Date:			11/4/2021		
Υοι	ır Name:		Rentao Yu		
Manuscript Title:			Clinical Diagnostic Algorithm in Defining Tuberculous Unilateral Pleural Effusion in High Tuberculosis Burden Area Short of Diagnostic Tools		
Ma	nuscript Number (if kr	nown):	JTD-21-1532-CL		
content of your manuscript. "Rel affected by the content of the maindicate a bias. If you are in doub The author's relationships/activiti epidemiology of hypertension, yo that medication is not mentioned		pt. "Rela f the man in doubt s/activition ision, you intioned	ated" means any relation with for-profit or no nuscript. Disclosure represents a commitmer t about whether to list a relationship/activity/ es/interests should be defined broadly. For e u should declare all relationships with manufa in the manuscript.	interest, it is preferable that you do so.	
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			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	Concer	otion and design cript writing pproval of manuscript	Collection and assembly of data Data analysis and interpretation Click the tab key to add additional rows.	
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_			Time frame: past 36 mont	ns	
2	Grants or contracts from any entity (if not indicated in item #1 above).	⊠ No	one		
3	Royalties or licenses	× N	lone		

		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)
4	Consulting fees	None	
5	Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or educational events	None	
6	Payment for expert testimony	None	
7	Support for attending meetings and/or travel	None	
8	Patents planned, issued or pending	None ■	
9	Participation on a Data Safety Monitoring Board or Advisory Board	None	
10	Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid	None	

			e all entities with whom you have this conship or indicate none (add rows as needed)	Specifications/Comments (e.g., if payments were made to you or to your institution)
11	Stock or stock options		None	
12	Receipt of equipment, materials, drugs, medical writing, gifts or other services		None	
13	Other financial or non-financial interests		None	
Plea	se place an "X" next	to the	e following statement to indicate your agreemer	ıt:

Date:			11/4/2021		
You	ur Name:		Sheng Hu		
Manuscript Title:			Clinical Diagnostic Algorithm in Defining Tuberculous Unilateral Pleural Effusion in High Tuberculosis Burden Area Short of Diagnostic Tools		
Ma	nuscript Number (if kn	nown):	JTD-21-1532-CL		
In the interest of transparency, w content of your manuscript. "Rela affected by the content of the ma indicate a bias. If you are in doub The author's relationships/activiti		ot. "Rela f the mar in doubt s/activitie sion, you	e ask you to disclose all relationships/activities/interests listed below that are related to the ated" means any relation with for-profit or not-for-profit third parties whose interests may be inuscript. Disclosure represents a commitment to transparency and does not necessarily about whether to list a relationship/activity/interest, it is preferable that you do so. dies/interests should be defined broadly. For example, if your manuscript pertains to the real should declare all relationships with manufacturers of antihypertensive medication, even if a lin the manuscript.		
In item #1 below, report all suppor frame for disclosure is the past 36			rt for the work reported in this manuscript wi months.	thout time limit. For all other items, the time	
			Il entities with whom you have this ship 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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2	present manuscript (e.g., funding, provision of study materials, medical writing, article processing charges, etc.) No time limit for this item. Grants or contracts from	Provision	one on of study materials or patients cript writing Time frame: past 36 month	Collection and assembly of data Final approval of manuscript Click the tab key to add additional rows.	
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12	Receipt of equipment, materials, drugs, medical writing, gifts or other services		None	
13	Other financial or non-financial interests		None	
Plea	se place an "X" next	to the	e following statement to indicate your agreemer	ıt:

Dat	e:		11/4/2021	
You	ır Name:		Chao Wang	
Manuscript Title:			Clinical Diagnostic Algorithm in Defining Tub Tuberculosis Burden Area Short of Diagnostic	_
Ma	nuscript Number (if k	known):	JTD-21-1532-CL	
In the interest of transparency, we content of your manuscript. "Rela affected by the content of the ma indicate a bias. If you are in doub The author's relationships/activiti epidemiology of hypertension, yo that medication is not mentioned		ipt. "Rela of the man e in doubt os/activition nsion, you entioned	nuscript. Disclosure represents a commitment about whether to list a relationship/activity/interests should be defined broadly. For expushould declare all relationships with manufain the manuscript.	t-for-profit third parties whose interests may be to transparency and does not necessarily interest, it is preferable that you do so. Example, if your manuscript pertains to the cturers of antihypertensive medication, even if
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			Time frame: past 36 month	ns .
2	Grants or contracts from any entity (if not indicated in item #1 above).	⊠ No	ne	
3	Royalties or licenses	× N	one	

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11	Stock or stock options		None	
12	Receipt of equipment, materials, drugs, medical writing, gifts or other services		None	
13	Other financial or non-financial interests		None	
Plea	se place an "X" next	to the	e following statement to indicate your agreemen	ıt:

Dat	•		11/4/2021	
			11/4/2021	
ΥΟι	ır Name:		Hua Zhang	
Ma	nuscript Title:		Clinical Diagnostic Algorithm in Defining Tuber Tuberculosis Burden Area Short of Diagnostic	
Ма	nuscript Number (if k	(nown):	JTD-21-1532-CL	
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frai	ne for disclosure is th	e past 36	months.	
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1	All support for the present manuscript (e.g., funding, provision of study materials, medical writing, article processing	Admin Manus	istrative support cript writing pproval of manuscript	Click the tab key to add additional rows.
	charges, etc.) No time limit for this item.			
			Time frame: past 36 month	s
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11	Stock or stock options		None	
12	Receipt of equipment, materials, drugs, medical writing, gifts or other services		None	
13	Other financial or non-financial interests		None	
Plea	se place an "X" next	to the	e following statement to indicate your agreemen	ıt:

			1011112 21002000112 1 01		
Date:			11/4/2021		
Your Name:			Zhenliang Xiao		
Manuscript Title:			Clinical Diagnostic Algorithm in Defining Tuberculous Unilateral Pleural Effusion in High Tuberculosis Burden Area Short of Diagnostic Tools		
Mai	nuscript Number (if kno	own):	JTD-21-1532-CL		
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12	Receipt of equipment, materials, drugs, medical writing, gifts or other services		None	
13	Other financial or non-financial interests		None	
Please place an "X" next to the following statement to indicate your agreement:				

Dat	•		11/4/2021		
Date:			11/4/2021		
You	ır Name:		Lijie Ma		
Manuscript Title:			Clinical Diagnostic Algorithm in Defining Tuberculous Unilateral Pleural Effusion in High Tuberculosis Burden Area Short of Diagnostic Tools		
Ma	nuscript Number (if k	nown):	JTD-21-1532-CL		
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1	All support for the present manuscript (e.g., funding, provision of study materials, medical writing,	Concep Data a	otion and design nalysis and interpretation processing charges	Final approval of manuscript Click the tab key to add additional rows.	
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13	Other financial or non-financial interests		None		
Plea	Please place an "X" next to the following statement to indicate your agreement:				