Date:	_2021.12.20	
Your Na	ame:Peng Li	
Manuso	ript Title: A meta-analysis and systematic review of the influence of case analysis teaching in clinical an	nesthesia
<u>educati</u>	<u>on</u>	
Manuso	ript 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.

The following questions apply to the author's relationships/activities/interests as they relate to the <u>current</u> <u>manuscript only</u>.

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)	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	None	
	manuscript (e.g., funding,		
	provision of study materials,		
	medical writing, article		
	processing charges, etc.)		
	No time limit for this item.		
		Time frame: past	36 months
2	Grants or contracts from	None	
	any entity (if not indicated		
	in item #1 above).		
3	Royalties or licenses	None	
4	Consulting fees	None	

5 Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or educational events None 6 Payment for expert testimony None 7 Support for attending meetings and/or travel None 8 Patents planned, issued or pending None 9 Patricipation on a Data Safety Monitoring Board or Advisory Board None 10 Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid None 11 Stock or stock options None 12 Receipt of equipment, materials, drugs, medical writing, gifts or other services None 13 Other financial or non- financial interests None				
lectures, presentations, speakers bureaus, manuscript writing or educational events				
speakers bureaus, manuscript writing or educational events	5	Payment or honoraria for	None	
manuscript writing or educational events		lectures, presentations,		
educational events		speakers bureaus,		
educational events		-		
6 Payment for expert testimony				
testimony	6		None	
7 Support for attending meetings and/or travel None 8 Patents planned, issued or pending None 9 Participation on a Data Safety Monitoring Board or Advisory Board None 10 Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid None 11 Stock or stock options None 12 Receipt of equipment, materials, drugs, medical writing, gifts or other services None 13 Other financial or non- None	0			
meetings and/or travel		testimony		
meetings and/or travel	_			
8 Patents planned, issued or pending	7		None	
pending		meetings and/or travel		
pending				
pending				
pending				
pending	0	Patents planned issued or	Nono	
9 Participation on a Data Safety Monitoring Board or Advisory Board None 10 Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid None 11 Stock or stock options None 12 Receipt of equipment, materials, drugs, medical writing, gifts or other services None 13 Other financial or non- None	0			
Safety Monitoring Board or Advisory Board		pending		
Safety Monitoring Board or Advisory Board				
Advisory Board	9		None	
10 Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid None 11 Stock or stock options None 11 Stock or stock options None 12 Receipt of equipment, materials, drugs, medical writing, gifts or other services None 13 Other financial or non- None				
in other board, society, committee or advocacy group, paid or unpaid		Advisory Board		
committee or advocacy	10	Leadership or fiduciary role	None	
group, paid or unpaid None 11 Stock or stock options None 12 Receipt of equipment, materials, drugs, medical writing, gifts or other services None 13 Other financial or non- None		in other board, society,		
11 Stock or stock options None 12 Receipt of equipment, materials, drugs, medical writing, gifts or other services None 13 Other financial or non- None		committee or advocacy		
11 Stock or stock options None 12 Receipt of equipment, materials, drugs, medical writing, gifts or other services None 13 Other financial or non- None		group, paid or unpaid		
12 Receipt of equipment, materials, drugs, medical writing, gifts or other services None 13 Other financial or non- None	11		None	
materials, drugs, medical				
materials, drugs, medical				
materials, drugs, medical	12	Possint of aquinment	Nono	
writing, gifts or other services	12			
services 13 Other financial or non- None				
13 Other financial or non- None				
financial interests	13		None	
		financial interests		

None.

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

Date:		
Your Na	ame:Meiting Li	
Manus	cript Title: <u>A meta-analysis and systematic review of the influence of case analysis teaching in clinical anesthes</u>	ia
<u>educati</u>	ion_	
Manus	cript 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.

The following questions apply to the author's relationships/activities/interests as they relate to the <u>current</u> <u>manuscript only</u>.

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)	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	None	
	manuscript (e.g., funding,		
	provision of study materials,		
	medical writing, article		
	processing charges, etc.)		
	No time limit for this item.		
		Time frame: past	36 months
2	Grants or contracts from	None	
	any entity (if not indicated		
	in item #1 above).		
3	Royalties or licenses	None	
4	Consulting fees	None	

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

None.

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

Date:_	2021.12.20
Your N	ame:Lili Tian
Manus	cript Title: <u>A meta-analysis and systematic review of the influence of case analysis teaching in clinical anesthesi</u>
<u>educat</u>	<u>ion</u>
Manus	cript 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.

The following questions apply to the author's relationships/activities/interests as they relate to the <u>current</u> <u>manuscript only</u>.

