Date:Nov. 9, 2021	
Your Name:Liping Chen	
Manuscript Title: Co-infecting path	ogens can contribute to inflammatory responses and severe symptoms in
COVID-19	
Manuscript number (if known):	_JTD-21-1284-CL

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 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.

In item #1 below, report all support for the work reported in this manuscript without time limit. For all other items, the time frame for disclosure is the past 36 months.

		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.	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	XNone	
4	Consulting fees	XNone	

		1	
5	Payment or honoraria for	XNone	
	lectures, presentations,		
	speakers bureaus,		
	manuscript writing or		
	educational events		
6	Payment for expert	XNone	
	testimony		
7	Support for attending meetings and/or travel	XNone	
	G ,		
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	
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.			

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

__X_ I certify that I have answered every question and have not altered the wording of any of the questions on this form.

Date:Dec. 29, 2021	
Your Name: Lihan Shen	
Manuscript Title: Co-infecting path	nogens can contribute to inflammatory responses and severe symptoms in
COVID-19	
Manuscript number (if known):	_ JTD-21-1284-CL

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

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5	Payment or honoraria for	XNone	
	lectures, presentations,		
	speakers bureaus,		
	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	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	X None	
	22222		
12	Possint of aguinment	V None	
12	Receipt of equipment, materials, drugs, medical	X_None	
	writing, gifts or other		
	services		
	SEI VICES		
13	Other financial or non-	XNone	
	financial interests		

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:

__X_ I certify that I have answered every question and have not altered the wording of any of the questions on this form.

Date:Dec. 28, 2021	
Your Name: Weichen Wu	
Manuscript Title: Co-infecting pat	hogens can contribute to inflammatory responses and severe symptoms in
COVID-19	
Manuscript number (if known):	_ JTD-21-1284-CL

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3	Royalties or licenses	XNone	
4	Consulting fees	XNone	

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5	Payment or honoraria for	XNone	
	lectures, presentations,		
	speakers bureaus,		
	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	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	X None	
	22222		
12	Possint of aguinment	V None	
12	Receipt of equipment, materials, drugs, medical	X_None	
	writing, gifts or other		
	services		
	SEI VICES		
13	Other financial or non-	XNone	
	financial interests		

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None.			

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Date:Dec. 29, 2021	
Your Name: Wenda Guan	
Manuscript Title: Co-infecting patl	nogens can contribute to inflammatory responses and severe symptoms in
COVID-19	
Manuscript number (if known):	_ JTD-21-1284-CL

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3	Royalties or licenses	XNone	
4	Consulting fees	XNone	

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5	Payment or honoraria for	XNone	
	lectures, presentations,		
	speakers bureaus,		
	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	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	X None	
	22222		
12	Possint of aguinment	V None	
12	Receipt of equipment, materials, drugs, medical	X_None	
	writing, gifts or other		
	services		
	SEI VICES		
13	Other financial or non-	XNone	
	financial interests		

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:

__X_ I certify that I have answered every question and have not altered the wording of any of the questions on this form.

	Date:Dec. 29, 2021				
Your Name: Jinchao Zhou Manuscript Title: Co-infecting pathogens can contribute to inflammatory responses and severe symptoms in					
	VID-19	ting pathogens can continu	rate to initialimatory responses and severe symptoms in		
	nuscript number (if known)	: JTD-21-1284-CL_			
relator	ated to the content of your ries whose interests may be transparency and does not ationship/activity/interest,	manuscript. "Related" mea e affected by the content on necessarily indicate a bias. it is preferable that you do	relationships/activities/interests listed below that are ans any relation with for-profit or not-for-profit third of the manuscript. Disclosure represents a commitment If you are in doubt about whether to list a so. ps/activities/interests as they relate to the current		
to me	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. In item #1 below, report all support for the work reported in this manuscript without time limit. For all other items, the time frame for disclosure is the past 36 months.				
		Name all entities with whom you have this relationship or indicate none (add rows as	Specifications/Comments (e.g., if payments were made to you or to your institution)		
		needed) Time frame: Since the initial	planning of the work		
			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.	_X_None			
		Time frame: past	36 months		
2	Grants or contracts from any entity (if not indicated in item #1 above).	X_None			
3	Royalties or licenses	XNone			
4	Consulting fees	XNone			

