Date:March 2 nd , 2021
Your Name:Cristina Nguyen, MD, MSBS, MHA
Manuscript Title:SARS-CoV-2 infection in patients with thyroid disease: a cross-sectional study
Manuscript number (if known): AOT-21-8

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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		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) 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 any entity (if not indicated in item #1 above).	XNone	
3	Royalties or licenses	X_None	
4	Consulting fees	XNone	

5	Payment or honoraria for	XNone	
	lectures, presentations,		
	speakers bureaus,		
	manuscript writing or		
	educational events	V. Nama	
6	Payment for expert testimony	XNone	
	testimony		
7	Support for attending	X None	
,	meetings and/or travel		
	meetings and, or traver		
8	Patents planned, issued or	XNone	
	pending		
9	Participation on a Data	XNone	
	Safety Monitoring Board or		
	Advisory Board		
10	Leadership or fiduciary role	XNone	
	in other board, society,		
	committee or advocacy		
	group, paid or unpaid		
11	Stock or stock options	XNone	
42	D	V N	
12	Receipt of equipment,	X_None	
	materials, drugs, medical writing, gifts or other services		
4.5			
13	Other financial or non-	XNone	
	financial interests		
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Please summarize the above conflict of interest in the following box:

None.	

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

Date:March 2 nd , 2021
Your Name:Katerina Yale, MD
Manuscript Title:SARS-CoV-2 infection in patients with thyroid disease: a cross-sectional study
Manuscript number (if known):AOT-21-8

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		Time frame: past	36 months
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3	Royalties or licenses	XNone	
4	Consulting fees	XNone	

		T	T
5	Payment or honoraria for lectures, presentations, speakers bureaus,	XNone	
	manuscript writing or		
	educational events		
6	Payment for expert	XNone	
	testimony		
7	Support for attending	XNone	
	meetings and/or travel		
8	Patents planned, issued or	X None	
	pending		
9	Participation on a Data	XNone	
	Safety Monitoring Board or		
	Advisory Board		
10		XNone	
	in other board, society,		
	committee or advocacy		
	group, paid or unpaid		
11	Stock or stock options	XNone	
12	Receipt of equipment,	X_None	
	materials, drugs, medical		
	writing, gifts or other		
	services		
13	Other financial or non- financial interests	X None	
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Please summarize the above conflict of interest in the following box:

None.			

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

Date:March 2 nd , 2021
Your Name:Alessandro Ghigi, MS
Manuscript Title:SARS-CoV-2 infection in patients with thyroid disease: a cross-sectional study
Manuscript number (if known):AOT-21-8

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

5	Payment or honoraria for lectures, presentations,	XNone		
	speakers bureaus,			
	manuscript writing or			
-	educational events	V N		
6	Payment for expert	XNone		
	testimony			
7	Support for attending	X None		
,	meetings and/or travel	^_NOTIE		
	meetings and/or traver			
8	Patents planned, issued or	X None		
ا ا	pending	^_NOTE		
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0	Participation on a Data	Y None		
9	Participation on a Data Safety Monitoring Board or	XNone		
	Advisory Board			
10	Leadership or fiduciary role	X None		
_0	in other board, society, committee or advocacy group, paid or unpaid			
11	Stock or stock options	X None		
	μ			
12	Receipt of equipment,	XNone		
	materials, drugs, medical			
	writing, gifts or other			
	services			
13	Other financial or non-	XNone		
	financial interests			
Plea	ase summarize the above co	nflict of interest in the foll	owing box:	
N	None.			

Date:March 2 nd , 2021
Your Name:Kai Zheng, PhD
Manuscript Title:SARS-CoV-2 infection in patients with thyroid disease: a cross-sectional study
Manuscript number (if known): AOT-21-8

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

5	Payment or honoraria for	XNone			
	lectures, presentations,				
	speakers bureaus,				
	manuscript writing or educational events				
6	Payment for expert	X None			
	testimony	XNONE			
	,				
7	Support for attending meetings and/or travel	XNone			
8	Patents planned, issued or	XNone			
	pending				
9	Participation on a Data	XNone			
	Safety Monitoring Board or				
10	Advisory Board Leadership or fiduciary role	X None			
10	in other board, society,	^NOTIE			
	committee or advocacy				
	group, paid or unpaid				
11	Stock or stock options	X None			
12	Receipt of equipment,	XNone			
	materials, drugs, medical				
	writing, gifts or other services				
13	Other financial or non-	XNone			
	financial interests				
Please summaring the charge conflict of interest in the fall suring hour					
Please summarize the above conflict of interest in the following box:					

None.			

