Date:	September 7, 2021
Your Name:	Na Liu
Manuscript '	Title: Preliminary clinical application of foldable capsular vitreous body in severe silicone oil-dependent eyes
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.

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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.

		Name all entities with whom you have this relationship or indicate none (add rows as needed) Time frame: Since the initial	Specifications/Comments (e.g., if payments were made to you or to your institution)
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	X None
2	Grants or contracts from any entity (if not indicated in item #1 above). Royalties or licenses	X None X None	X None X None
4	Consulting fees	X None	X None

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

Nor	ne		

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

Date:	September 7, 2021
Your Name:	Ling Kang
Manuscript	Title: Preliminary clinical application of foldable capsular vitreous body in severe silicone oil-dependent eyes
Manuscript	number (if known):

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4	Consulting fees	X None	X None

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

Nor	ne		

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

Date:	September 7, 2021
Your Name:	Xi Yu
Manuscript ¹	Title: Preliminary clinical application of foldable capsular vitreous body in severe silicone oil-dependent eyes
Manuscript	number (if known):

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2	Grants or contracts from any entity (if not indicated in item #1 above). Royalties or licenses	X None X None	X None X None
4	Consulting fees	X None	X None

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

Nor	ne		

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

Date:September 7, 2021
Your Name: Qingqing Lv
Manuscript Title: Preliminary clinical application of foldable capsular vitreous body in severe silicone oil-dependent eyes
Manuscript number (if known):

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2	Grants or contracts from any entity (if not indicated in item #1 above). Royalties or licenses	Time frame: past X None X None	X None X None
4	Consulting fees	X_ None	<u>X</u> None

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

Nor	ne		

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

Date:	September 7, 2021
Your Name:	Lei Xi
Manuscript '	Title: Preliminary clinical application of foldable capsular vitreous body in severe silicone oil-dependent eyes
Manuscript	number (if known):

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2	Grants or contracts from any entity (if not indicated in item #1 above). Royalties or licenses	X None X None	X None X None
4	Consulting fees	X None	X None

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

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

Date:	September 7, 2021
Your Name:	Meifang Liu
Manuscript '	Title: Preliminary clinical application of foldable capsular vitreous body in severe silicone oil-dependent eyes
Manuscript	number (if known):

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4	Consulting fees	X None	X None

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

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

Date:	September 7, 2021
Your Name:	Yong Liu
Manuscript '	Title: Preliminary clinical application of foldable capsular vitreous body in severe silicone oil-dependent eyes
Manuscript	number (if known):

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2	any entity (if not indicated in item #1 above).	X None	X_ None
3	Royalties or licenses	X_None	X_ None
4	Consulting fees	X_ None	X_ None

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

ı	None			

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

Date:	September 7, 2021
Your Name:	Nan Wu
Manuscript '	Title: Preliminary clinical application of foldable capsular vitreous body in severe silicone oil-dependent eyes
Manuscript	number (if known):

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4	Consulting fees	X_ None	<u>X</u> None

5	Payment or honoraria for	X None	X None
	lectures, presentations,		
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6	Payment for expert	X None	X None
	testimony		
7	Support for attending meetings and/or travel	X_ None	X_ None
8	Patents planned, issued or	X None	X None
	pending		
9	Participation on a Data	X None	X None
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12	Descipt of aguinment	V N	V N
12	Receipt of equipment, materials, drugs, medical	X None	X None
	writing, gifts or other		
	services		
13	Other financial or non-	X None	X None
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