Date:_	2021/8/13	
Your N	lame: Jing Ye	
Manus	script Title:_ Epidemiology of unintentional injury in children admitted to ICU in China mainland:	
A mult	ti-center cross-sectional study	
Manus	script number (if known): TP-21-387	

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1	All support for the present	X_None	
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	processing charges, etc.)		
	No time limit for this item.		
		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	
4	Consulting fees	XNone	

5	Payment or honoraria for lectures, presentations,	X None	
	speakers bureaus,		
	manuscript writing or		
	educational events		
6	Payment for expert	_ X None	
	testimony		
7	Support for attending meetings and/or travel	XNone	
8	Patents planned, issued or pending	XNone	
	pending		
9	Participation on a Data	X None	
9	Safety Monitoring Board or	None	
	Advisory Board		
10	Leadership or fiduciary role	X None	
	in other board, society,		
	committee or advocacy		
	group, paid or unpaid		
11	Stock or stock options	XNone	
12	Receipt of equipment,	XNone	
	materials, drugs, medical writing, gifts or other		
	services		
13	Other financial or non-	X None	
	financial interests		
Ple	ase summarize the above c	onflict of interest in the fol	lowing box:
	Dr. Ye has nothing to disclose.		
	5.5 G 7.5 3.1.2.2.2 00 .		
Ple	ase place an "X" next to the	e following statement to in	dicate 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.

Date:	2021/8/13
Your Name:	Yiyao Bao
Manuscript ³	Fitle: Epidemiology of unintentional injury in children admitted to ICU in China mainland:
A multi-cent	er cross-sectional study
Manuscript i	number (if known): TP-21-387

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		Time frame: past	36 months
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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	X None	
8	Patents planned, issued or pending	X None	
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	_X_None	
11	Stock or stock options	_XNone	
12	Receipt of equipment, materials, drugs, medical writing, gifts or other services	<u>X</u> None	
13	Other financial or non- financial interests	X None	
Ple	ease summarize the above o	onflict of interest in the	following box:
	Dr. Bao has nothing 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.

Date:	2021/	8/13		
Your Name:_		Jicui Zheng		
Manuscript 7	Γitle:_	Epidemiology of unintentional injury in children admitted to ICU in China mainland:		
A multi-center cross-sectional study				
Manuscript number (if known): TP-21-387				

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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.	Time frame: Since the initial X None	planning of the work
		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,	XNone	
	speakers bureaus, manuscript writing or educational events		
6	Payment for expert	_ X None	
	testimony		
7	Cuppert for attending	V N	
,	Support for attending meetings and/or travel	XNone	
8	Patents planned, issued or	<u>X</u> None	
	pending		
9	Participation on a Data	X None	
,	Safety Monitoring Board or	XNone	
	Advisory Board		
10	Leadership or fiduciary role	_ X None	
	in other board, society,		
	committee or advocacy		
11	group, paid or unpaid Stock or stock options	X None	
	Stock of Stock options	XNone	
12	Receipt of equipment,	XNone	
	materials, drugs, medical		
	writing, gifts or other services		
13	Other financial or non-	X None	
13	financial interests	XNone	
	ase summarize the above c		lowing box:
Ple	ase place an "X" next to the	e following statement to in	dicate your agreement:

<u>X</u> I certify that I have answered every question and have not altered the wording of any of the questions on this

form.

Date:_	20	21/8/13
Your N	ame:	Jianfeng Liang
Manus	cript Titl	e:_ Epidemiology of unintentional injury in children admitted to ICU in China mainland:
		A multi-center cross-sectional study
Manus	cript nur	nber (if known): TP-21-387

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		Time frame: past	36 months
2	Grants or contracts from any entity (if not indicated in item #1 above).	None	
3	Royalties or licenses	None	
4	Consulting fees	_X _None	

5	Payment or honoraria for lectures, presentations,	XNone	
	speakers bureaus, manuscript writing or educational events		
6	Payment for expert	_XNone	
	testimony		
7	Support for attending	X None	
,	meetings and/or travel	None	
8	Patents planned, issued or	X None	
J	pending	XNone	
9	Participation on a Data	X None	
	Safety Monitoring Board or		
10	Advisory Board	V Nove	
10	Leadership or fiduciary role in other board, society,	XNone	
	committee or advocacy		
	group, paid or unpaid		
11	Stock or stock options	XNone	
12	Receipt of equipment,	X None	
	materials, drugs, medical	<u>A</u> _None	
	writing, gifts or other		
13	services Other financial or non-	X None	
10	financial interests	_ <u>X</u> None	
Ple	ase summarize the above c	onflict of interest in the fo	lowing box:
	Dr. Liang has nothing to disclos	e.	
Ple	ase place an "X" next to the	e following statement to in	dicate your agreement:

<u>X</u> I certify that I have answered every question and have not altered the wording of any of the questions on this

form.

Date:	2021/8/13	
Your Name:	Lei Hu	
Manuscript ³	itle:_ Epidemiology of unintentional injury in children admitted to ICU in China mainland:	
	A multi-center cross-sectional study	
Manuscript	umber (if known): TP-21-387	

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3	Royalties or licenses	XNone	
4	Consulting fees	XNone	

5	Payment or honoraria for	X None	
	lectures, presentations,		
	speakers bureaus,		
	manuscript writing or		
	educational events		
6	Payment for expert	_XNone	
	testimony		
7	Command for attacked in a		
7	Support for attending meetings and/or travel	XNone	
8	Patents planned, issued or	X None	
	pending		
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9	Participation on a Data	XNone	
	Safety Monitoring Board or Advisory Board		
10	•	Y N	
10	Leadership or fiduciary role in other board, society,	<u>X</u> None	
	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-	_ <u>X</u> None	
	financial interests		
Ple	ease summarize the above c	onflict of interest in the fo	llowing box:
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Date:	_2021/	8/13
Your Name:		_Linhua Tan
Manuscript '	Title:_	Epidemiology of unintentional injury in children admitted to ICU in China mainland:
		A multi-center cross-sectional study
Manuscript	numbe	er (if known): TP-21-387

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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	X None			
	pending				
9	Participation on a Data	V None			
3	Safety Monitoring Board or	XNone			
10	Advisory Board Leadership or fiduciary role	X None			
10	in other board, society,	XNone			
	committee or advocacy group, paid or unpaid				
11	Stock or stock options	_XNone			
12	Receipt of equipment,	X None			
	materials, drugs, medical				
	writing, gifts or other services				
13	Other financial or non-	_ X None			
	financial interests				
Ple	Please summarize the above conflict of interest in the following box:				
	Dr. Tan has nothing to disclose.				
L					
Ple	ease place an "X" next to the	e following statement to inc	icate your agreement:		

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