Date: June 29th, 2021 Your Name: Xiaochen Zhang Manuscript Title: Prevalence and associated factors of anxiety and depression among patients with oromaxillofacial venous malformations Manuscript number (if known): APM-21-608

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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.	None	the National Natural Science Foundation of China (81801023)
	No time limit for this item.		
		Time frame: past	36 months
2	Grants or contracts from any entity (if not indicated	XNone	
•	in item #1 above).		
3	Royalties or licenses	XNone	
4	Consulting fees	XNone	

5	Payment or honoraria for	XNone	
	lectures, presentations,		
	speakers bureaus,		
	manuscript writing or		
	educational events		
6		N NI	
6	Payment for expert	XNone	
	testimony		
7	Support for attending	X None	
	meetings and/or travel		
8	Patents planned, issued or	X None	
	pending		
9	Participation on a Data	X None	
9	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	X None	
12	Receipt of equipment,	X None	
12			
	materials, drugs, medical		
	writing, gifts or other		
	services		
13	Other financial or non-	XNone	
	financial interests		

None.

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

Date: June 29th, 2021 Your Name: Xiaomei Zhao Manuscript Title: Prevalence and associated factors of anxiety and depression among patients with oromaxillofacial venous malformations Manuscript number (if known): APM-21-608

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4	Consulting fees	XNone	

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6		N NI	
6	Payment for expert	XNone	
	testimony		
7	Support for attending	X None	
	meetings and/or travel		
8	Patents planned, issued or	X None	
	pending		
9	Participation on a Data	X None	
9	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	X None	
12	Receipt of equipment,	X None	
12			
	materials, drugs, medical		
	writing, gifts or other		
	services		
13	Other financial or non-	XNone	
	financial interests		

None.

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

Date: June 29th, 2021 Your Name: Ping Wu Manuscript Title: Prevalence and associated factors of anxiety and depression among patients with oromaxillofacial venous malformations Manuscript number (if known): APM-21-608

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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		
	educational events		
6		N NI	
6	Payment for expert	XNone	
	testimony		
7	Support for attending	X None	
	meetings and/or travel		
8	Patents planned, issued or	X None	
	pending		
9	Participation on a Data	X None	
9	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	X None	
12	Receipt of equipment,	X None	
12			
	materials, drugs, medical		
	writing, gifts or other		
	services		
13	Other financial or non-	XNone	
	financial interests		

None.

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

Date: June 29th, 2021 Your Name: Zeliang Zhao Manuscript Title: Prevalence and associated factors of anxiety and depression among patients with oromaxillofacial venous malformations Manuscript number (if known): APM-21-608

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4	Consulting fees	XNone	

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6		N NI	
6	Payment for expert	XNone	
	testimony		
7	Support for attending	X None	
	meetings and/or travel		
8	Patents planned, issued or	X None	
	pending		
9	Participation on a Data	X None	
9	Safety Monitoring Board or		
	Advisory Board		
10	Leadership or fiduciary role	XNone	
	in other board, society,		
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11	Stock or stock options	X None	
12	Receipt of equipment,	X None	
12			
	materials, drugs, medical		
	writing, gifts or other		
	services		
13	Other financial or non-	XNone	
	financial interests		

None.

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

Date: June 29th, 2021 Your Name: Ming Liu Manuscript Title: Prevalence and associated factors of anxiety and depression among patients with oromaxillofacial venous malformations Manuscript number (if known): APM-21-608

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3	Royalties or licenses	XNone	
4	Consulting fees	XNone	

5	Payment or honoraria for	XNone	
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	manuscript writing or		
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6		N NI	
6	Payment for expert	XNone	
	testimony		
7	Support for attending	X None	
	meetings and/or travel		
8	Patents planned, issued or	X None	
	pending		
9	Participation on a Data	X None	
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	Advisory Board		
10	Leadership or fiduciary role	XNone	
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11	Stock or stock options	X None	
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	materials, drugs, medical		
	writing, gifts or other		
	services		
13	Other financial or non-	XNone	
	financial interests		

None.

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Date: June 29th, 2021 Your Name: Yan-an Wang Manuscript Title: Prevalence and associated factors of anxiety and depression among patients with oromaxillofacial venous malformations Manuscript number (if known): APM-21-608

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6		N NI	
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	testimony		
7	Support for attending	X None	
	meetings and/or travel		
8	Patents planned, issued or	X None	
	pending		
9	Participation on a Data	X None	
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10	Leadership or fiduciary role	XNone	
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