Yo Ma co	Date:Aug. 16 <sup>th</sup> , 2021 Your Name:Jin Zhang Your Name:Jin Zhang Manuscript Title:Identification of soluble thrombomodulin and tissue plasminogen activator-inhibitor complex as biomarkers for prognosis and early evaluation of septic shock and sepsis-induced DIC Manuscript number (if known):APM-21-2222				
tha rel	hat are	-	lose all relationships/activities/interests listed d" means any relation with for-profit or not-for		
pa co to	carties 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.				
<u>cu</u>	The following questions apply to the author's relationships/activities/interests as they relate to the <a href="mailto:current">current</a> <a href="mailto:manuscript">manuscript only</a> .				
pe to	The author's relationships/activities/interests should be <u>defined broadly</u> . For example, if your manuscript pertains to the epidemiology of hypertension, you should declare all relationships with manufacturers of antihypertensive medication, even if that medication is not mentioned in the manuscript.				
oth	n item #1 below, report all support other items, he time frame for disclosure is t		eported in this manuscript without time limit.	For all	
	whon	e all entities with m you have this onship or indicate (add rows as	Specifications/Comments (e.g., if payments were made to you or to your institution)		

	Ti	Name all entities with whom you have this relationship or indicate none (add rows as needed) me frame: Since the initia	Specifications/Comments (e.g., if payments were made to you or to your institution)
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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.	XNone	
		Time frame: past	36 months
2	Grants or contracts from	XNone	

	any entity (if not indicated in item #1 above).		
3	Royalties or licenses	XNone	
4	Consulting fees	XNone	
5	Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or educational events	XNone	
6	Payment for expert testimony	X_None	
7	Support for attending meetings and/or travel	XNone	
8	Patents planned, issued or pending	XNone	
9	Participation on a Data Safety Monitoring Board or Advisory Board	XNone	
10	Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid	XNone	
11	Stock or stock options	XNone	
12	Receipt of equipment, materials, drugs, medical writing, gifts or other services	X_None	
13	Other financial or non- financial interests	XNone	

None.			

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.		

Date:Aug. 16 <sup>th</sup> , 2021 Your Name:Mingming Xue Manuscript Title:Identification of soluble thrombomodulin and tissue plasminogen activator-inhibitor complex as biomarkers for prognosis and early evaluation of septic shock and sepsis-induced DIC Manuscript number (if known):APM-21-2222				
that are		lose all relationships/activities/interests listed d" means any relation with for-profit or not-for		
third parties whose interests m commitment	ay be affected by the co	ntent of the manuscript. Disclosure represents	s a	
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The following questions a current manuscript only.	pply to the author's relat	cionships/activities/interests as they relate to t	he	
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In item #1 below, report al other items, the time frame for disclos		eported in this manuscript without time limit.	For all	
	Name all entities with whom you have this relationship or indicate none (add rows as	Specifications/Comments (e.g., if payments were made to you or to your institution)		

		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)
	Ti	me frame: Since the initia	I 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	X None	

	any entity (if not indicated in item #1 above).		
3	Royalties or licenses	XNone	
4	Consulting fees	XNone	
5	Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or educational events	XNone	
6	Payment for expert testimony	X_None	
7	Support for attending meetings and/or travel	XNone	
8	Patents planned, issued or pending	XNone	
9	Participation on a Data Safety Monitoring Board or Advisory Board	XNone	
10	Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid	XNone	
11	Stock or stock options	XNone	
12	Receipt of equipment, materials, drugs, medical writing, gifts or other services	X_None	
13	Other financial or non- financial interests	XNone	

None.

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.		

You Mar com	Date:Aug. 16 <sup>th</sup> , 2021 Your Name:Yao Chen Manuscript Title:Identification of soluble thrombomodulin and tissue plasminogen activator-inhibitor complex as biomarkers for prognosis and early evaluation of septic shock and sepsis-induced DIC Manuscript number (if known):APM-21-2222				
that	at are	•	close all relationships/activities/interests listed		
thir		manuscript. "Relate	d" means any relation with for-profit or not-for-	-protit	
part	= -	e affected by the co	ntent of the manuscript. Disclosure represents	a	
	transparency and does not ationship/activity/interest, it		e a bias. If you are in doubt about whether to li	ist a	
curi	e following questions apply rrent anuscript only.	to the author's relat	tionships/activities/interests as they relate to th	ne	
	e author's relationships/act rtains	ivities/interests sho	uld be <u>defined broadly</u> . For example, if your ma	nuscript	
to t	the epidemiology of hyperte		leclare all relationships with manufacturers of on is not mentioned in the manuscript.		
othe	item #1 below, report all sup ner items, e time frame for disclosure i	•	eported in this manuscript without time limit.	For all	
	wh rel:	me all entities with nom you have this ationship or indicate ne (add rows as	Specifications/Comments (e.g., if payments were made to you or to your institution)		