5	Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or educational events	XNone		
6	Payment for expert testimony	XNone		
7	Support for attending meetings and/or travel	XNone		
8	Patents planned, issued or pending	XNone		
9	Participation on a Data Safety Monitoring Board or Advisory Board	XNone		
10	Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid	XNone		
11	Stock or stock options	XNone		
12	Receipt of equipment, materials, drugs, medical writing, gifts or other services	X_None		
13	Other financial or non- financial interests	XNone		
	ease summarize the above co			
Ple	Please place an "X" next to the following statement to indicate your agreement:			

	e:Dec. 29, 2021				
Your Name: Gengyan Luo					
CO	VID-19		oute to inflammatory responses and severe symptoms in		
Ma	nuscript number (if known)	: JTD-21-1284-CL_			
related to to the related The man The to the me	ated to the content of your ties whose interests may be cransparency and does not extionship/activity/interest, a following questions apply nuscript only. The author's relationships/activity endication, even if that medication, even if that medication.	manuscript. "Related" means affected by the content of the content of the cessarily indicate a bias. It is preferable that you do not to the author's relationship in the cession, you should declare that it is not mentioned in the poort for the work reporter.	ps/activities/interests as they relate to the <u>current</u> <u>defined broadly</u> . For example, if your manuscript pertains all relationships with manufacturers of antihypertensive		
		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		
	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			
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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, speakers bureaus, manuscript writing or educational events	XNone		
6	Payment for expert testimony	XNone		
7	Support for attending meetings and/or travel	XNone		
8	Patents planned, issued or pending	XNone		
9	Participation on a Data Safety Monitoring Board or Advisory Board	XNone		
10	Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid	XNone		
11	Stock or stock options	XNone		
12	Receipt of equipment, materials, drugs, medical writing, gifts or other services	X_None		
13	Other financial or non- financial interests	XNone		
	ease summarize the above co			
Ple	Please place an "X" next to the following statement to indicate your agreement:			

Da	te:Dec. 28, 2021		
Yo	ur Name: Qimin Chen	_	
	nuscript Title: Co-infec VID-19	ting pathogens can contrib	oute to inflammatory responses and severe symptoms in
Ma	nuscript number (if known)	: JTD-21-1284-CL_	
relipantor relimator relim	ated to the content of your rties whose interests may be transparency and does not ationship/activity/interest, e following questions apply muscript only. e author's relationships/act the epidemiology of hypertedication, even if that medication.	manuscript. "Related" mede affected by the content of necessarily indicate a bias. It is preferable that you do to the author's relationship ivities/interests should be ension, you should declare eation is not mentioned in the poort for the work reported.	ps/activities/interests as they relate to the <u>current</u> <u>defined broadly</u> . For example, if your manuscript pertains all relationships with manufacturers of antihypertensive
		Name all entities with	Specifications/Comments
		whom you have this relationship or indicate none (add rows as needed)	(e.g., if payments were made to you or to your institution)
		Time frame: Since the initia	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	
1	Consulting fees	X None	

5	Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or educational events	XNone		
6	Payment for expert testimony	XNone		
7	Support for attending meetings and/or travel	XNone		
8	Patents planned, issued or pending	XNone		
9	Participation on a Data Safety Monitoring Board or Advisory Board	XNone		
10	Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid	XNone		
11	Stock or stock options	XNone		
12	Receipt of equipment, materials, drugs, medical writing, gifts or other services	X_None		
13	Other financial or non- financial interests	XNone		
	ease summarize the above co			
Ple	Please place an "X" next to the following statement to indicate your agreement:			