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)	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	None	
	manuscript (e.g., funding,		
	provision of study materials,		
	medical writing, article		
	processing charges, etc.)		
	No time limit for this item.		
		Time frame: past	36 months
2	Grants or contracts from	None	
	any entity (if not indicated		
	in item #1 above).		
3	Royalties or licenses	None	
4	Consulting fees	None	

5 Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or educational events None 6 Payment for expert testimony None 7 Support for attending meetings and/or travel None 8 Patents planned, issued or pending None 9 Patricipation on a Data Safety Monitoring Board or Advisory Board None 10 Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid None 11 Stock or stock options None 12 Receipt of equipment, materials, drugs, medical writing, gifts or other services None 13 Other financial or non- financial interests None				
lectures, presentations, speakers bureaus, manuscript writing or educational events				
speakers bureaus, manuscript writing or educational events	5	Payment or honoraria for	None	
manuscript writing or educational events		lectures, presentations,		
educational events		speakers bureaus,		
educational events		-		
6 Payment for expert testimony				
testimony	6		None	
7 Support for attending meetings and/or travel None 8 Patents planned, issued or pending None 9 Participation on a Data Safety Monitoring Board or Advisory Board None 10 Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid None 11 Stock or stock options None 12 Receipt of equipment, materials, drugs, medical writing, gifts or other services None 13 Other financial or non- None	0			
meetings and/or travel		testimony		
meetings and/or travel	_			
8 Patents planned, issued or pending	7		None	
pending		meetings and/or travel		
pending				
pending				
pending				
pending	0	Patents planned issued or	Nono	
9 Participation on a Data Safety Monitoring Board or Advisory Board None 10 Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid None 11 Stock or stock options None 12 Receipt of equipment, materials, drugs, medical writing, gifts or other services None 13 Other financial or non- None	0			
Safety Monitoring Board or Advisory Board		pending		
Safety Monitoring Board or Advisory Board				
Advisory Board	9		None	
10 Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid None 11 Stock or stock options None 11 Stock or stock options None 12 Receipt of equipment, materials, drugs, medical writing, gifts or other services None 13 Other financial or non- None				
in other board, society, committee or advocacy group, paid or unpaid		Advisory Board		
committee or advocacy	10	Leadership or fiduciary role	None	
group, paid or unpaid None 11 Stock or stock options None 12 Receipt of equipment, materials, drugs, medical writing, gifts or other services None 13 Other financial or non- None		in other board, society,		
11 Stock or stock options None 12 Receipt of equipment, materials, drugs, medical writing, gifts or other services None 13 Other financial or non- None		committee or advocacy		
11 Stock or stock options None 12 Receipt of equipment, materials, drugs, medical writing, gifts or other services None 13 Other financial or non- None		group, paid or unpaid		
12 Receipt of equipment, materials, drugs, medical writing, gifts or other services None 13 Other financial or non- None	11		None	
materials, drugs, medical				
materials, drugs, medical				
materials, drugs, medical	12	Possint of aquinment	Nono	
writing, gifts or other services	12			
services 13 Other financial or non- None				
13 Other financial or non- None				
financial interests	13		None	
		financial interests		

None.

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

Date:	_2021.12.20
Your Na	me:Jiyue You
Manus	ript Title: <u>A meta-analysis and systematic review of the influence of case analysis teaching in clinical anesthesi</u>
educati	<u>on</u>
Manus	ript 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.

The following questions apply to the author's relationships/activities/interests as they relate to the <u>current</u> <u>manuscript only</u>.

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)	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	None	
	manuscript (e.g., funding,		
	provision of study materials,		
	medical writing, article		
	processing charges, etc.)		
	No time limit for this item.		
		Time frame: past	36 months
2	Grants or contracts from	None	
	any entity (if not indicated		
	in item #1 above).		
3	Royalties or licenses	None	
4	Consulting fees	None	