		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)
	Ti	me frame: Since the initia	l 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	XNone	

	any entity (if not indicated in item #1 above).		
3	Royalties or licenses	XNone	
4	Consulting fees	XNone	
5	Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or educational events	XNone	
6	Payment for expert testimony	X_None	
7	Support for attending meetings and/or travel	XNone	
8	Patents planned, issued or pending	XNone	
9	Participation on a Data Safety Monitoring Board or Advisory Board	XNone	
10	Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid	XNone	
11	Stock or stock options	XNone	
12	Receipt of equipment, materials, drugs, medical writing, gifts or other services	X_None	
13	Other financial or non- financial interests	XNone	

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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.				

Yo Ma co	Date:Aug. 16 <sup>th</sup> , 2021 Your Name:Chenglong Liu Manuscript Title:Identification of soluble thrombomodulin and tissue plasminogen activator-inhibitor complex as biomarkers for prognosis and early evaluation of septic shock and sepsis-induced DIC Manuscript number (if known):APM-21-2222					
tha	he interest of transparency, we ask you to disclose all relationships/activities/interests listed below t are					
rel thi	ited to the content of your manuscript. "Related" means any relation with for-profit or not-for-profit					
-	ties whose interests may be affected by the content of the manuscript. Disclosure represents a nmitment					
to	ransparency and does not necessarily indicate a bias. If you are in doubt about whether to list a tionship/activity/interest, it is preferable that you do so.					
<u>cu</u>	The following questions apply to the author's relationships/activities/interests as they relate to the <a href="mailto:current">current</a>					

	T	Name all entities with whom you have this relationship or indicate none (add rows as needed) me frame: Since the initia	Specifications/Comments (e.g., if payments were made to you or to your institution)
		me mame. Omoe me mina	i 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	XNone	

	any entity (if not indicated in item #1 above).		
3	Royalties or licenses	XNone	
4	Consulting fees	XNone	
5	Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or educational events	XNone	
6	Payment for expert testimony	X_None	
7	Support for attending meetings and/or travel	XNone	
8	Patents planned, issued or pending	XNone	
9	Participation on a Data Safety Monitoring Board or Advisory Board	XNone	
10	Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid	XNone	
11	Stock or stock options	XNone	
12	Receipt of equipment, materials, drugs, medical writing, gifts or other services	X_None	
13	Other financial or non- financial interests	XNone	

None.	
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complex as bid	_Zhongshu k tle:ldentific omarkers for p	ation of soluble thrombor	modulin and tissue plasminogen activator-inhibito ation of septic shock and sepsis-induced DIC	or
that are	•		lose all relationships/activities/interests listed	
third parties whose commitment	interests ma	ay be affected by the co	ntent of the manuscript. Disclosure represent	s a
to transparen	=	not necessarily indicate st, it is preferable that y	a bias. If you are in doubt about whether to ou do so.	list a
The following current manuscript or		oply to the author's relat	tionships/activities/interests as they relate to	the
pertains	•		uld be <u>defined broadly</u> . For example, if your m	·
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other items,	•	I support for the work reure is the past 36 month	eported in this manuscript without time limit.	For all
		Name all entities with whom you have this relationship or indicate none (add rows as	Specifications/Comments (e.g., if payments were made to you or to your institution)	

		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)			
	Ti	me frame: Since the initia	I 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	X None				

	any entity (if not indicated in item #1 above).		
3	Royalties or licenses	XNone	
4	Consulting fees	XNone	
5	Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or educational events	XNone	
6	Payment for expert testimony	X_None	
7	Support for attending meetings and/or travel	XNone	
8	Patents planned, issued or pending	XNone	
9	Participation on a Data Safety Monitoring Board or Advisory Board	XNone	
10	Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid	XNone	
11	Stock or stock options	XNone	
12	Receipt of equipment, materials, drugs, medical writing, gifts or other services	X_None	
13	Other financial or non- financial interests	XNone	

None.	
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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.			

