Date:2021-7-2	
Your Name:Mohan Ju	
Manuscript Title: Predic	tors of mortality in adult patients with methicillin-resistant Staphylococcus aureus
bloodstream infection	: A meta-analysis and systematic review
Manuscript number (if k	nown): APM-21-922

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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 plannin	,
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.	Project of Huashan Hospital North (HSBY2019007) Grants from the Shanghai Municipal Planning Commission of Science and Research Fund (20204Y0441) Grants from the National Natural Science Foundation of China (81573470)	
		Time frame: past 36 mont	ths
2	Grants or contracts from any entity (if not indicated in item #1 above).	XNone	
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	Payment for expert	X None	
0	testimony		
	testimony		
7	Support for attending	X None	
,	meetings and/or travel	XNone	
	go aa, o. a.a.c.		
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	X None	
	·		
12	Receipt of equipment,	XNone	
	materials, drugs, medical		
	writing, gifts or other		
	services		
13	Other financial or non-	XNone	
	financial interests		

Dr. Ju reports that this work was supported by the project of Huashan Hospital (HSBY2019007), grants from the Shanghai Municipal Planning Commission of Science and Research Fund (20204Y0441) and National Natural Science Foundation of China (81573470).

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

Date:2021-7-2	
Your Name:_Yueying Huang	
Manuscript Title: Predictors of mortality in adult patients with methicillin-resistant Staphylococcus aureus	
bloodstream infection: A meta-analysis and systematic review	
Manuscrint number (if known): ΔPM-21-932	

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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		
	educational events		
6	Payment for expert	X None	
	testimony		
7	Support for attending meetings and/or travel	XNone	
	-		
8	Patents planned, issued or	XNone	
	pending		
9	Participation on a Data	X None	
9	Safety Monitoring Board or	XNone	
	Advisory Board		
10	Leadership or fiduciary role	XNone	
	in other board, society,		
	committee or advocacy		
11	group, paid or unpaid Stock or stock options	X None	
11	Stock of Stock Options	NONE	
12	Receipt of equipment,	XNone	
	materials, drugs, medical		
	writing, gifts or other services		
13	Other financial or non-	X None	
13	financial interests	NONE	
	3000		

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

Date:2021-7-2		
Your Name:Xiaofeng Xu		
Manuscript Title: Predictors of mortality in adult patients with methicillin-resistant <i>Staphylococcus aureus</i>		
bloodstream infection: A meta-analysis and systematic review		
Manuscript number (if known): APM-21-932		

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2	Crants or contracts from	Time frame: past 36 mon	ths
2	Grants or contracts from any entity (if not indicated in item #1 above).	XNone	
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	Payment for expert	X None	
0	testimony		
	testimony		
7	Support for attending	X None	
,	meetings and/or travel	XNone	
	go aa, o. a.a.c.		
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	X None	
	·		
12	Receipt of equipment,	XNone	
	materials, drugs, medical		
	writing, gifts or other		
	services		
13	Other financial or non-	XNone	
	financial interests		

Dr. Xu reports that this work was supported by the project of Huashan Hospital (HSBY2019007), grants from the Shanghai Municipal Planning Commission of Science and Research Fund (20204Y0441) and National Natural Science Foundation of China (81573470).

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

Date:2	021-7-2
Your Name:_	Yiyi Qian
Manuscript T	Title: Predictors of mortality in adult patients with methicillin-resistant Staphylococcus aureus
bloodstream	m infection: A meta-analysis and systematic review
Manuscrint r	number (if known): APM-21-932

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		Time frame: past 36 mont	ths
2	Grants or contracts from any entity (if not indicated in item #1 above).	XNone	
3	Royalties or licenses	XNone	

4	Consulting fees	X None	
5	Payment or honoraria for	XNone	
	lectures, presentations,		
	speakers bureaus, manuscript writing or		
	educational events		
6	Payment for expert	X None	
	testimony		
7	Support for attending meetings and/or travel	XNone	
	-		
8	Patents planned, issued or	XNone	
	pending		
9	Participation on a Data	X None	
9	Safety Monitoring Board or	XNone	
	Advisory Board		
10	Leadership or fiduciary role	XNone	
	in other board, society,		
	committee or advocacy		
11	group, paid or unpaid Stock or stock options	X None	
11	Stock of Stock Options	NONE	
12	Receipt of equipment,	XNone	
	materials, drugs, medical		
	writing, gifts or other services		
13	Other financial or non-	X None	
13	financial interests	NONE	
	3000		

Dr. Qian reports that this work was supported by the project of Huashan Hospital (HSBY2019007), grants from the Shanghai Municipal Planning Commission of Science and Research Fund (20204Y0441) and National Natural Science Foundation of China (81573470).