5 Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or educational events None 6 Payment for expert testimony None 7 Support for attending meetings and/or travel None 8 Patents planned, issued or pending None 9 Patricipation on a Data Safety Monitoring Board or Advisory Board None 10 Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid None 11 Stock or stock options None 12 Receipt of equipment, materials, drugs, medical writing, gifts or other services None 13 Other financial or non- financial interests None				
lectures, presentations, speakers bureaus, manuscript writing or educational events				
speakers bureaus, manuscript writing or educational events	5	Payment or honoraria for	None	
manuscript writing or educational events		lectures, presentations,		
educational events		speakers bureaus,		
educational events		-		
6 Payment for expert testimony				
testimony	6		None	
7 Support for attending meetings and/or travel None 8 Patents planned, issued or pending None 9 Participation on a Data Safety Monitoring Board or Advisory Board None 10 Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid None 11 Stock or stock options None 12 Receipt of equipment, materials, drugs, medical writing, gifts or other services None 13 Other financial or non- None	0			
meetings and/or travel		testimony		
meetings and/or travel	_			
8 Patents planned, issued or pending	7		None	
pending		meetings and/or travel		
pending				
pending				
pending				
pending	0	Patents planned issued or	Nono	
9 Participation on a Data Safety Monitoring Board or Advisory Board None 10 Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid None 11 Stock or stock options None 12 Receipt of equipment, materials, drugs, medical writing, gifts or other services None 13 Other financial or non- None	0			
Safety Monitoring Board or Advisory Board		pending		
Safety Monitoring Board or Advisory Board				
Advisory Board	9		None	
10 Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid None 11 Stock or stock options None 11 Stock or stock options None 12 Receipt of equipment, materials, drugs, medical writing, gifts or other services None 13 Other financial or non- None				
in other board, society, committee or advocacy group, paid or unpaid		Advisory Board		
committee or advocacy	10	Leadership or fiduciary role	None	
group, paid or unpaid None 11 Stock or stock options None 12 Receipt of equipment, materials, drugs, medical writing, gifts or other services None 13 Other financial or non- None		in other board, society,		
11 Stock or stock options None 12 Receipt of equipment, materials, drugs, medical writing, gifts or other services None 13 Other financial or non- None		committee or advocacy		
11 Stock or stock options None 12 Receipt of equipment, materials, drugs, medical writing, gifts or other services None 13 Other financial or non- None		group, paid or unpaid		
12 Receipt of equipment, materials, drugs, medical writing, gifts or other services None 13 Other financial or non- None	11		None	
materials, drugs, medical				
materials, drugs, medical				
materials, drugs, medical	12	Possint of aquinment	Nono	
writing, gifts or other services	12			
services 13 Other financial or non- None				
13 Other financial or non- None				
financial interests	13		None	
		financial interests		

None.

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

Date:_	2021.12.20
Your N	ame:Jie Xiao
Manus	cript Title: <u>A meta-analysis and systematic review of the influence of case analysis teaching in clinical anesthes</u> i
<u>educat</u>	ion
Manus	cript 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.

The following questions apply to the author's relationships/activities/interests as they relate to the <u>current</u> <u>manuscript only</u>.

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)	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	None	
	manuscript (e.g., funding,		
	provision of study materials,		
	medical writing, article		
	processing charges, etc.)		
	No time limit for this item.		
		Time frame: past	36 months
2	Grants or contracts from	None	
	any entity (if not indicated		
	in item #1 above).		
3	Royalties or licenses	None	
4	Consulting fees	None	

5 Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or educational events None 6 Payment for expert testimony None 7 Support for attending meetings and/or travel None 8 Patents planned, issued or pending None 9 Patricipation on a Data Safety Monitoring Board or Advisory Board None 10 Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid None 11 Stock or stock options None 12 Receipt of equipment, materials, drugs, medical writing, gifts or other services None 13 Other financial or non- financial interests None				
lectures, presentations, speakers bureaus, manuscript writing or educational events				
speakers bureaus, manuscript writing or educational events	5	Payment or honoraria for	None	
manuscript writing or educational events		lectures, presentations,		
educational events		speakers bureaus,		
educational events		-		
6 Payment for expert testimony				
testimony	6		None	
7 Support for attending meetings and/or travel None 8 Patents planned, issued or pending None 9 Participation on a Data Safety Monitoring Board or Advisory Board None 10 Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid None 11 Stock or stock options None 12 Receipt of equipment, materials, drugs, medical writing, gifts or other services None 13 Other financial or non- None	0			
meetings and/or travel		testimony		
meetings and/or travel	_			
8 Patents planned, issued or pending	7		None	
pending		meetings and/or travel		
pending				
pending				
pending				
pending	0	Patents planned issued or	Nono	
9 Participation on a Data Safety Monitoring Board or Advisory Board None 10 Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid None 11 Stock or stock options None 12 Receipt of equipment, materials, drugs, medical writing, gifts or other services None 13 Other financial or non- None	0			
Safety Monitoring Board or Advisory Board		pending		
Safety Monitoring Board or Advisory Board				
Advisory Board	9		None	
10 Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid None 11 Stock or stock options None 11 Stock or stock options None 12 Receipt of equipment, materials, drugs, medical writing, gifts or other services None 13 Other financial or non- None				
in other board, society, committee or advocacy group, paid or unpaid		Advisory Board		
committee or advocacy	10	Leadership or fiduciary role	None	
group, paid or unpaid None 11 Stock or stock options None 12 Receipt of equipment, materials, drugs, medical writing, gifts or other services None 13 Other financial or non- None		in other board, society,		
11 Stock or stock options None 12 Receipt of equipment, materials, drugs, medical writing, gifts or other services None 13 Other financial or non- None		committee or advocacy		
11 Stock or stock options None 12 Receipt of equipment, materials, drugs, medical writing, gifts or other services None 13 Other financial or non- None		group, paid or unpaid		
12 Receipt of equipment, materials, drugs, medical writing, gifts or other services None 13 Other financial or non- None	11		None	
materials, drugs, medical				
materials, drugs, medical				
materials, drugs, medical	12	Possint of aquinment	Nono	
writing, gifts or other services	12			
services 13 Other financial or non- None				
13 Other financial or non- None				
financial interests	13		None	
		financial interests		