	te:Dec. 29, 2021 ur Name: Hongxia Zhou _			
Ma			oute to inflammatory responses and severe symptoms in	
	nuscript number (if known)	: JTD-21-1284-CL_		
related to the related The	ated to the content of your ries whose interests may be transparency and does not ationship/activity/interest,	manuscript. "Related" mea e affected by the content o necessarily indicate a bias. it is preferable that you do	relationships/activities/interests listed below that are ans any relation with for-profit or not-for-profit third of the manuscript. Disclosure represents a commitment If you are in doubt about whether to list a so. ps/activities/interests as they relate to the current	
to to	the epidemiology of hypertodication, even if that medic	ension, you should declare ation is not mentioned in t pport for the work reporte	defined broadly. For example, if your manuscript pertains all relationships with manufacturers of antihypertensive the manuscript. d in this manuscript without time limit. For all other items	
		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	
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2	Grants or contracts from any entity (if not indicated in item #1 above).	XNone		
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6	Payment for expert testimony	XNone		
7	Support for attending meetings and/or travel	XNone		
8	Patents planned, issued or pending	XNone		
9	Participation on a Data Safety Monitoring Board or Advisory Board	XNone		
10	Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid	XNone		
11	Stock or stock options	XNone		
12	Receipt of equipment, materials, drugs, medical writing, gifts or other services	X_None		
13	Other financial or non- financial interests	XNone		
	ease summarize the above co			
Ple	Please place an "X" next to the following statement to indicate your agreement:			

	te:Dec. 29, 2021				
Your Name: Zhenxuan Deng					
	nuscript Title: Co-infec VID-19	ting pathogens can contrib	oute to inflammatory responses and severe symptoms in		
Ma	nuscript number (if known)	: JTD-21-1284-CL_			
related to	ated to the content of your ties whose interests may be transparency and does not extionship/activity/interest, ationship/activity/interest, ationship questions apply nuscript only. The author's relationships/activity author's relationships activity and the epidemiology of hypertedication, even if that medication,	manuscript. "Related" means affected by the content of the content of the cessarily indicate a bias. It is preferable that you do not to the author's relationship in the cession, you should declare that it is not mentioned in the poort for the work reporter.	ps/activities/interests as they relate to the <u>current</u> <u>defined broadly</u> . For example, if your manuscript pertains all relationships with manufacturers of antihypertensive		
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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, speakers bureaus, manuscript writing or educational events	XNone		
6	Payment for expert testimony	XNone		
7	Support for attending meetings and/or travel	XNone		
8	Patents planned, issued or pending	XNone		
9	Participation on a Data Safety Monitoring Board or Advisory Board	XNone		
10	Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid	XNone		
11	Stock or stock options	XNone		
12	Receipt of equipment, materials, drugs, medical writing, gifts or other services	X_None		
13	Other financial or non- financial interests	XNone		
	ease summarize the above co			
Ple	Please place an "X" next to the following statement to indicate your agreement:			

	Date:Dec. 29, 2021					
	Your Name: Yaoqing Chen					
Manuscript Title: Co-infecting pathogens can contribute to inflammatory responses and severe symptoms in COVID-19						
	nuscript number (if known)	: JTD-21-1284-CL_				
In to	the interest of transparency ated to the content of your rties whose interests may be transparency and does not a ationship/activity/interest,	, we ask you to disclose all manuscript. "Related" mea e affected by the content o necessarily indicate a bias. it is preferable that you do	relationships/activities/interests listed below that are ans any relation with for-profit or not-for-profit third of the manuscript. Disclosure represents a commitment If you are in doubt about whether to list a			
to me	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. In item #1 below, report all support for the work reported in this manuscript without time limit. For all other items, the time frame for disclosure is the past 36 months.					
		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			
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.	_X_None				
		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, speakers bureaus, manuscript writing or educational events	XNone		
6	Payment for expert testimony	XNone		
7	Support for attending meetings and/or travel	XNone		
8	Patents planned, issued or pending	XNone		
9	Participation on a Data Safety Monitoring Board or Advisory Board	XNone		
10	Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid	XNone		
11	Stock or stock options	XNone		
12	Receipt of equipment, materials, drugs, medical writing, gifts or other services	X_None		
13	Other financial or non- financial interests	XNone		
	ease summarize the above co			
Ple	Please place an "X" next to the following statement to indicate your agreement:			

