

#### **Instructions**

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Dong 1



Section 1. Identifying Inform	mation	
1. Given Name (First Name) Cheng-Da	2. Surname (Last Name) Dong	3. Date 30-October-2020
4. Are you the corresponding author?	☐ Yes ✓ No	Corresponding Author's Name Zhao-Jun Yan
5. Manuscript Title Utilizing network pharmacology to ex syndrome	plore the underlying mech	anism of Qiangzhi decoction in treating Tourette's
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Chu 1



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4. Are you the corresponding author?	☐ Yes ✓ No	Corresponding Author's Name Zhao-Jun Yan
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Li 1



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4. Are you the corresponding author?	☐ Yes ✓ No	Corresponding Author's Name Zhao-Jun Yan
5. Manuscript Title Utilizing network pharmacology to exp syndrome	lore the underlying mecha	anism of Qiangzhi decoction in treating Tourette's
6. Manuscript Identifying Number (if you kr APM-20-2158	now it)	
Section 2. The Work Under Co	onsideration for Public	cation
	but not limited to grants, da	a third party (government, commercial, private foundation, etc.) for at a monitoring board, study design, manuscript preparation,
Section 3. Relevant financial	activities outside the s	submitted work.
of compensation) with entities as descri	ibed in the instructions. Us port relationships that wer	ether you have financial relationships (regardless of amount se one line for each entity; add as many lines as you need by re present during the 36 months prior to publication.
Section 4. Intellectual Proper	rty Patents & Copyric	ahts
Do you have any patents, whether plan		

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Section 5. Polationships not sovered above
Relationships not covered above
Are there other relationships or activities that readers could perceive to have influenced, or that give the appearance of potentially influencing, what you wrote in the submitted work?
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At the time of manuscript acceptance, journals will ask authors to confirm and, if necessary, update their disclosure statements. On occasion, journals may ask authors to disclose further information about reported relationships.
Section 6. Disclosure Statement
Disclosure Statement
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Dr. Song has nothing to disclose.

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#### **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.

## 1. Identifying information.

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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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Report all sources of revenue paid (or promised to be paid) directly to you or your institution on your behalf over the 36 months prior to submission of the work. This should include all monies from sources with relevance to the submitted work, not just monies from the entity that sponsored the research. Please note that your interactions with the work's sponsor that are outside the submitted work should also be listed here. If there is any question, it is usually better to disclose a relationship than not to do so.

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#### Definitions.

**Entity:** government agency, foundation, commercial sponsor, academic institution, etc.

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

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Section 1.	and a	
Identifying Inform	nation	
1. Given Name (First Name) Zhao-Jun	2. Surname (Last Name) Yan	3. Date 30-October-2020
4. Are you the corresponding author?	✓ Yes No	
5. Manuscript Title Utilizing network pharmacology to explore the underlying mechanism of Qiangzhi decoction in treating Tourette's syndrome		
6. Manuscript Identifying Number (if you know it) APM-20-2158		
Section 2. The Work Under C	Consideration for Publication	
Did you or your institution <b>at any time</b> receive payment or services from a third party (government, commercial, private foundation, etc.) for any aspect of the submitted work (including but not limited to grants, data monitoring board, study design, manuscript preparation, statistical analysis, etc.)?  Are there any relevant conflicts of interest?  Yes  No		
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