None.

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

Date:	2021.12.20	
Your	Name:Guilin Xiang	
Manu	iscript Title: <u>A meta-analysis and systematic review of the influence of case analysis teaching in clinical anesthes</u>	ia
<u>educa</u>	ition	
Manu	ıscript 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.

The following questions apply to the author's relationships/activities/interests as they relate to the <u>current</u> <u>manuscript only</u>.

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)	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	None	
	manuscript (e.g., funding,		
	provision of study materials,		
	medical writing, article		
	processing charges, etc.)		
	No time limit for this item.		
		Time frame: past	36 months
2	Grants or contracts from	None	
	any entity (if not indicated		
	in item #1 above).		
3	Royalties or licenses	None	
4	Consulting fees	None	

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

None.

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

Date:	2021.12.20	
Your	ne:Xizhi Ding	
Manu	pt Title: <u>A meta-analysis and systematic review of the influence of case analysis teaching in clinical anesthe</u>	sia
educa	<u>1</u>	
Manu	pt 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.

The following questions apply to the author's relationships/activities/interests as they relate to the <u>current</u> <u>manuscript only</u>.

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)	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	None	
	manuscript (e.g., funding,		
	provision of study materials,		
	medical writing, article		
	processing charges, etc.)		
	No time limit for this item.		
		Time frame: past	36 months
2	Grants or contracts from	None	
	any entity (if not indicated		
	in item #1 above).		
3	Royalties or licenses	None	
4	Consulting fees	None	

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

None.

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

Date:	_2021.12.20
Your I	ame:Rong Jiang
Manu	cript Title: <u>A meta-analysis and systematic review of the influence of case analysis teaching in clinical anesthesi</u>
educa	ion
Manu	cript 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.

The following questions apply to the author's relationships/activities/interests as they relate to the <u>current</u> <u>manuscript only</u>.

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)	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	None	
	manuscript (e.g., funding,		
	provision of study materials,		
	medical writing, article		
	processing charges, etc.)		
	No time limit for this item.		
		Time frame: past	36 months
2	Grants or contracts from	None	
	any entity (if not indicated		
	in item #1 above).		
3	Royalties or licenses	None	
4	Consulting fees	None	

5 Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or educational events None 6 Payment for expert testimony None 7 Support for attending meetings and/or travel None 8 Patents planned, issued or pending None 9 Patricipation on a Data Safety Monitoring Board or Advisory Board None 10 Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid None 11 Stock or stock options None 12 Receipt of equipment, materials, drugs, medical writing, gifts or other services None 13 Other financial or non- financial interests None				
lectures, presentations, speakers bureaus, manuscript writing or educational events				
speakers bureaus, manuscript writing or educational events	5	Payment or honoraria for	None	
manuscript writing or educational events		lectures, presentations,		
educational events		speakers bureaus,		
educational events		-		
6 Payment for expert testimony				
testimony	6		None	
7 Support for attending meetings and/or travel None 8 Patents planned, issued or pending None 9 Participation on a Data Safety Monitoring Board or Advisory Board None 10 Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid None 11 Stock or stock options None 12 Receipt of equipment, materials, drugs, medical writing, gifts or other services None 13 Other financial or non- None	0			
meetings and/or travel		testimony		
meetings and/or travel	_			
8 Patents planned, issued or pending	7		None	
pending		meetings and/or travel		
pending				
pending				
pending				
pending	0	Patents planned issued or	Nono	
9 Participation on a Data Safety Monitoring Board or Advisory Board None 10 Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid None 11 Stock or stock options None 12 Receipt of equipment, materials, drugs, medical writing, gifts or other services None 13 Other financial or non- None	0			
Safety Monitoring Board or Advisory Board		pending		
Safety Monitoring Board or Advisory Board				
Advisory Board	9		None	
10 Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid None 11 Stock or stock options None 11 Stock or stock options None 12 Receipt of equipment, materials, drugs, medical writing, gifts or other services None 13 Other financial or non- None				
in other board, society, committee or advocacy group, paid or unpaid		Advisory Board		
committee or advocacy	10	Leadership or fiduciary role	None	
group, paid or unpaid None 11 Stock or stock options None 12 Receipt of equipment, materials, drugs, medical writing, gifts or other services None 13 Other financial or non- None		in other board, society,		
11 Stock or stock options None 12 Receipt of equipment, materials, drugs, medical writing, gifts or other services None 13 Other financial or non- None		committee or advocacy		
11 Stock or stock options None 12 Receipt of equipment, materials, drugs, medical writing, gifts or other services None 13 Other financial or non- None		group, paid or unpaid		
12 Receipt of equipment, materials, drugs, medical writing, gifts or other services None 13 Other financial or non- None	11		None	
materials, drugs, medical				
materials, drugs, medical				
materials, drugs, medical	12	Possint of aquinment	Nono	
writing, gifts or other services	12			
services Image: services 13 Other financial or non- None				
13 Other financial or non- None				
financial interests	13		None	
		financial interests		

