

ICMJE DISCLOSURE FORM

Date: Sep. 5th, 2022

Your Name: Hee Tae Shin

Manuscript Title: Fully-immersive virtual reality instrumental activities of daily living training for mild dementia: A feasibility study

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 **current manuscript only**.

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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 initial 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.	This research was funded by bHaptics Inc	
Time frame: past 36 months			
2	Grants or contracts from any entity (if not indicated in item #1 above).	<u> X </u> None	
3	Royalties or licenses	<u> X </u> None	

4	Consulting fees	<input type="checkbox"/> None	
5	Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or educational events	<input type="checkbox"/> None	
6	Payment for expert testimony	<input type="checkbox"/> None	
7	Support for attending meetings and/or travel	<input type="checkbox"/> None	
8	Patents planned, issued or pending	<input type="checkbox"/> None	
9	Participation on a Data Safety Monitoring Board or Advisory Board	<input type="checkbox"/> None	
10	Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid	<input type="checkbox"/> None	
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13	Other financial or non-financial interests	<input type="checkbox"/> None	

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Date: Sep. 5th, 2022

Your Name: Dae Yul Kim

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Date: Sep. 5th, 2022

Your Name: Cho Rong Bae

Manuscript Title: Fully-immersive virtual reality instrumental activities of daily living training for mild dementia: A feasibility study

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Date: Sep. 5th, 2022

Your Name: Heung Su Kim

Manuscript Title: Fully-immersive virtual reality instrumental activities of daily living training for mild dementia: A feasibility study

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Date: Sep. 5th, 2022

Your Name: Mi Jung Park

Manuscript Title: Fully-immersive virtual reality instrumental activities of daily living training for mild dementia: A feasibility study

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Date: Sep. 5th, 2022

Your Name: Seung Bok You

Manuscript Title: Fully-immersive virtual reality instrumental activities of daily living training for mild dementia: A feasibility study

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Your Name: Yu Jin Kwon

Manuscript Title: Fully-immersive virtual reality instrumental activities of daily living training for mild dementia: A feasibility study

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Date: Oct. 19th, 2022

Your Name: Ki Uk Gwak

Manuscript Title: Fully-immersive virtual reality instrumental activities of daily living training for mild dementia: A feasibility study

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