

## ICMJE DISCLOSURE FORM

**Date:** 12/2/2021

**Your Name:** Wensen Chen

**Manuscript Title:** **Incidence and outcomes of patients with COVID-19-Associated pulmonary Aspergillosis (CAPA) in intensive care units: a systematic review and meta-analysis of 31 cohort studies**

**Manuscript Number (if known):** **APM-21-2043-R1**

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 author's relationships/activities/interests should be defined broadly. 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.

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

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**Your Name:** Ming Zhong

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**Manuscript Number (if known):** **APM-21-2043-R1**

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**Your Name:** Bijie Hu

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**Your Name:** Xiaodong Gao

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## ICMJJE DISCLOSURE FORM

**Date:** 12/2/2021

**Your Name:** Kai Zhang

**Manuscript Title:** **Incidence and outcomes of patients with COVID-19-Associated pulmonary Aspergillosis (CAPA) in intensive care units: a systematic review and meta-analysis of 31 cohort studies**

**Manuscript Number (if known):** **APM-21-2043-R1**

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## ICMJE DISCLOSURE FORM

**Date:** 12/2/2021

**Your Name:** Yun Liu

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**Manuscript Number (if known):** **APM-21-2043-R1**

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**Date:** 12/2/2021

**Your Name:** Guihua Zhuang

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**Manuscript Number (if known):** **APM-21-2043-R1**

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