

ICMJE Form for Disclosure of Potential Conflicts of Interest

Instructions

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Section 1. Identifying Information

1. Given Name (First Name)
Eunyoung

2. Surname (Last Name)
Lee

3. Date
28-April-2020

4. Are you the corresponding author?

☐ Yes ☒ No

Corresponding Author's Name
Joo Hun Park

5. Manuscript Title
Blood lead levels in relation to smoking and COPD: A study from Korean National Health and Nutrition Examination Survey (KNHANES).

6. Manuscript Identifying Number (if you know it)
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Bumhee

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Park

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Woo Young

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Chung

3. Date
28-April-2020

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☐ Yes ☒ No

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Ji Eun

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Park

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Sung Chul

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Hwang

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☒ No

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)
Kwang Joo

2. Surname (Last Name)
Park

3. Date
28-April-2020

4. Are you the corresponding author?

☐ Yes ☒ No

Corresponding Author's Name
Joo Hun Park

5. Manuscript Title
Blood lead levels in relation to smoking and COPD: A study from Korean National Health and Nutrition Examination Survey (KNHANES).

6. Manuscript Identifying Number (if you know it)
JTD-20-739-R2.

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Section 4. Intellectual Property -- Patents & Copyrights

Do you have any patents, whether planned, pending or issued, broadly relevant to the work? ☐ Yes ☒ No

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Dr. Park has nothing to disclose.

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Section 1. Identifying Information

1. Given Name (First Name)
Seung Soo

2. Surname (Last Name)
Sheen

3. Date
28-April-2020

4. Are you the corresponding author?

☐ Yes ☒ No

Corresponding Author's Name
Joo Hun Park

5. Manuscript Title
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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)
Song Vogue

2. Surname (Last Name)
Ahn

3. Date
29-April-2020

4. Are you the corresponding author?

☐ Yes

☒ No

Corresponding Author's Name
Ju Hun Park

5. Manuscript Title
Blood lead levels in relation to smoking and COPD: A study from Korean National Health and Nutrition Examination Survey (KNHANES).

6. Manuscript Identifying Number (if you know it)
JTD-20-739-R2.

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)

Jae Bum

2. Surname (Last Name)

Park

3. Date

28-April-2020

4. Are you the corresponding author?

☐ Yes

☒ No

Corresponding Author's Name

Joo Hun Park

5. Manuscript Title

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6. Manuscript Identifying Number (if you know it)

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Chul Min

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Ahn

3. Date

28-April-2020

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Corresponding Author's Name

Joo Hun Park

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Sang Haak

2. Surname (Last Name)

Lee

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28-April-2020

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☐ Yes

☒ No

Corresponding Author's Name

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)

Jae Yeol

2. Surname (Last Name)

Kim

3. Date

28-April-2020

4. Are you the corresponding author?

☐ Yes

☒ No

Corresponding Author's Name

Joo Hun Park

5. Manuscript Title

Blood lead levels in relation to smoking and COPD: A study from Korean National Health and Nutrition Examination Survey (KNHANES).

6. Manuscript Identifying Number (if you know it)

JTD-20-739-R2.

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1. Given Name (First Name)
Eun Mi

2. Surname (Last Name)
Chun

3. Date
29-April-2020

4. Are you the corresponding author?

☐ Yes ☒ No

Corresponding Author's Name
Joo Hun Park

5. Manuscript Title
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Dr. Chun has nothing to disclose.

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Section 1. Identifying Information

1. Given Name (First Name) Young Sik	2. Surname (Last Name) Park	3. Date 28-April-2020
4. Are you the corresponding author? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Corresponding Author's Name Joo Hun Park
5. Manuscript Title Blood lead levels in relation to smoking and COPD: A study from Korean National Health and Nutrition Examination Survey (KNHANES).		
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1. Given Name (First Name) Kwang Ha	2. Surname (Last Name) Yoo	3. Date 28-April-2020
4. Are you the corresponding author? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Corresponding Author's Name Joo Hun Park
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Hyoung Kyu

2. Surname (Last Name)
Yoon

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28-April-2020

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Report all sources of revenue paid (or promised to be paid) directly to you or your institution on your behalf over the 36 months prior to submission of the work. This should include all monies from sources with relevance to the submitted work, not just monies from the entity that sponsored the research. Please note that your interactions with the work's sponsor that are outside the submitted work should also be listed here. If there is any question, it is usually better to disclose a relationship than not to do so.

