janimarize the above to				
	None.				
	140116.				

Date:May 15, 2023
Your Name:Xiuling Cheng
Manuscript Title: Analysis on the clinical features of children infected with the SARS-CoV-2 Omicron variant-
retrospective observational cohort study
Manuscript number (if known):

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	in item #1 above).		
3	Royalties or licenses	None	
4	Consulting fees	None	

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5	Payment or honoraria for	None				
	lectures, presentations,					
	speakers bureaus,					
	manuscript writing or					
	educational events					
6	Payment for expert	None				
	testimony					
7	Support for attending	None				
	meetings and/or travel					
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8	Patents planned, issued or	None				
	pending					
9	Participation on a Data	None				
	Safety Monitoring Board or					
	Advisory Board					
10	Leadership or fiduciary role	None				
	in other board, society,					
	committee or advocacy					
	group, paid or unpaid					
11	Stock or stock options	None				
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12	Receipt of equipment,	None				
	materials, drugs, medical					
	writing, gifts or other					
4.5	services					
13	Other financial or non-	None				
	financial interests					
Ple	ease summarize the above c	onflict of interest in the fo	llowing box:			
	None.					

Date:May	15, 2	023
Your Name:	Xi	aoxia Xin
<b>Manuscript Tit</b>	tle:	_ Analysis on the clinical features of children infected with the SARS-CoV-2 Omicron variant- a
retrospective of	obser	vational cohort study
Manuscript nu	ımber	(if known):

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3	Royalties or licenses	None	
4	Consulting fees	None	

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5	Payment or honoraria for	None			
	lectures, presentations,				
	speakers bureaus,				
	manuscript writing or				
	educational events				
6	Payment for expert	None			
	testimony				
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7	Support for attending	None			
,	meetings and/or travel				
	meetings and/or traver				
8	Patents planned, issued or	None			
	pending				
9	Participation on a Data	None			
	Safety Monitoring Board or				
	Advisory Board				
10	Leadership or fiduciary role	None			
	in other board, society,				
	committee or advocacy				
	group, paid or unpaid				
11	Stock or stock options	None			
12	Receipt of equipment,	None			
	materials, drugs, medical				
	writing, gifts or other				
	services				
13	Other financial or non-	None			
	financial interests				
Pla	ease summarize the above co	onflict of interest in the fo	allowing hox:		
	and Janimarize the above to				
	None.				
	140116.				

Date: N	∕lay 4,	2023
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Your Name: Antonio F. Corno

Manuscript Title: Analysis on the Clinical features of children infected with the SARS-CoV-2 Omicron variant Manuscript number (if known):

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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	
3	Royalties or licenses	XNone	
4	Consulting fees	XNone	

5	Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or educational events	XNone	
6	Payment for expert testimony	XNone	
7	Support for attending meetings and/or travel	XNone	
8	Patents planned, issued or pending	XNone	
9	Participation on a Data Safety Monitoring Board or Advisory Board	XNone	
10	Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid	XNone	
11	Stock or stock options	XNone	
12	Receipt of equipment, materials, drugs, medical writing, gifts or other services	XNone	
13	Other financial or non- financial interests	XNone	
	Please summarize the above conflict of interest in the following box:  None.		

Date: May 4, 2023
Your Name: Alessandro Boscarelli
Manuscript Title: Analysis on the Clinical features of children infected with the SARS-CoV-2 Omicron variant
Manuscript number (if known):

Data: Na.: 4 2022

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

5	Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or educational events	XNone	
6	Payment for expert testimony	XNone	
7	Support for attending meetings and/or travel	XNone	
8	Patents planned, issued or pending	XNone	
9	Participation on a Data Safety Monitoring Board or Advisory Board	XNone	
10	Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid	XNone	
11	Stock or stock options	XNone	
12	Receipt of equipment, materials, drugs, medical writing, gifts or other services	XNone	
13	Other financial or non- financial interests	XNone	
	Please summarize the above conflict of interest in the following box:  None.		

Date:May 15,	2023
Your Name:	_ Xinping Du
<b>Manuscript Title:</b>	Analysis on the clinical features of children infected with the SARS-CoV-2 Omicron variant- a
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Manuscript numl	per (if known):

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3	Royalties or licenses	None	
4	Consulting fees	None	

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5	Payment or honoraria for	None	
	lectures, presentations,		
	speakers bureaus,		
	manuscript writing or		
	educational events		
6	Payment for expert	None	
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<b>'</b>	meetings and/or travel	None	
	meetings and/or traver		
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9	Participation on a Data	None	
	Safety Monitoring Board or		
	Advisory Board		
10	Leadership or fiduciary role	None	
	in other board, society,		
	committee or advocacy		
	group, paid or unpaid		
11	Stock or stock options	None	
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12	Receipt of equipment,	None	
12	materials, drugs, medical	None	
	writing, gifts or other		
40	services		
13	Other financial or non-	None	
	financial interests		
Ple	ease summarize the above c	onflict of interest in the fo	llowing box:
	None.		