	te:Dec. 29, 2021				
Your Name: Wenjing Zhao Manuscript Title: Co-infecting pathogens can contribute to inflammatory responses and severe symptoms in					
	VID-19	6	,		
Ma	nuscript number (if known)	: JTD-21-1284-CL_			
related to the relate	ated to the content of your ties whose interests may be transparency and does not entionship/activity/interest, of following questions apply nuscript only.	manuscript. "Related" mean e affected by the content on ecessarily indicate a bias. it is preferable that you do to the author's relationship ivities/interests should be	relationships/activities/interests listed below that are ans any relation with for-profit or not-for-profit third of the manuscript. Disclosure represents a commitment of the manuscript about whether to list a so. ps/activities/interests as they relate to the current defined broadly. For example, if your manuscript pertains all relationships with manufacturers of antihypertensive		
In i	dication, even if that medic tem #1 below, report all sup time frame for disclosure is	pport for the work reporte	the manuscript. d in this manuscript without time limit. For all other items	s,	
		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)		
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11	Stock or stock options	XNone		
12	Receipt of equipment, materials, drugs, medical writing, gifts or other services	X_None		
13	Other financial or non- financial interests	XNone		
	ease summarize the above co			
Ple	Please place an "X" next to the following statement to indicate your agreement:			

Da	Date:Dec. 29, 2021					
	Your Name: Wenxiang Jin					
Manuscript Title: Co-infecting pathogens can contribute to inflammatory responses and severe symptoms in COVID-19						
Ma	inuscript number (if known)	: JTD-21-1284-CL_				
related to the relate	ated to the content of your ries whose interests may be transparency and does not ationship/activity/interest,	manuscript. "Related" mea e affected by the content o necessarily indicate a bias. it is preferable that you do	relationships/activities/interests listed below that are ans any relation with for-profit or not-for-profit third of the manuscript. Disclosure represents a commitment If you are in doubt about whether to list a so. ps/activities/interests as they relate to the current			
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9	Participation on a Data Safety Monitoring Board or Advisory Board	XNone		
10	Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid	XNone		
11	Stock or stock options	XNone		
12	Receipt of equipment, materials, drugs, medical writing, gifts or other services	X_None		
13	Other financial or non- financial interests	XNone		
	ease summarize the above co			
Ple	Please place an "X" next to the following statement to indicate your agreement:			

	te:Dec. 19, 2021 ur Name: Minshan Qiu _						
Ma	Manuscript Title: Co-infecting pathogens can contribute to inflammatory responses and severe symptoms in COVID-19						
	Manuscript number (if known): JTD-21-1284-CL						
relator	ated to the content of your ries whose interests may be transparency and does not ationship/activity/interest,	manuscript. "Related" mea e affected by the content o necessarily indicate a bias. it is preferable that you do	relationships/activities/interests listed below that are ans any relation with for-profit or not-for-profit third of the manuscript. Disclosure represents a commitment of the manuscript of the manuscript of the manuscript. Disclosure represents a commitment of the manuscript of the manuscript of the manuscript. Disclosure represents a commitment of the manuscript of the				
to me	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. In item #1 below, report all support for the work reported in this manuscript without time limit. For all other items, the time frame for disclosure is the past 36 months.						
		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.	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	XNone					
4	Consulting fees	XNone					

5	Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or educational events	XNone		
6	Payment for expert testimony	XNone		
7	Support for attending meetings and/or travel	XNone		
8	Patents planned, issued or pending	XNone		
9	Participation on a Data Safety Monitoring Board or Advisory Board	XNone		
10	Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid	XNone		
11	Stock or stock options	XNone		
12	Receipt of equipment, materials, drugs, medical writing, gifts or other services	X_None		
13	Other financial or non- financial interests	XNone		
	ease summarize the above co			
Ple	Please place an "X" next to the following statement to indicate your agreement:			

	te:Dec. 29, 2021 ur Name: Qianwei Zheng	7	
Ma		- 	oute to inflammatory responses and severe symptoms in
	ים-נים: nuscript number (if known))· ITD_21_128/I_CI	
IVIA	muscript number (ii known)	J J1D-21-1204-CL_	
related to the main mean related to the main mean related to the m	ated to the content of your ries whose interests may be transparency and does not reationship/activity/interest, of following questions apply nuscript only. The author's relationships/activity epidemiology of hypertedication, even if that medicalized the epidemiology of the transparency of the epidemiology of hypertedication, even if that medicalized the epidemiology of the transparency of the epidemiology of the epidemio	manuscript. "Related" means affected by the content of the author's relationship ivities/interests should be the content of th	ps/activities/interests as they relate to the <u>current</u> <u>defined broadly</u> . For example, if your manuscript pertains all relationships with manufacturers of antihypertensive
	tem #1 below, report all su time frame for disclosure i	•	d in this manuscript without time limit. For all other items
		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.	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	XNone	
4	Consulting fees	XNone	

