## **ICMJE DISCLOSURE FORM**

Date:
Your Name: Limei Geng
Manuscript Title: Retrospective study of Rougan Tongdu Tuina combined with point-pressing massage therapy on
neurodevelopment in children with delayed motor development at very early stage _
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.

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.

In item #1 below, report all support for the work reported in this manuscript without time limit. For all other items, the time frame for disclosure is the past 36 months.

		Name all entities with whom you have this relationship or indicate none (add rows as needed) Time frame: Since the initial	Specifications/Comments (e.g., if payments were made to you or to your institution)  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.	Guizhou Province Science and Technology Cooperation Project (Qiankehe LH [2016]7522).	
		Time frame: past	36 months
2	Grants or contracts from any entity (if not indicated in item #1 above).	vNone	
3	Royalties or licenses	vNone	

4 Consulting fees  V_None  Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or educational events  Payment for expert testimony  Support for attending meetings and/or travel  Patents planned, issued or pending  Participation on a Data Safety Monitoring Board or Advisory Board  Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid  Receipt of equipment, materials, drugs, medical writing, gifts or other  V_None  V_None				
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lectures, presentations, speakers bureaus, manuscript writing or educational events   V None				
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services				
13 Other financial or non- V None	12		1/ None	
financial interests	13		vivolic	
		manetal interests		

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

Dr. Geng received funding from Guizhou Province Science and Technology Cooperation Project (Qiankehe LH [2016]7522) and has nothing else to disclose.

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:
Your Name: Yang Yang
Manuscript Title: Retrospective study of Rougan Tongdu Tuina combined with point-pressing massage therapy on
neurodevelopment in children with delayed motor development at very early stage _
Manuscript number (if known):

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3	Royalties or licenses	vNone	

4	Consulting fees	vNone	
5	Payment or honoraria for	vNone	
	lectures, presentations,		
	speakers bureaus,		
	manuscript writing or educational events		
6	Payment for expert	√ None	
U	testimony		
	,		
7	Support for attending	√ None	
	meetings and/or travel		
8	Patents planned, issued or	vNone	
	pending		
9	Participation on a Data	vNone	
	Safety Monitoring Board or		
10	Advisory Board	/ 1	
10	Leadership or fiduciary role in other board, society,	VNone	
	committee or advocacy		
	group, paid or unpaid		
11	Stock or stock options	√ None	
	·		
12	Receipt of equipment,	v_None	
	materials, drugs, medical		
	writing, gifts or other		
12	services Other financial or non-	y/ None	
13	Other financial or non- financial interests	vNone	
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