Date: May 30 th	, 2021
Your Name: J	unpeng Yao
Manuscript Title:	Acupuncture Methods for Functional Constipation: Protocol for a Systematic Review
and Network Meta	-Analysis
Manuscript numbe	er (if known):APM-21-811

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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.	XNone	
		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	XNone	
4	Consulting fees	XNone	

5	Payment or honoraria for	XNone	
	lectures, presentations,		
	speakers bureaus,		
	manuscript writing or		
6	educational events Payment for expert	X None	
0	testimony		
	testimony		
7	Support for attending	X None	
,	meetings and/or travel		
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	XNone	
42			
12	Receipt of equipment,	X_None	
	materials, drugs, medical writing, gifts or other		
	services		
13	Other financial or non-	XNone	
	financial interests		

There are no conflicts of interest to declare.

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

Date: May 30 th	, 2021
Your Name: I	iping Chen
Manuscript Title:	Acupuncture Methods for Functional Constipation: Protocol for a Systematic Review
and Network Meta	-Analysis
Manuscript number	er (if known): <u>APM-21-811</u>

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		Time frame: past	36 months
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3	Royalties or licenses	XNone	
4	Consulting fees	XNone	

5	Payment or honoraria for	XNone	
	lectures, presentations,		
	speakers bureaus,		
	manuscript writing or		
6	educational events Payment for expert	X None	
0	testimony		
	testimony		
7	Support for attending	X None	
,	meetings and/or travel		
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	XNone	
42			
12	Receipt of equipment,	X_None	
	materials, drugs, medical writing, gifts or other		
	services		
13	Other financial or non-	XNone	
	financial interests		

There are no conflicts of interest to declare.

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

Date: May 30 ^t	¹ , 2021
Your Name:	Siyuan Zhou
Manuscript Title:	Acupuncture Methods for Functional Constipation: Protocol for a Systematic Review
and Network Met	a-Analysis
Manuscript numb	er (if known): <u>APM-21-811</u>

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		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	XNone	
4	Consulting fees	XNone	

5	Payment or honoraria for	XNone	
	lectures, presentations,		
	speakers bureaus,		
	manuscript writing or		
6	educational events Payment for expert	X None	
0	testimony		
	testimony		
7	Support for attending	X None	
,	meetings and/or travel		
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	XNone	
42			
12	Receipt of equipment,	X_None	
	materials, drugs, medical writing, gifts or other		
	services		
13	Other financial or non-	XNone	
	financial interests		

There are no conflicts of interest to declare.

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

Date: May 30 th	, 2021
Your Name:	/uging Yang
Manuscript Title:	Acupuncture Methods for Functional Constipation: Protocol for a Systematic Review
and Network Meta	i-Analysis
Manuscript number	er (if known): <u>APM-21-811</u>

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		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	XNone	
4	Consulting fees	XNone	

5	Payment or honoraria for	XNone	
	lectures, presentations,		
	speakers bureaus,		
	manuscript writing or		
6	educational events Payment for expert	X None	
0	testimony		
	testimony		
7	Support for attending	X None	
,	meetings and/or travel		
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	XNone	
42			
12	Receipt of equipment,	X_None	
	materials, drugs, medical writing, gifts or other		
	services		
13	Other financial or non-	XNone	
	financial interests		

There are no conflicts of interest to declare.

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

Date: May 30 th	, 2021
Your Name: L	u Wang
Manuscript Title:	Acupuncture Methods for Functional Constipation: Protocol for a Systematic Review
and Network Meta	-Analysis
Manuscript numbe	r (if known): <u>APM-21-811</u>

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		Time frame: past	36 months
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3	Royalties or licenses	XNone	
4	Consulting fees	X None	

5	Payment or honoraria for	XNone	
	lectures, presentations,		
	speakers bureaus,		
	manuscript writing or		
6	educational events Payment for expert	X None	
0	testimony		
	testimony		
7	Support for attending	X None	
,	meetings and/or travel		
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	XNone	
42			
12	Receipt of equipment,	X_None	
	materials, drugs, medical writing, gifts or other		
	services		
13	Other financial or non-	XNone	
	financial interests		

There are no conflicts of interest to declare.

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

Date: May 30 ^t	¹ , 2021
Your Name:	Xiangyun Yan
Manuscript Title:	Acupuncture Methods for Functional Constipation: Protocol for a Systematic Review
and Network Met	a-Analysis
Manuscript numb	er (if known): <u>APM-21-811</u>

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3	Royalties or licenses	XNone	
4	Consulting fees	XNone	

5	Payment or honoraria for	XNone	
	lectures, presentations,		
	speakers bureaus,		
	manuscript writing or		
6	educational events Payment for expert	X None	
0	testimony		
	testimony		
7	Support for attending	X None	
,	meetings and/or travel		
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	XNone	
42			
12	Receipt of equipment,	X_None	
	materials, drugs, medical writing, gifts or other		
	services		
13	Other financial or non-	XNone	
	financial interests		

There are no conflicts of interest to declare.

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

Date: May 30 th	, 2021
Your Name: L	in Zhang
Manuscript Title:	Acupuncture Methods for Functional Constipation: Protocol for a Systematic Review
and Network Meta	-Analysis
Manuscript numbe	r (if known): <u>APM-21-811</u>

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3	Royalties or licenses	XNone	
4	Consulting fees	XNone	

5	Payment or honoraria for	XNone	
	lectures, presentations,		
	speakers bureaus,		
	manuscript writing or		
6	educational events	V. Neze	
6	Payment for expert testimony	XNone	
	testimony		
7	Support for attending	X None	
'	meetings and/or travel		
	meetings und/or traver		
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	XNone	
12	Receipt of equipment,	X_None	
	materials, drugs, medical		
	writing, gifts or other services		
13	Other financial or non-	XNone	
	financial interests		

There are no conflicts of interest to declare.

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

Date:	May 30 th , 2021	
Your Na	Name: Ying Li	
Manusc	uscript Title: <u>Acupuncture Methods for Functi</u>	onal Constipation: Protocol for a Systematic Review
and Net	letwork Meta-Analysis	
Manusc	uscript number (if known): <u>APM-21-811</u>	

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3	Royalties or licenses	XNone	
4	Consulting fees	XNone	

5	Payment or honoraria for	XNone	
	lectures, presentations,		
	speakers bureaus,		
	manuscript writing or		
6	educational events	V. Neze	
6	Payment for expert testimony	XNone	
	testimony		
7	Support for attending	X None	
'	meetings and/or travel		
	meetings und/or traver		
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	
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11	Stock or stock options	XNone	
12	Receipt of equipment,	X_None	
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