5	Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or educational events	XNone		
6	Payment for expert testimony	XNone		
7	Support for attending meetings and/or travel	XNone		
8	Patents planned, issued or pending	XNone		
9	Participation on a Data Safety Monitoring Board or Advisory Board	XNone		
10	Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid	XNone		
11	Stock or stock options	XNone		
12	Receipt of equipment, materials, drugs, medical writing, gifts or other services	X_None		
13	Other financial or non- financial interests	XNone		
	ease summarize the above co			
Ple	Please place an "X" next to the following statement to indicate your agreement:			

	Date:Dec. 29, 2021 Your Name: Yutao Wang				
Ma		=	oute to inflammatory responses and severe symptoms in		
	nuscript number (if known)): JTD-21-1284-CL_			
In the relationship in the	the interest of transparency ated to the content of your rties whose interests may be transparency and does not reationship/activity/interest, ationship questions apply muscript only.	r, we ask you to disclose all manuscript. "Related" mea e affected by the content onecessarily indicate a bias. it is preferable that you do to the author's relationshi	relationships/activities/interests listed below that are ans any relation with for-profit or not-for-profit third of the manuscript. Disclosure represents a commitment of the manuscript of the manuscript. Disclosure represents a commitment of the manuscript of the manuscript of the manuscript of the manuscript. Disclosure represents a commitment of the manuscript of the		
to to	the epidemiology of hypertedication, even if that medic	ension, you should declare ation is not mentioned in t pport for the work reporte	defined broadly. For example, if your manuscript pertains all relationships with manufacturers of antihypertensive the manuscript. d in this manuscript without time limit. For all other items		
		Name all entities with	Specifications/Comments		
		whom you have this relationship or indicate none (add rows as needed)	(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.	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	XNone			
4	Consulting fees	XNone			

5	Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or educational events	XNone		
6	Payment for expert testimony	XNone		
7	Support for attending meetings and/or travel	XNone		
8	Patents planned, issued or pending	XNone		
9	Participation on a Data Safety Monitoring Board or Advisory Board	XNone		
10	Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid	XNone		
11	Stock or stock options	XNone		
12	Receipt of equipment, materials, drugs, medical writing, gifts or other services	X_None		
13	Other financial or non- financial interests	XNone		
	ease summarize the above co			
Ple	Please place an "X" next to the following statement to indicate your agreement:			

Date:Dec 29 th , 2021	
Your Name: Chen Liu	
Manuscript Title: Co-infecting pathogens can contribute to inflammatory responses and severe symptom	ns in
COVID-19	
Manuscript number (if known): JTD-21-1284	

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.

In item #1 below, report all support for the work reported in this manuscript without time limit. For all other items, the time frame for disclosure is the past 36 months.

		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.	Chen Liu was employed by the medical company Novogene Bioinformatics Technology Co., Ltd.	Support library sequencing
		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		
	Payment for expert	X None	
	testimony		
	,		
	Support for attending meetings and/or travel	XNone	
	Patents planned, issued or	XNone	
	pending		
	Participation on a Data	XNone	
	Safety Monitoring Board or Advisory Board		
	Leadership or fiduciary role	X None	
	in other board, society,		
	committee or advocacy		
	group, paid or unpaid		
11	Stock or stock options	XNone	
	Receipt of equipment,	XNone	
	materials, drugs, medical writing, gifts or other		
	services		
_	Other financial or non-	XNone	
	financial interests		

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

Chen Liu was employed by the medical company Novogene Bioinformatics Technology Co., Ltd. and responsible for completing the library sequencing.

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

__X_ I certify that I have answered every question and have not altered the wording of any of the questions on this form.

Date:Dec 28 th , 2021	
Your Name: Xiangxiang Bai	
Manuscript Title: Co-infecting pathogens can contribute to inflammatory responses and severe sympto	ms in
COVID-19	
Manuscript number (if known): JTD-21-1284	

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.

In item #1 below, report all support for the work reported in this manuscript without time limit. For all other items, the time frame for disclosure is the past 36 months.