Yo Ma coi	Date:Aug. 16 <sup>th</sup> , 2021 Your Name:Sucheng Mu Manuscript Title:Identification of soluble thrombomodulin and tissue plasminogen activator-inhibitor complex as biomarkers for prognosis and early evaluation of septic shock and sepsis-induced DIC Manuscript number (if known):APM-21-2222				
tha	ne interest of transparency, we ask you to disclose all relationships/activities/interests listed below are				
thi	ted to the content of your manuscript. "Related" means any relation with for-profit or not-for-profit				
ра	ties whose interests may be affected by the content of the manuscript. Disclosure represents a maitment				
to	ransparency and does not necessarily indicate a bias. If you are in doubt about whether to list a tionship/activity/interest, it is preferable that you do so.				
<u>cu</u>	The following questions apply to the author's relationships/activities/interests as they relate to the current manuscript only.				
	author's relationships/activities/interests should be <u>defined broadly</u> . For example, if your manuscript tains				
to	to the epidemiology of hypertension, you should declare all relationships with manufacturers of antihypertensive medication, even if that medication is not mentioned in the manuscript.				
oth	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.				
	Name all entities with whom you have this relationship or indicate institution)  Specifications/Comments (e.g., if payments were made to you or to your institution)				

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	Ti	me frame: Since the initia	I 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	X None		

	any entity (if not indicated in item #1 above).		
3	Royalties or licenses	XNone	
4	Consulting fees	XNone	
5	Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or educational events	XNone	
6	Payment for expert testimony	X_None	
7	Support for attending meetings and/or travel	XNone	
8	Patents planned, issued or pending	XNone	
9	Participation on a Data Safety Monitoring Board or Advisory Board	XNone	
10	Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid	XNone	
11	Stock or stock options	XNone	
12	Receipt of equipment, materials, drugs, medical writing, gifts or other services	X_None	
13	Other financial or non- financial interests	XNone	

None.	
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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.			

You Ma cor	Date:Aug. 16 <sup>th</sup> , 2021 Your Name:Wei Wei Manuscript Title:Identification of soluble thrombomodulin and tissue plasminogen activator-inhibitor complex as biomarkers for prognosis and early evaluation of septic shock and sepsis-induced DIC Manuscript number (if known):APM-21-2222				
tha rela	he interest of transparency, we ask you to disclose all relationships/activities/interests listed below t are ated to the content of your manuscript. "Related" means any relation with for-profit or not-for-profit				
par cor to	nird arties whose interests may be affected by the content of the manuscript. Disclosure represents a ommitment of transparency and does not necessarily indicate a bias. If you are in doubt about whether to list a				
The	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 <u>current</u> <u>manuscript only</u> .				
per to	The author's relationships/activities/interests should be <u>defined broadly</u> . For example, if your manuscript pertains to the epidemiology of hypertension, you should declare all relationships with manufacturers of antihypertensive medication, even if that medication is not mentioned in the manuscript.				
In i	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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		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)	
	Ti	me frame: Since the initia	I 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	X None		

	any entity (if not indicated in item #1 above).		
3	Royalties or licenses	XNone	
4	Consulting fees	XNone	
5	Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or educational events	XNone	
6	Payment for expert testimony	X_None	
7	Support for attending meetings and/or travel	XNone	
8	Patents planned, issued or pending	XNone	
9	Participation on a Data Safety Monitoring Board or Advisory Board	XNone	
10	Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid	XNone	
11	Stock or stock options	XNone	
12	Receipt of equipment, materials, drugs, medical writing, gifts or other services	X_None	
13	Other financial or non- financial interests	XNone	

None.

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.			

Date:Aug. 16 <sup>th</sup> , 2021  Your Name:Jun Yin  Manuscript Title:Identification of soluble thrombomodulin and tissue plasminogen activator-inhibitor complex as biomarkers for prognosis and early evaluation of septic shock and sepsis-induced DIC  Manuscript number (if known):APM-21-2222					
that are related to the content		lose all relationships/activities/interests listed			
commitment		ntent of the manuscript. Disclosure represent			
	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				
The author's relations pertains to the epidemiology o	f hypertension, you should o	uld be <u>defined broadly</u> . For example, if your m leclare all relationships with manufacturers of on is not mentioned in the manuscript.			
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.					
	Name all entities with whom you have this relationship or indicate none (add rows as	Specifications/Comments (e.g., if payments were made to you or to your institution)			

