

ICMJE Form for Disclosure of Potential Conflicts of Interest

Instructions

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

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name) Seung Won	2. Surname (Last Name) Ra	3. Date 15-September-2020
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Kwang Ha Yoo
5. Manuscript Title The safety and efficacy of CKD-497 in patients with acute upper respiratory tract infection and bronchitis symptoms: a multicenter, double-blind, double-dummy, randomized, controlled, phase II clinical trial		
6. Manuscript Identifying Number (if you know it) JTD-20-1567-R1		

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Dr. Ra has nothing to disclose.

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1. Given Name (First Name)
Sun Young

2. Surname (Last Name)
Kim

3. Date
07-September-2020

4. Are you the corresponding author? Yes No
Corresponding Author's Name
Kwang Ha Yoo

5. Manuscript Title
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Yun Young

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Lim

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Corresponding Author's Name
Kwang Ha Yoo

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Corresponding Author's Name Kwang Ha Yoo

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Chin Kook

2. Surname (Last Name)
Rhee

3. Date
15-September-2020

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Yes No

Corresponding Author's Name
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Dr. Rhee has nothing to disclose.

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)
Deog Kyeom

2. Surname (Last Name)
Kim

3. Date
15-September-2020

4. Are you the corresponding author?

Yes No

Corresponding Author's Name
Kwang Ha Yoo

5. Manuscript Title

The safety and efficacy of CKD-497 in patients with acute upper respiratory tract infection and bronchitis symptoms: a multicenter, double-blind, double-dummy, randomized, controlled, phase II clinical trial

6. Manuscript Identifying Number (if you know it)

JTD-20-1567-R1

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Yong Bum

2. Surname (Last Name)
Park

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18-September-2020

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Corresponding Author's Name
Kwang Ha Yoo

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) Chang Youl	2. Surname (Last Name) Lee	3. Date 18-September-2020
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Kwang Ha Yoo
5. Manuscript Title The safety and efficacy of CKD-497 in patients with acute upper respiratory tract infection and bronchitis symptoms: a multicenter, double-blind, double-dummy, randomized, controlled, phase II clinical trial		
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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name) Hyoung Kyu	2. Surname (Last Name) Yoon	3. Date 18-September-2020
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Kwang Ha Yoo
5. Manuscript Title The safety and efficacy of CKD-497 in patients with acute upper respiratory tract infection and bronchitis symptoms: a multicenter, double-blind, double-dummy, randomized, controlled, phase II clinical trial		
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Dr. Yoon has nothing to disclose.

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Jeong-Woong

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18-September-2020

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JTD-20-1567-R1

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.)?

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ICMJE Form for Disclosure of Potential Conflicts of Interest

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Dr. Yoo has nothing to disclose.

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