

Instructions

The purpose of this form is to provide readers of your manuscript with information about your other interests that could influence how they receive and understand your work. The form is designed to be completed electronically and stored electronically. It contains programming that allows appropriate data display. Each author should submit a separate form and is responsible for the accuracy and completeness of the submitted information. The form is in six parts.

Identifying information.

2. The work under consideration for publication.

This section asks for information about the work that you have submitted for publication. The time frame for this reporting is that of the work itself, from the initial conception and planning to the present. The requested information is about resources that you received, either directly or indirectly (via your institution), to enable you to complete the work. Checking "No" means that you did the work without receiving any financial support from any third party -- that is, the work was supported by funds from the same institution that pays your salary and that institution did not receive third-party funds with which to pay you. If you or your institution received funds from a third party to support the work, such as a government granting agency, charitable foundation or commercial sponsor, check "Yes".

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4. Intellectual Property.

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earning royalties or not

Royalties: Funds are coming in to you or your institution due to your patent

Kwak 1



Section 1.	Identifying Inform	nation	
Given Name (First Name) So Young		2. Surname (Last Name) Kwak	3. Date 09-April-2020
4. Are you the corresponding author?		Yes ✓ No	Corresponding Author's Name Min Cheol Chang
5. Manuscript Title Watch Out for Slowly Progressive Weakne Neuropathy!		ness of the Distal Upper Li	mb: It Could Be Chronic Acquired Demyelinating
6. Manuscript Identifying Number (if you know it) APM-20-341			
			-
Section 2.	The Work Under Co	onsideration for Public	cation
any aspect of the s statistical analysis,	stitution at any time rece submitted work (including	ive payment or services from but not limited to grants, da	a third party (government, commercial, private foundation, etc.) for ta monitoring board, study design, manuscript preparation,
Section 3.	Relevant financial	activities outside the s	ubmitted work.
Place a check in the appropriate boxes in the table to indicate whether you have financial relationships (regardless of amount of compensation) with entities as described in the instructions. Use one line for each entity; add as many lines as you need by clicking the "Add +" box. You should report relationships that were present during the 36 months prior to publication . Are there any relevant conflicts of interest? Yes Vo			
Section 4.	Intellectual Proper	rty Patents & Copyrig	ıhts
Do you have any			oadly relevant to the work? Yes V No

Kwak 2



Section 5		
Section 5.	Relationships not covered above	
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Section 6.	Disclosure Statement	
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Dr. Kwak has not	hing to disclose.	

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Kwak 3



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Boudier-Revéret 1



Section 1. Identifying Inf	ormation			
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4. Are you the corresponding author?	Yes ✓ No	Corresponding Author's Name Min Cheol Chang		
5. Manuscript Title Watch Out for Slowly Progressive W Neuropathy!	eakness of the Distal Upper Li	mb: It Could Be Chronic Acquired Demyelinating		
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Boudier-Revéret 2



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Chang 1



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