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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.	XNone	
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2	Grants or contracts from	XNone	

	any entity (if not indicated in item #1 above).		
3	Royalties or licenses	XNone	
4	Consulting fees	XNone	
5	Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or educational events	XNone	
6	Payment for expert testimony	X_None	
7	Support for attending meetings and/or travel	XNone	
8	Patents planned, issued or pending	XNone	
9	Participation on a Data Safety Monitoring Board or Advisory Board	XNone	
10	Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid	XNone	
11	Stock or stock options	XNone	
12	Receipt of equipment, materials, drugs, medical writing, gifts or other services	X_None	
13	Other financial or non- financial interests	XNone	

None.

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.				

Yo Ma coi	Date:Aug. 16 <sup>th</sup> , 2021 Your Name:Hao Xiang Manuscript Title:Identification of soluble thrombomodulin and tissue plasminogen activator-inhibitor complex as biomarkers for prognosis and early evaluation of septic shock and sepsis-induced DIC Manuscript number (if known):APM-21-2222				
tha	at are		lose all relationships/activities/interests listed		
rei thi		ur manuscript. "Relate	d" means any relation with for-profit or not-for	-profit	
ра		y be affected by the co	ntent of the manuscript. Disclosure represents	а	
to		_	a bias. If you are in doubt about whether to liou do so.	st a	
<u>cu</u>	e following questions app rrent anuscript only.	oly to the author's relat	ionships/activities/interests as they relate to th	ne	
The author's relationships/activities/interests should be <u>defined broadly</u> . For example, if your manuscript pertains					
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		Name all entities with	Specifications/Comments		
		whom you have this relationship or indicate	(e.g., if payments were made to you or to your institution)		

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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.	XNone		
	Time frame: past 36 months			
2	Grants or contracts from	X None		

	any entity (if not indicated in item #1 above).		
3	Royalties or licenses	XNone	
4	Consulting fees	XNone	
5	Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or educational events	XNone	
6	Payment for expert testimony	X_None	
7	Support for attending meetings and/or travel	XNone	
8	Patents planned, issued or pending	XNone	
9	Participation on a Data Safety Monitoring Board or Advisory Board	XNone	
10	Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid	XNone	
11	Stock or stock options	XNone	
12	Receipt of equipment, materials, drugs, medical writing, gifts or other services	X_None	
13	Other financial or non- financial interests	XNone	

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Date:Aug. 16 <sup>th</sup> , 2021 Your Name:Yanyan Hu Manuscript Title:Identification of soluble thrombomodulin and tissue plasminogen activator-inhibitor complex as biomarkers for prognosis and early evaluation of septic shock and sepsis-induced DIC Manuscript number (if known):APM-21-2222					
that are related to the content of		lose all relationships/activities/interests listed			
commitment	not necessarily indicate	ntent of the manuscript. Disclosure represents a bias. If you are in doubt about whether to ou do so.			
The following questions a current manuscript only.	apply to the author's relat	tionships/activities/interests as they relate to t	he		
pertains to the epidemiology of hy	pertension, you should d	uld be <u>defined broadly</u> . For example, if your maleclare all relationships with manufacturers of on is not mentioned in the manuscript.	anuscript		
In item #1 below, report a other items, the time frame for disclos		eported in this manuscript without time limit.	For all		
	Name all entities with whom you have this relationship or indicate none (add rows as	Specifications/Comments (e.g., if payments were made to you or to your institution)			

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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.	_X_None	
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3	Royalties or licenses	XNone	
4	Consulting fees	XNone	
5	Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or educational events	XNone	
6	Payment for expert testimony	X_None	
7	Support for attending meetings and/or travel	XNone	
8	Patents planned, issued or pending	XNone	
9	Participation on a Data Safety Monitoring Board or Advisory Board	XNone	
10	Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid	XNone	
11	Stock or stock options	XNone	
12	Receipt of equipment, materials, drugs, medical writing, gifts or other services	X_None	
13	Other financial or non- financial interests	XNone	

