

## ICMJE DISCLOSURE FORM

Date: 20210321  
 Your Name: Li-Xin Guan  
 Manuscript Title: Immediate effect of acupuncture at Zhongji acupoint on pelvic floor structure in female patients with stress urinary incontinence: study protocol for a randomized, single-blind, sham-controlled clinical trial  
 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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In item #1 below, report all support for the work reported in this manuscript without time limit. For all other items, the time frame for disclosure is the past 36 months.

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2	Grants or contracts from any entity (if not indicated in item #1 above).	<input checked="" type="checkbox"/> None	
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4	Consulting fees	<input checked="" type="checkbox"/> None	

5	Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or educational events	<u>  X  </u> None	
6	Payment for expert testimony	<u>  X  </u> None	
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10	Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid	<u>  X  </u> None	
11	Stock or stock options	<u>  X  </u> None	
12	Receipt of equipment, materials, drugs, medical writing, gifts or other services	<u>  X  </u> None	
13	Other financial or non-financial interests	<u>  X  </u> None	

**Please summarize the above conflict of interest in the following box:**

I have no other conflicts of interest to declare.

**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.

## ICMJE DISCLOSURE FORM

Date: 20210321

Your Name: Xiu-Ling Song

Manuscript Title: Immediate effect of acupuncture at Zhongji acupoint on pelvic floor structure in female patients with stress urinary incontinence: study protocol for a randomized, single-blind, sham-controlled clinical trial

Manuscript number (if known): \_\_\_\_\_

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## ICMJE DISCLOSURE FORM

Date: 20210321  
 Your Name: Xi Wang  
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 Your Name: Xia Zhang  
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## ICMJE DISCLOSURE FORM

Date: 20210321  
 Your Name: Lu-Min Liu  
 Manuscript Title: Immediate effect of acupuncture at Zhongji acupoint on pelvic floor structure in female patients with stress urinary incontinence: study protocol for a randomized, single-blind, sham-controlled clinical trial  
 Manuscript number (if known): \_\_\_\_\_

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Date: 20210321  
 Your Name: Bing-Li Chen  
 Manuscript Title: Immediate effect of acupuncture at Zhongji acupoint on pelvic floor structure in female patients with stress urinary incontinence: study protocol for a randomized, single-blind, sham-controlled clinical trial  
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## ICMJE DISCLOSURE FORM

Date: 20210321  
 Your Name: Yue-Lai Chen  
 Manuscript Title: Immediate effect of acupuncture at Zhongji acupoint on pelvic floor structure in female patients with stress urinary incontinence: study protocol for a randomized, single-blind, sham-controlled clinical trial  
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		The National Natural Science Foundation of China	Funding support
		Shanghai Pudong district famous TCM experts training program	Funding support
		Shanghai Leading Talent Program	Funding support
		Shanghai Municipal Health Commission	Funding support
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This work was supported by Grants from The National Natural Science Foundation of China [No.81674090]; Shanghai Pudong district famous TCM experts training program [No.PWRzm2020-01]; Shanghai Leading Talent Program [No. 2021-013]; Shanghai Municipal Health Commission[No.201940011], I have no other conflicts of interest to declare.

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