For grants you have received for work outside the submitted work, you should disclose support ONLY from entities that could be perceived to be affected financially by the published work, such as drug companies, or foundations supported by entities that could be perceived to have a financial stake in the outcome. Public funding sources, such as government agencies, charitable foundations or academic institutions, need not be disclosed. For example, if a government agency sponsored a study in which you have been involved and drugs were provided by a pharmaceutical company, you need only list the pharmaceutical company.

4. Intellectual Property.

This section asks about patents and copyrights, whether pending, issued, licensed and/or receiving royalties.

5. Relationships not covered above.

Use this section to report other relationships or activities that readers could perceive to have influenced, or that give the appearance of potentially influencing, what you wrote in the submitted work.

Definitions.

Entity: government agency, foundation, commercial sponsor, academic institution, etc.

Grant: A grant from an entity, generally [but not always] paid to your organization

Personal Fees: Monies paid to you for services rendered, generally honoraria, royalties, or fees for consulting, lectures, speakers bureaus, expert testimony, employment, or other affiliations

Non-Financial Support: Examples include drugs/equipment supplied by the entity, travel paid by the entity, writing assistance, administrative support, etc.

Other: Anything not covered under the previous three boxes

Pending: The patent has been filed but not issued

Issued: The patent has been issued by the agency

Licensed: The patent has been licensed to an entity, whether earning royalties or not

Royalties: Funds are coming in to you or your institution due to your patent

ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)

Joo Hun

2. Surname (Last Name)

Park

3. Date

28-April-2020

4. Are you the corresponding author?

☒ Yes ☐ No

5. Manuscript Title

Blood lead levels in relation to smoking and COPD: A study from Korean National Health and Nutrition Examination Survey (KNHANES).

6. Manuscript Identifying Number (if you know it)

JTD-20-739-R2.

Section 2. The Work Under Consideration for Publication

Did you or your institution **at any time** receive payment or services from a third party (government, commercial, private foundation, etc.) for any aspect of the submitted work (including but not limited to grants, data monitoring board, study design, manuscript preparation, statistical analysis, etc.)?

Are there any relevant conflicts of interest? ☐ Yes ☒ No

Section 3. Relevant financial activities outside the submitted work.

Place a check in the appropriate boxes in the table to indicate whether you have financial relationships (regardless of amount of compensation) with entities as described in the instructions. Use one line for each entity; add as many lines as you need by clicking the "Add +" box. You should report relationships that were **present during the 36 months prior to publication**.

Are there any relevant conflicts of interest? ☐ Yes ☒ No

Section 4. Intellectual Property -- Patents & Copyrights

Do you have any patents, whether planned, pending or issued, broadly relevant to the work? ☐ Yes ☒ No

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Section 5. Relationships not covered above

Are there other relationships or activities that readers could perceive to have influenced, or that give the appearance of potentially influencing, what you wrote in the submitted work?

- ☐ Yes, the following relationships/conditions/circumstances are present (explain below):
- ☒ No other relationships/conditions/circumstances that present a potential conflict of interest

At the time of manuscript acceptance, journals will ask authors to confirm and, if necessary, update their disclosure statements. On occasion, journals may ask authors to disclose further information about reported relationships.

Section 6. Disclosure Statement

Based on the above disclosures, this form will automatically generate a disclosure statement, which will appear in the box below.

I have nothing to declare.

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Please visit <http://www.icmje.org/cgi-bin/feedback> to provide feedback on your experience with completing this form.