None.	
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Yo Ma co	Date:Aug. 16 <sup>th</sup> , 2021 Your Name:Xiangyu Long Manuscript Title:Identification of soluble thrombomodulin and tissue plasminogen activator-inhibitor complex as biomarkers for prognosis and early evaluation of septic shock and sepsis-induced DIC Manuscript number (if known):APM-21-2222				
	the interest of transparency, we ask you to disclose all relationships/activities/interests listed below				
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		needed)	
	Ti	me frame: Since the initia	l 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	
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3	Royalties or licenses	XNone	
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5	Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or educational events	XNone	
6	Payment for expert testimony	X_None	
7	Support for attending meetings and/or travel	XNone	
8	Patents planned, issued or pending	XNone	
9	Participation on a Data Safety Monitoring Board or Advisory Board	XNone	
10	Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid	XNone	
11	Stock or stock options	XNone	
12	Receipt of equipment, materials, drugs, medical writing, gifts or other services	X_None	
13	Other financial or non- financial interests	XNone	

None.	
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Yo Ma co	•	ion of soluble thrombor ognosis and early evalua	nodulin and tissue plasminogen activator-inhibitor ation of septic shock and sepsis-induced DIC	
	the interest of transparence at are	cy, we ask you to disc	lose all relationships/activities/interests listed l	oelow
rel		r manuscript. "Related	d" means any relation with for-profit or not-for-	profit
ра		be affected by the co	ntent of the manuscript. Disclosure represents	a
	transparency and does no elationship/activity/interest,	-	a bias. If you are in doubt about whether to lisou do so.	st a
<u>cu</u>	ne following questions appl urrent anuscript only.	ly to the author's relat	ionships/activities/interests as they relate to th	le
		ctivities/interests shou	uld be <u>defined broadly</u> . For example, if your ma	nuscript
to			eclare all relationships with manufacturers of on is not mentioned in the manuscript.	
oth	item #1 below, report all su ther items, se time frame for disclosure	•	ported in this manuscript without time limit. F	<sup>-</sup> or all
	l w	Name all entities with whom you have this elationship or indicate	Specifications/Comments (e.g., if payments were made to you or to your institution)	

		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)
	Ti	me frame: Since the initia	I planning of the work
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		Time frame: past	36 months
2	Grants or contracts from	X None	

	any entity (if not indicated in item #1 above).		
3	Royalties or licenses	XNone	
4	Consulting fees	XNone	
5	Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or educational events	XNone	
6	Payment for expert testimony	X_None	
7	Support for attending meetings and/or travel	XNone	
8	Patents planned, issued or pending	XNone	
9	Participation on a Data Safety Monitoring Board or Advisory Board	XNone	
10	Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid	XNone	
11	Stock or stock options	XNone	
12	Receipt of equipment, materials, drugs, medical writing, gifts or other services	X_None	
13	Other financial or non- financial interests	XNone	

None.	
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X_ I certify that I have answered every question and have not altered the wording of any of the questions on this form.

Yo Ma cor	Date:Aug. 16 <sup>th</sup> , 2021 Your Name:Si Sun Manuscript Title:Identification of soluble thrombomodulin and tissue plasminogen activator-inhibitor complex as biomarkers for prognosis and early evaluation of septic shock and sepsis-induced DIC Manuscript number (if known):APM-21-2222				
	the interest of transparency, we ask you to disclose all relationships/activities/interests listed below				
	ated to the content of your manuscript. "Related" means any relation with for-profit or not-for-profit				
pa	rties whose interests may be affected by the content of the manuscript. Disclosure represents a mitment				
to	transparency and does not necessarily indicate a bias. If you are in doubt about whether to list a ationship/activity/interest, it is preferable that you do so.				
<u>cu</u>	The following questions apply to the author's relationships/activities/interests as they relate to the current manuscript only.				
	The author's relationships/activities/interests should be <u>defined broadly</u> . For example, if your manuscript pertains				
to	to the epidemiology of hypertension, you should declare all relationships with manufacturers of antihypertensive medication, even if that medication is not mentioned in the manuscript.				
oth	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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		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)
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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.	XNone	
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6	Payment for expert testimony	X_None	
7	Support for attending meetings and/or travel	XNone	
8	Patents planned, issued or pending	XNone	
9	Participation on a Data Safety Monitoring Board or Advisory Board	XNone	
10	Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid	XNone	
11	Stock or stock options	XNone	
12	Receipt of equipment, materials, drugs, medical writing, gifts or other services	X_None	
13	Other financial or non- financial interests	XNone	