Date:March 2 nd , 2021
Your Name:Natasha Atanaskova Mesinkovska, MD, PhD
Manuscript Title:SARS-CoV-2 infection in patients with thyroid disease: a cross-sectional study
Manuscript number (if known): AOT-21-8

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3	Royalties or licenses	XNone	
4	Consulting fees	XNone	

5	Payment or honoraria for	XNone	
	ectures, presentations,		
	speakers bureaus,		
	manuscript writing or		
	educational events		
6	Payment for expert	X None	
	testimony		
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7	Support for attending	X None	
,	meetings and/or travel		
	meetings and/or traver		
8	Patents planned, issued or	XNone	
	pending		
0	Participation on a Data	X None	
9		XNone	
	Safety Monitoring Board or		
	Advisory Board		
10	Leadership or fiduciary role	XNone	
	in other board, society,		
	committee or advocacy		
	group, paid or unpaid		
11	Stock or stock options	XNone	
12	Receipt of equipment,	X_None	
	materials, drugs, medical		
	writing, gifts or other		
	services		
13	Other financial or non-	XNone	
	financial interests		
Please summarize the above conflict of interest in the following box:			

None.

Date:March 2 nd , 2021
Your Name:Carlos Gustavo Wambier, MD, PhD
Manuscript Title:SARS-CoV-2 infection in patients with thyroid disease: a cross-sectional study
Manuscript number (if known): AOT-21-8

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3	Royalties or licenses	X_None	
4	Consulting fees	XNone	

5	Payment or honoraria for	XNone	
	ectures, presentations,		
	speakers bureaus,		
	manuscript writing or		
	educational events		
6	Payment for expert	X None	
	testimony		
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7	Support for attending	X None	
,	meetings and/or travel		
	meetings and/or traver		
8	Patents planned, issued or	XNone	
	pending		
0	Participation on a Data	X None	
9		XNone	
	Safety Monitoring Board or		
	Advisory Board		
10	Leadership or fiduciary role	XNone	
	in other board, society,		
	committee or advocacy		
	group, paid or unpaid		
11	Stock or stock options	XNone	
12	Receipt of equipment,	X_None	
	materials, drugs, medical		
	writing, gifts or other		
	services		
13	Other financial or non-	XNone	
	financial interests		
Please summarize the above conflict of interest in the following box:			

None.

Date: March 3 rd , 2021				
Your Name:Flavio Adsuara Cadegiani, MD, MSc, PhD				
Manuscript Title:SARS-CoV-2 infection in patients with thyroid disease: a cross-sectional study				
Manuscript number (if known): AOT-21-8				

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

		1	
5	Payment or honoraria for lectures, presentations,	XNone	
1			
	speakers bureaus,		
	manuscript writing or		
	educational events		
6	Payment for expert	X None	
	testimony		
	•		
7	Support for attending	X None	
,	meetings and/or travel		
	meetings and/or traver		
8	Patents planned, issued or	XNone	
	pending		
0	Doubleinstien en e Dobe	V None	
9	Participation on a Data	XNone	
	Safety Monitoring Board or		
	Advisory Board		
10	Leadership or fiduciary role	XNone	
	in other board, society,		
	committee or advocacy		
	group, paid or unpaid		
11	Stock or stock options	X None	
	·		
12	Receipt of equipment,	X_None	
12	materials, drugs, medical		
	writing, gifts or other		
	services		
13	Other financial or non-	XNone	
	financial interests		
Plea	se summarize the above co	nflict of interest in the follow	owing box:

None.

Date:March 2 nd , 2021
Your Name:Andy Goren, MD
Manuscript Title:SARS-CoV-2 infection in patients with thyroid disease: a cross-sectional study
Manuscript number (if known): AOT-21-8

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	Time frame: past 36 months					
2	Grants or contracts from any entity (if not indicated in item #1 above).	XNone				
3	Royalties or licenses	X_None				
4	Consulting fees	XNone				

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

Please summarize the above conflict of interest in the following box:

None.			

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