Date: <u>June. 10</u>	^h , 2021
Your Name:	Sang-Hoon Lee
Manuscript Title: _	Comparison of Clinical Characteristics and the Appropriateness of Admission of
ICU Patients: Before	re and After the Implementation of the Well-Dying Law in Korea
Manuscript numbe	er (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.

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		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)
		Time frame: Since the initia	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.	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	

		I	
5	Payment or honoraria for	XNone	
	lectures, presentations,		
	speakers bureaus,		
	manuscript writing or		
	educational events		
6	Payment for expert	XNone	
	testimony		
7	Support for attending meetings and/or travel	XNone	
	meetings unay or crave.		
8	Patents planned, issued or	XNone	
	pending		
9	Participation on a Data	XNone	
	Safety Monitoring Board or		
	Advisory Board		
10	Leadership or fiduciary role	XNone	
	in other board, society,		
	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-	XNone	
	financial interests		
			1

None.	

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

Date: <u>June. 10th</u>	<u>, 2021</u>
Your Name: <u>Je</u>	<u>e-min Kim</u>
Manuscript Title:	Comparison of Clinical Characteristics and the Appropriateness of Admission of
ICU Patients: Before	e and After the Implementation of the Well-Dying Law in Korea
Manuscript number	· (if known):

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	group, paid or unpaid		
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	·		
12	Receipt of equipment,	X_None	
	materials, drugs, medical		
	writing, gifts or other		
	services		
13	Other financial or non-	XNone	
	financial interests		
			1

None.	

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

Date: <u>June. 10th, 2021</u>	
Your Name: Yohwan Yeo	
Manuscript Title: Comparison of Clinical Characteristics and the Appropriateness of Adm	ssion of
ICU Patients: Before and After the Implementation of the Well-Dying Law in Korea	
Manuscrint number (if known)	

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	writing, gifts or other		
	services		
13	Other financial or non-	XNone	
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None.	

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

Date: <u>June. 10th, 2021</u>						
Your Name: Junghyun Kim						
Manuscript Title: Comparison of Clinical Characteristics and the Appropriateness of Admission of						
CU Patients: Before and After the Implementation of the Well-Dying Law in Korea						
Manuscrint number (if known):						

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11	Stock or stock options	XNone	
12	Receipt of equipment, materials, drugs, medical writing, gifts or other services	X_None	
13	Other financial or non- financial interests	XNone	

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