None.	
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Da	Date:Aug. 16 <sup>th</sup> , 2021			
	ır Name:Beili Wang			
	nuscript Title:Identification of soluble thrombomodulin and tissue plasminogen activator-inhibitor			
	plex as biomarkers for prognosis and early evaluation of septic shock and sepsis-induced DIC			
Ma	nuscript number (if known):APM-21-2222			
	ne interest of transparency, we ask you to disclose all relationships/activities/interests listed below			
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thi	ted to the content of your manuscript. "Related" means any relation with for-profit or not-for-profit d			
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	ransparency and does not necessarily indicate a bias. If you are in doubt about whether to list a			
	tionship/activity/interest, it is preferable that you do so.			
	following questions apply to the author's relationships/activities/interests as they relate to the			
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Th	author's relationships/activities/interests should be <u>defined broadly</u> . For example, if your manuscript			
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	to the epidemiology of hypertension, you should declare all relationships with manufacturers of antihypertensive medication, even if that medication is not mentioned in the manuscript.			
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oth	other items,			
the	the time frame for disclosure is the past 36 months.			
	Name all entities with Specifications/Comments			
	whom you have this (e.g., if payments were made to you or to your			
	relationship or indicate institution)			

		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)
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1	All support for the present manuscript (efunding, provision of study materials, med writing, article procest charges, etc.) No time limit for this item.	ical ssing	
		Time frame: pas	at 36 months
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	any entity (if not indicated in item #1 above).		
3	Royalties or licenses	XNone	
4	Consulting fees	XNone	
5	Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or educational events	XNone	
6	Payment for expert testimony	X_None	
7	Support for attending meetings and/or travel	XNone	
8	Patents planned, issued or pending	XNone	
9	Participation on a Data Safety Monitoring Board or Advisory Board	XNone	
10	Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid	XNone	
11	Stock or stock options	XNone	
12	Receipt of equipment, materials, drugs, medical writing, gifts or other services	X_None	
13	Other financial or non- financial interests	XNone	

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Yo Ma cor	Date:Aug. 16 <sup>th</sup> , 2021 Your Name:Chaoyang Tong Manuscript Title:Identification of soluble thrombomodulin and tissue plasminogen activator-inhibitor complex as biomarkers for prognosis and early evaluation of septic shock and sepsis-induced DIC Manuscript number (if known):APM-21-2222			
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	ed to the content of your manuscript. "Related" means any relation with for-profit or not-for-profit			
pai	es whose interests may be affected by the content of the manuscript. Disclosure represents a mitment			
	ansparency and does not necessarily indicate a bias. If you are in doubt about whether to list a ionship/activity/interest, it is preferable that you do so.			
<u>cur</u>	The following questions apply to the author's relationships/activities/interests as they relate to the <a href="mailto:current">current</a> <a href="mailto:manuscript">manuscript</a> only.			
	The author's relationships/activities/interests should be <u>defined broadly</u> . For example, if your manuscript			
to t	pertains to the epidemiology of hypertension, you should declare all relationships with manufacturers of antihypertensive medication, even if that medication is not mentioned in the manuscript.			
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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)
	Ti	me frame: Since the initia	I 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	X None	

	any entity (if not indicated in item #1 above).		
3	Royalties or licenses	XNone	
4	Consulting fees	XNone	
5	Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or educational events	XNone	
6	Payment for expert testimony	X_None	
7	Support for attending meetings and/or travel	XNone	
8	Patents planned, issued or pending	XNone	
9	Participation on a Data Safety Monitoring Board or Advisory Board	XNone	
10	Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid	XNone	
11	Stock or stock options	XNone	
12	Receipt of equipment, materials, drugs, medical writing, gifts or other services	X_None	
13	Other financial or non- financial interests	XNone	

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Yo Ma co	te:Aug. 16 <sup>th</sup> , 2021 ur Name:Zhenju Song unuscript Title:Identification of soluble thrombomodulin and tissue plasminogen activator-inhibitor mplex as biomarkers for prognosis and early evaluation of septic shock and sepsis-induced DIC unuscript number (if known):APM-21-2222
	the interest of transparency, we ask you to disclose all relationships/activities/interests listed below at are
	ated to the content of your manuscript. "Related" means any relation with for-profit or not-for-profit
ра	rties whose interests may be affected by the content of the manuscript. Disclosure represents a mmitment
to	transparency and does not necessarily indicate a bias. If you are in doubt about whether to list a ationship/activity/interest, it is preferable that you do so.
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	e author's relationships/activities/interests should be <u>defined broadly</u> . For example, if your manuscript rtains
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