

ICMJE DISCLOSURE FORM

Date: Sep. 13th, 2021

Your Name: Suk Jin Hong

Manuscript Title: The occurrence of infection-related systemic diseases in Korean children and adolescents has decreased after the spread of the COVID-19 pandemic; a multicenter retrospective study

Manuscript number (if known): TP-21-315

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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Time frame: past 36 months			
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3	Royalties or licenses	<u> X </u> None	
4	Consulting fees	<u> X </u> None	

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13	Other financial or non-financial interests	<input checked="" type="checkbox"/> None	

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

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

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Date: Sep. 13th, 2021

Your Name: Ben Kang

Manuscript Title: The occurrence of infection-related systemic diseases in Korean children and adolescents has decreased after the spread of the COVID-19 pandemic; a multicenter retrospective study

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No conflicts of interest to declare.
This work was supported by the National Research Foundation of Korea (NRF) grant funded by the Korean government (MSIT) (No. 2021R1A2C1011004

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Date: Sep. 13th, 2021

Your Name: Jun Hyun Hwang

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Date: Sep. 13th, 2021

Your Name: Yoo Min Lee

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Your Name: Kyung Jae Lee

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Date: Sep. 13th, 2021

Your Name: Soon Chul Kim

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

None.

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

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: Sep. 13th, 2021

Your Name: You Jin Choi

Manuscript Title: The occurrence of infection-related systemic diseases in Korean children and adolescents has decreased after the spread of the COVID-19 pandemic; a multicenter retrospective study

Manuscript number (if known): TP-21-315

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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ICMJE DISCLOSURE FORM

Date: Sep. 13th, 2021

Your Name: Eun Hye Lee

Manuscript Title: The occurrence of infection-related systemic diseases in Korean children and adolescents has decreased after the spread of the COVID-19 pandemic; a multicenter retrospective study

Manuscript number (if known): TP-21-315

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ICMJE DISCLOSURE FORM

Date: Sep. 13th, 2021

Your Name: So Yoon Choi

Manuscript Title: The occurrence of infection-related systemic diseases in Korean children and adolescents has decreased after the spread of the COVID-19 pandemic; a multicenter retrospective study

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ICMJE DISCLOSURE FORM

Date: Sep. 13th, 2021

Your Name: Eunjoon Lee

Manuscript Title: The occurrence of infection-related systemic diseases in Korean children and adolescents has decreased after the spread of the COVID-19 pandemic; a multicenter retrospective study

Manuscript number (if known): TP-21-315

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ICMJE DISCLOSURE FORM

Date: Sep. 13th, 2021

Your Name: Byung-Ho Choe

Manuscript Title: The occurrence of infection-related systemic diseases in Korean children and adolescents has decreased after the spread of the COVID-19 pandemic; a multicenter retrospective study

Manuscript number (if known): TP-21-315

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ICMJE DISCLOSURE FORM

Date: Sep. 13th, 2021

Your Name: Soo Ahn Chae

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ICMJE DISCLOSURE FORM

Date: Sep. 13th, 2021

Your Name: Sujin Choi

Manuscript Title: The occurrence of infection-related systemic diseases in Korean children and adolescents has decreased after the spread of the COVID-19 pandemic; a multicenter retrospective study

Manuscript number (if known): TP-21-315

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ICMJE DISCLOSURE FORM

Date: Sep. 13th, 2021

Your Name: Won Suk Suh

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ICMJE DISCLOSURE FORM

Date: Sep. 13th, 2021

Your Name: Jeonglyn Song

Manuscript Title: The occurrence of infection-related systemic diseases in Korean children and adolescents has decreased after the spread of the COVID-19 pandemic; a multicenter retrospective study

Manuscript number (if known): TP-21-315

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ICMJE DISCLOSURE FORM

Date: Sep. 13th, 2021

Your Name: Dae Yong Yi

Manuscript Title: The occurrence of infection-related systemic diseases in Korean children and adolescents has decreased after the spread of the COVID-19 pandemic; a multicenter retrospective study

Manuscript number (if known): TP-21-315

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7	Support for attending meetings and/or travel	<input checked="" type="checkbox"/> None	
8	Patents planned, issued or pending	<input checked="" type="checkbox"/> None	
9	Participation on a Data Safety Monitoring Board or Advisory Board	<input checked="" type="checkbox"/> None	
10	Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid	<input checked="" type="checkbox"/> None	
11	Stock or stock options	<input checked="" type="checkbox"/> None	
12	Receipt of equipment, materials, drugs, medical writing, gifts or other services	<input checked="" type="checkbox"/> None	
13	Other financial or non-financial interests	<input checked="" type="checkbox"/> None	

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

None.

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

I certify that I have answered every question and have not altered the wording of any of the questions on this form.