None.

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

Date:	2021.12.20
Your Na	me:Juan Liao
Manus	ript Title: <u>A meta-analysis and systematic review of the influence of case analysis teaching in clinical anesthesi</u>
<u>educati</u>	<u>on</u>
Manus	ript 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.

The following questions apply to the author's relationships/activities/interests as they relate to the <u>current</u> <u>manuscript only</u>.

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)	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.	None				
	Time frame: past 36 months					
2	Grants or contracts from any entity (if not indicated	None				
	in item #1 above).					
3	Royalties or licenses	None				
4	Consulting fees	None				

5 Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or educational events None 6 Payment for expert testimony None 7 Support for attending meetings and/or travel None 8 Patents planned, issued or pending None 9 Patricipation on a Data Safety Monitoring Board or Advisory Board None 10 Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid None 11 Stock or stock options None 12 Receipt of equipment, materials, drugs, medical writing, gifts or other services None 13 Other financial or non- financial interests None				
lectures, presentations, speakers bureaus, manuscript writing or educational events				
speakers bureaus, manuscript writing or educational events	5	lectures, presentations,	None	
manuscript writing or educational events				
educational events				
educational events		-		
6 Payment for expert testimony				
testimony	6		None	
7 Support for attending meetings and/or travel None 8 Patents planned, issued or pending None 9 Participation on a Data Safety Monitoring Board or Advisory Board None 10 Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid None 11 Stock or stock options None 12 Receipt of equipment, materials, drugs, medical writing, gifts or other services None 13 Other financial or non- None	0			
meetings and/or travel				
meetings and/or travel	_			
8 Patents planned, issued or pending	7		None	
pending		meetings and/or travel		
pending				
pending				
pending				
pending	0	Detents planned issued or	Nono	
9 Participation on a Data Safety Monitoring Board or Advisory Board None 10 Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid None 11 Stock or stock options None 12 Receipt of equipment, materials, drugs, medical writing, gifts or other services None 13 Other financial or non- None	0			
Safety Monitoring Board or Advisory Board		pending		
Safety Monitoring Board or Advisory Board				
Advisory Board	9		None	
10 Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid None 11 Stock or stock options None 11 Stock or stock options None 12 Receipt of equipment, materials, drugs, medical writing, gifts or other services None 13 Other financial or non- None				
in other board, society, committee or advocacy group, paid or unpaid		Advisory Board		
committee or advocacy	10	Leadership or fiduciary role	None	
group, paid or unpaid None 11 Stock or stock options None 12 Receipt of equipment, materials, drugs, medical writing, gifts or other services None 13 Other financial or non- None		in other board, society,		
11 Stock or stock options None 12 Receipt of equipment, materials, drugs, medical writing, gifts or other services None 13 Other financial or non- None		committee or advocacy		
11 Stock or stock options None 12 Receipt of equipment, materials, drugs, medical writing, gifts or other services None 13 Other financial or non- None		group, paid or unpaid		
12 Receipt of equipment, materials, drugs, medical writing, gifts or other services None 13 Other financial or non- None	11		None	
materials, drugs, medical				
materials, drugs, medical				
materials, drugs, medical	12	Possint of aquinment	Nono	
writing, gifts or other services	12			
services 13 Other financial or non- None				
13 Other financial or non- None				
financial interests	13		None	

None.

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