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

Date:	_2021-7-2
Your Name	e:Yingmin Bi
Manuscrip	et Title: Predictors of mortality in adult patients with methicillin-resistant Staphylococcus aureus
bloodstre	am infection: A meta-analysis and systematic review
Manuscrin	at number (if known): APM-21_932

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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.	Project of Huashan Hospital North (HSBY2019007) Grants from the Shanghai Municipal Planning Commission of Science and Research Fund (20204Y0441) Grants from the National Natural Science Foundation of China (81573470)	
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2	Grants or contracts from any entity (if not indicated in item #1 above).	XNone	
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	Payment for expert	X None	
0	testimony		
	testimony		
7	Support for attending	X None	
,	meetings and/or travel	XNone	
	go aa, o. a.a.c.		
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	X None	
	·		
12	Receipt of equipment,	XNone	
	materials, drugs, medical		
	writing, gifts or other		
	services		
13	Other financial or non-	XNone	
	financial interests		

Dr. Bi reports that this work was supported by the project of Huashan Hospital (HSBY2019007), grants from the Shanghai Municipal Planning Commission of Science and Research Fund (20204Y0441) and National Natural Science Foundation of China (81573470).

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

Date:2021-7-2
Your Name:Shuang Liu
Manuscript Title: Predictors of mortality in adult patients with methicillin-resistant Staphylococcus aureus
bloodstream infection: A meta-analysis and systematic review
Manuscrint number (if known): ΔPM-21-932

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2	Grants or contracts from any entity (if not indicated in item #1 above).	XNone	
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	Payment for expert	X None	
0	testimony		
	testimony		
7	Support for attending	X None	
,	meetings and/or travel	XNone	
	go aa, o. a.a.c.		
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	X None	
	·		
12	Receipt of equipment,	XNone	
	materials, drugs, medical		
	writing, gifts or other		
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13	Other financial or non-	XNone	
	financial interests		

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

Date:2021-7-2		
Your Name:Shuaiyue Dong		
Manuscript Title: Predictors of mortality in adult patients with methicillin-resistant Staphylococcus aureus		
bloodstream infection: A meta-analysis and systematic review		
Manuscript number (if known): APM-21-932		

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2	Consulta au anutura da for	Time frame: past 36 mon	ths
2	Grants or contracts from any entity (if not indicated in item #1 above).	XNone	
3	Royalties or licenses	XNone	

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4	Consulting fees	XNone	
5	Payment or honoraria for	XNone	
	lectures, presentations,		
	speakers bureaus,		
	manuscript writing or		
	educational events		
6	Payment for expert	X None	
	testimony		
	,		
7	Support for attending	XNone	
,	meetings and/or travel	^NONE	
	meetings and/or traver		
8	Patents planned, issued or	XNone	
	pending		
9	Participation on a Data	X None	
	Safety Monitoring Board or		
	Advisory Board		
10	•	V. None	
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,	XNone	
	materials, drugs, medical		
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	services		
13	Other financial or non-	XNone	
	financial interests		

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

Date:2021-	7-2
Your Name:Jin	yi Yuan
Manuscript Title	Predictors of mortality in adult patients with methicillin-resistant Staphylococcus aureus
bloodstream in	fection: A meta-analysis and systematic review
Manuscript num	ber (if known): APM-21-932

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		Time frame: past 36 mont	ths
2	Grants or contracts from any entity (if not indicated in item #1 above).	XNone	
3	Royalties or licenses	XNone	

4	Consulting fees	X None	
5	Payment or honoraria for	XNone	
	lectures, presentations,		
	speakers bureaus, manuscript writing or		
	educational events		
6	Payment for expert	X None	
	testimony		
7	Support for attending meetings and/or travel	XNone	
	-		
8	Patents planned, issued or	XNone	
	pending		
9	Participation on a Data	X None	
9	Safety Monitoring Board or	XNone	
	Advisory Board		
10	Leadership or fiduciary role	XNone	
	in other board, society,		
	committee or advocacy		
11	group, paid or unpaid Stock or stock options	X None	
11	Stock of Stock Options	NONE	
12	Receipt of equipment,	XNone	
	materials, drugs, medical		
	writing, gifts or other services		
13	Other financial or non-	X None	
13	financial interests	NONE	
	3000		

Dr. Yuan reports that this work was supported by the project of Huashan Hospital (HSBY2019007), grants from the Shanghai Municipal Planning Commission of Science and Research Fund (20204Y0441) and National Natural Science Foundation of China (81573470).

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

Date:2021-7-2					
our Name:Dongfang Lin					
Manuscript Title: Predictors of mortality in adult patients with methicillin-resistant Staphylococcus aureus					
bloodstream infection: A meta-analysis and systematic review					
Manuscrint number (if known): ΔPM-21-932					

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3	Royalties or licenses	XNone	

4	Consulting fees	XNone	
5	Payment or honoraria for	XNone	
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	speakers bureaus,		
	manuscript writing or educational events		
6	Payment for expert	X None	
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7	Support for attending	X None	
,	meetings and/or travel	<u></u>	
	go aa, o. a.a.c.		
8	Patents planned, issued or	XNone	
	pending		
9	Participation on a Data	XNone	
	Safety Monitoring Board or		
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10	Leadership or fiduciary role	XNone	
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12	Receipt of equipment,	XNone	
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13	Other financial or non-	XNone	
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