		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.	Xiangxiang Bai was employed by the medical company Novogene Bioinformatics Technology Co., Ltd.	Support library sequencing
		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	

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5	Payment or honoraria for	XNone	
	lectures, presentations,		
	speakers bureaus, manuscript writing or		
	educational events		
6	Payment for expert	X None	
0	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		
	Advisory Board		
10	Leadership or fiduciary role in other board, society,	XNone	
	committee or advocacy group, paid or unpaid		
11	Stock or stock options	XNone	
12	Receipt of equipment,	XNone	
	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:

Xiangxiang Bai was employed by the medical company Novogene Bioinformatics Technology Co., Ltd. and responsible for completing the library sequencing.

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

__X_ I certify that I have answered every question and have not altered the wording of any of the questions on this form.

Dat	Date:Dec. 29, 2021					
You	Your Name: Deyin Guo					
	Manuscript Title: Co-infecting pathogens can contribute to inflammatory responses and severe symptoms in COVID-19					
Ma	nuscript number (if known)	: JTD-21-1284-CL_				
related to the relate	ated to the content of your ries whose interests may be transparency and does not ationship/activity/interest, e following questions apply nuscript only.	manuscript. "Related" mean e affected by the content on necessarily indicate a bias. it is preferable that you do to the author's relationshi	relationships/activities/interests listed below that are ans any relation with for-profit or not-for-profit third of the manuscript. Disclosure represents a commitment If you are in doubt about whether to list a so. ps/activities/interests as they relate to the current defined broadly. For example, if your manuscript pertains			
to		ension, you should declare	all relationships with manufacturers of antihypertensive			
	tem #1 below, report all sup time frame for disclosure is	•	d in this manuscript without time limit. For all other items,			
		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.	XNone				
		Time frame: past	36 months			
2	Grants or contracts from any entity (if not indicated in item #1 above).	XNone				
2						
	Royalties or licenses	l X None				
3	Royalties or licenses	XNone				

5	Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or educational events	XNone		
6	Payment for expert testimony	XNone		
7	Support for attending meetings and/or travel	XNone		
8	Patents planned, issued or pending	XNone		
9	Participation on a Data Safety Monitoring Board or Advisory Board	XNone		
10	Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid	XNone		
11	Stock or stock options	XNone		
12	Receipt of equipment, materials, drugs, medical writing, gifts or other services	X_None		
13	Other financial or non- financial interests	XNone		
	ease summarize the above co			
Ple	Please place an "X" next to the following statement to indicate your agreement:			

	Date:Dec. 29, 2021				
	Your Name: Edward C. Holmes				
	Manuscript Title: Co-infecting pathogens can contribute to inflammatory responses and severe symptoms in COVID-19				
Ma	inuscript number (if known)	: JTD-21-1284-CL_			
relator	ated to the content of your ries whose interests may be transparency and does not ationship/activity/interest,	manuscript. "Related" mea e affected by the content on necessarily indicate a bias. it is preferable that you do	relationships/activities/interests listed below that are ans any relation with for-profit or not-for-profit third of the manuscript. Disclosure represents a commitment If you are in doubt about whether to list a so. ps/activities/interests as they relate to the current		
to me	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. In item #1 below, report all support for the work reported in this manuscript without time limit. For all other items, the time frame for disclosure is the past 36 months.				
		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	X None	planning of the work		
	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 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, speakers bureaus, manuscript writing or educational events	XNone		
6	Payment for expert testimony	XNone		
7	Support for attending meetings and/or travel	XNone		
8	Patents planned, issued or pending	XNone		
9	Participation on a Data Safety Monitoring Board or Advisory Board	XNone		
10	Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid	XNone		
11	Stock or stock options	XNone		
12	Receipt of equipment, materials, drugs, medical writing, gifts or other services	X_None		
13	Other financial or non- financial interests	XNone		
	ease summarize the above co			
Ple	Please place an "X" next to the following statement to indicate your agreement:			

