

ICMJE Form for Disclosure of Potential Conflicts of Interest

Instructions

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Section 1. Identifying Information

1. Given Name (First Name) Jun	2. Surname (Last Name) Wang	3. Date 06-January-2021
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Min Gu
5. Manuscript Title Patient Transfer Influences the Prognosis of Pediatric Patients Operated for Testicular Torsion: A Single-Center Experience		
6. Manuscript Identifying Number (if you know it) TP-20-287		

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Nannan

2. Surname (Last Name)

Gu

3. Date

06-January-2021

4. Are you the corresponding author?

Yes No

Corresponding Author's Name

Min Gu

5. Manuscript Title

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1. Given Name (First Name)

Liqu

2. Surname (Last Name)

Huang

3. Date

06-January-2021

4. Are you the corresponding author?

Yes

No

Corresponding Author's Name

Min Gu

5. Manuscript Title

Patient Transfer Influences the Prognosis of Pediatric Patients Operated for Testicular Torsion: A Single-Center Experience

6. Manuscript Identifying Number (if you know it)

TP-20-287

Section 2. The Work Under Consideration for Publication

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Are there any relevant conflicts of interest?

Yes

No

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Are there any relevant conflicts of interest?

Yes

No

Section 4. Intellectual Property -- Patents & Copyrights

Do you have any patents, whether planned, pending or issued, broadly relevant to the work?

Yes

No

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Section 5. Relationships not covered above

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Section 6. Disclosure Statement

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Dr. Huang has nothing to disclose.

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name) Chenjun	2. Surname (Last Name) Chen	3. Date 06-January-2021
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Min Gu
5. Manuscript Title Patient Transfer Influences the Prognosis of Pediatric Patients Operated for Testicular Torsion: A Single-Center Experience		
6. Manuscript Identifying Number (if you know it) TP-20-287		

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Wang

3. Date

06-January-2021

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No

Corresponding Author's Name

Min Gu

5. Manuscript Title

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6. Manuscript Identifying Number (if you know it)

TP-20-287

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name) Jun	2. Surname (Last Name) Dong	3. Date 06-January-2021
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Min Gu
5. Manuscript Title Patient Transfer Influences the Prognosis of Pediatric Patients Operated for Testicular Torsion: A Single-Center Experience		
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Are there any relevant conflicts of interest? Yes No

Section 4. Intellectual Property -- Patents & Copyrights

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3. Relevant financial activities outside the submitted work.

This section asks about your financial relationships with entities in the bio-medical arena that could be perceived to influence, or that give the appearance of potentially influencing, what you wrote in the submitted work. You should disclose interactions with ANY entity that could be considered broadly relevant to the work. For example, if your article is about testing an epidermal growth factor receptor (EGFR) antagonist in lung cancer, you should report all associations with entities pursuing diagnostic or therapeutic strategies in cancer in general, not just in the area of EGFR or lung cancer.

Report all sources of revenue paid (or promised to be paid) directly to you or your institution on your behalf over the 36 months prior to submission of the work. This should include all monies from sources with relevance to the submitted work, not just monies from the entity that sponsored the research. Please note that your interactions with the work's sponsor that are outside the submitted work should also be listed here. If there is any question, it is usually better to disclose a relationship than not to do so.

For grants you have received for work outside the submitted work, you should disclose support ONLY from entities that could be perceived to be affected financially by the published work, such as drug companies, or foundations supported by entities that could be perceived to have a financial stake in the outcome. Public funding sources, such as government agencies, charitable foundations or academic institutions, need not be disclosed. For example, if a government agency sponsored a study in which you have been involved and drugs were provided by a pharmaceutical company, you need only list the pharmaceutical company.

4. Intellectual Property.

This section asks about patents and copyrights, whether pending, issued, licensed and/or receiving royalties.

5. Relationships not covered above.

Use this section to report other relationships or activities that readers could perceive to have influenced, or that give the appearance of potentially influencing, what you wrote in the submitted work.

Definitions.

Entity: government agency, foundation, commercial sponsor, academic institution, etc.

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Other: Anything not covered under the previous three boxes

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Royalties: Funds are coming in to you or your institution due to your patent

ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)

Yunfei

2. Surname (Last Name)

Guo

3. Date

06-January-2021

4. Are you the corresponding author?

Yes

No

Corresponding Author's Name

Min Gu

5. Manuscript Title

Patient Transfer Influences the Prognosis of Pediatric Patients Operated for Testicular Torsion: A Single-Center Experience

6. Manuscript Identifying Number (if you know it)

TP-20-287

Section 2. The Work Under Consideration for Publication

Did you or your institution **at any time** receive payment or services from a third party (government, commercial, private foundation, etc.) for any aspect of the submitted work (including but not limited to grants, data monitoring board, study design, manuscript preparation, statistical analysis, etc.)?

Are there any relevant conflicts of interest?

Yes

No

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Are there any relevant conflicts of interest?

Yes

No

Section 4. Intellectual Property -- Patents & Copyrights

Do you have any patents, whether planned, pending or issued, broadly relevant to the work?

Yes

No

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At the time of manuscript acceptance, journals will ask authors to confirm and, if necessary, update their disclosure statements. On occasion, journals may ask authors to disclose further information about reported relationships.

Section 6. Disclosure Statement

Based on the above disclosures, this form will automatically generate a disclosure statement, which will appear in the box below.

Dr. Guo has nothing to disclose.

Evaluation and Feedback

Please visit <http://www.icmje.org/cgi-bin/feedback> to provide feedback on your experience with completing this form.

ICMJE Form for Disclosure of Potential Conflicts of Interest

Instructions

The purpose of this form is to provide readers of your manuscript with information about your other interests that could influence how they receive and understand your work. The form is designed to be completed electronically and stored electronically. It contains programming that allows appropriate data display. Each author should submit a separate form and is responsible for the accuracy and completeness of the submitted information. The form is in six parts.

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Are there any relevant conflicts of interest? Yes No

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Do you have any patents, whether planned, pending or issued, broadly relevant to the work? Yes No

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