	Date:Dec. 29, 2021				
Your Name: Nanshan Zhong Manuscript Title: Co.infecting nathogens can contribute to inflammatory responses and severe symptoms in					
	Manuscript Title: Co-infecting pathogens can contribute to inflammatory responses and severe symptoms in COVID-19				
	nuscript number (if known)	: JTD-21-1284-CL_			
related to the relate	ated to the content of your ries whose interests may be transparency and does not ationship/activity/interest,	manuscript. "Related" mea e affected by the content on necessarily indicate a bias. it is preferable that you do	relationships/activities/interests listed below that are ans any relation with for-profit or not-for-profit third of the manuscript. Disclosure represents a commitment If you are in doubt about whether to list a so. ps/activities/interests as they relate to the current		
to i	the epidemiology of hyperted ication, even if that medic	ension, you should declare ation is not mentioned in t pport for the work reporte	defined broadly. For example, if your manuscript pertains all relationships with manufacturers of antihypertensive the manuscript. d in this manuscript without time limit. For all other items		
		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.	_X_None			
		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 lectures, presentations, speakers bureaus, manuscript writing or educational events	XNone	
6	Payment for expert testimony	XNone	
7	Support for attending meetings and/or travel	XNone	
8	Patents planned, issued or pending	XNone	
9	Participation on a Data Safety Monitoring Board or Advisory Board	XNone	
10	Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid	XNone	
11	Stock or stock options	XNone	
12	Receipt of equipment, materials, drugs, medical writing, gifts or other services	X_None	
13	Other financial or non- financial interests	XNone	
	vase summarize the above co		
Please place an "X" next to the following statement to indicate your agreement:			

	te:Dec. 29, 2021		
	ur Name: Mang Shi		
CO	VID-19		oute to inflammatory responses and severe symptoms in
Ma	nuscript number (if known)	: JTD-21-1284-CL_	
related to the mass of the mas	ated to the content of your rties whose interests may be transparency and does not entionship/activity/interest, ationship/activity/interest, ationship questions apply nuscript only. The author's relationships/activity author's relationships activity author, even if that medicalized the epidemiology of hypertodication, even if that medicalized the epidemiology of the transparence of transparence of the transparence of transpa	manuscript. "Related" means affected by the content of the author's relationship in the content of the content	ps/activities/interests as they relate to the <u>current</u> <u>defined broadly</u> . For example, if your manuscript pertains all relationships with manufacturers of antihypertensive
		Name all entities with	Specifications/Comments
		whom you have this relationship or indicate none (add rows as needed)	(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.	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	XNone	
		_	
4	Consulting fees	X None	

5	Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or educational events	XNone		
6	Payment for expert testimony	XNone		
7	Support for attending meetings and/or travel	XNone		
8	Patents planned, issued or pending	XNone		
9	Participation on a Data Safety Monitoring Board or Advisory Board	XNone		
10	Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid	XNone		
11	Stock or stock options	XNone		
12	Receipt of equipment, materials, drugs, medical writing, gifts or other services	X_None		
13	Other financial or non- financial interests	XNone		
	ease summarize the above co			
Ple	Please place an "X" next to the following statement to indicate your agreement:			

Da	te:Dec. 29, 2021				
Your Name: Zifeng Yang					
	Manuscript Title: Co-infecting pathogens can contribute to inflammatory responses and severe symptoms in				
	VID-19				
Ma	anuscript number (if known)): JTD-21-1284-CL_			
rel pa to rel Th ma Th to me	ated to the content of your rties whose interests may be transparency and does not ationship/activity/interest, e following questions apply anuscript only. e author's relationships/act the epidemiology of hypertedication, even if that medications	manuscript. "Related" means affected by the content of the author's relationship in the content of the content	ps/activities/interests as they relate to the <u>current</u> <u>defined broadly</u> . For example, if your manuscript pertainally all relationships with manufacturers of antihypertensives.	ins ⁄e	
		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	X None			
1	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	X None			
	any entity (if not indicated				
	in item #1 above).				
3	Dayalties or licenses	X None			
	Royalties or licenses	XNONE			
	Royalties of licenses				
4	Consulting fees	X None			

5	Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or educational events	XNone		
6	Payment for expert testimony	XNone		
7	Support for attending meetings and/or travel	XNone		
8	Patents planned, issued or pending	XNone		
9	Participation on a Data Safety Monitoring Board or Advisory Board	XNone		
10	Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid	XNone		
11	Stock or stock options	XNone		
12	Receipt of equipment, materials, drugs, medical writing, gifts or other services	X_None		
13	Other financial or non- financial interests	XNone		
	ease summarize the above co			
Ple	Please place an "X" next to the following statement to indicate your agreement:			