Date: _ 11 Septe	ember 2023
Your Name:	DC Janse van Rensburg
Manuscript Title	Effects of no mask, a surgical mask and a fabric buff on peripheral oxygenation saturation during
moderate inten	sity exercise: a randomised cross-over study
Manuscript num	ber (if known): Manuscript ID: JTD-23-1178

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)	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	_xNone	
	manuscript (e.g., funding,		
	provision of study materials,		
	medical writing, article		
	processing charges, etc.) No time limit for this item.		
	No time limit for this item.		
		Time frame: past	36 months
2	Grants or contracts from	xNone	
	any entity (if not indicated		
	in item #1 above).		
3	Royalties or licenses	xNone	
4	Consulting fees	x_None	

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	
	-		
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,	xNone	
	materials, drugs, medical		
	writing, gifts or other		
	services		
13	Other financial or non-	xNone	
	financial interests		

None			

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



Date: _11/09/2023_	
Your Name:Aud	rey Jansen van Rensburg
Manuscript Title: Eff	ects of no mask, a surgical mask and a fabric buff on peripheral oxygenation saturation during
moderate intensity	exercise: a randomised cross-over study
Manuscript number	(if known): Manuscript ID: JTD-23-1178

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	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	

6	Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or educational events 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	x_None	
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	xNone	
13	Other financial or non- financial interests	xNone	

None			

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

Date: 12th September 2023 **Your Name:** Dr Tanita Botha

Manuscript Title: Effects of no mask, a surgical mask and a fabric buff on peripheral oxygenation saturation during

moderate intensity exercise: a randomised cross-over study Manuscript number (if known): Manuscript ID: JTD-23-1178

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		Time frame: Since the initial	planning of the work
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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	

6	lectures, presentations, speakers bureaus, manuscript writing or educational events 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	X_None	
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	XNone	
13	Other financial or non- financial interests	XNone	
Ple	ase summarize the above c	onflict of interest in the fol	lowing box:

None	

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

Date: _11/09/2023
Your Name: Kirsty Elliott
Manuscript Title: Effects of no mask, a surgical mask and a fabric buff on peripheral oxygenation saturation during
moderate intensity exercise: a randomised cross-over study
Manuscript number (if known): Manuscript ID: JTD-23-1178

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

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	
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,	xNone	
	materials, drugs, medical		
	writing, gifts or other		
	services		
13	Other financial or non-	xNone	
	financial interests		

None	

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

Date: _11/09/2023				
Your Name: Dima	katso Althea Ramagole			
Manuscript Title: Effe	cts of no mask, a surgical mask and a fabric buff on peripheral oxygenation saturation during			
moderate intensity e	cercise: a randomised cross-over study			
Manuscript number (f known): Manuscript ID: JTD-23-1178			

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

6	Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or educational events Payment for expert testimony	_xNone	
7	Support for attending meetings and/or travel	xNone	
8	Patents planned, issued or	xNone	
	pending		
9	Participation on a Data	x None	
	Safety Monitoring Board or		
	Advisory Board		
10	Leadership or fiduciary role	x None	
	in other board, society,		
	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		

None			

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

Date:11/9/2023	
Your Name:Lervasen Pilla	у
Manuscript Title: Effects of no	mask, a surgical mask and a fabric buff on peripheral oxygenation saturation during
moderate intensity exercise:	a randomised cross-over study
Manuscript number (if known	n): Manuscript ID: JTD-23-1178

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		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	x_None	
4	Consulting fees	xNone	
5		xNone	

6	Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or educational events Payment for expert	x None		
O	testimony	_xNone		
7	Support for attending meetings and/or travel	x_None		
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	x_None		
12	Receipt of equipment, materials, drugs, medical writing, gifts or other services	xNone		
13	Other financial or non- financial interests	_xNone		
Please summarize the above conflict of interest in the following box:				
x form		_	cate your agreement: re not altered the wording of any of the questions on th	

Date:	13 / 09 / 2023		
our N	lame:	Shona Hendricks	
Manus	script Title: Effects of	no mask, a surgical mask and a fabric buff on peri	pheral oxygenation saturation during
moder	rate intensity exercise	: a randomised cross-over study	
Manus	script number (if knov	vn): Manuscript ID: ITD-23-1178	

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		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	X_None	
5		XNone	

	Payment or honoraria for				
	lectures, presentations,				
	speakers bureaus,				
	manuscript writing or				
	educational events				
6	Payment for expert	XNone			
	testimony				
7	Support for attending meetings and/or travel	X_None			
8	Patents planned, issued or	XNone			
	pending				
9	Participation on a Data	X_None			
	Safety Monitoring Board or	X_NONE			
	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			
12	materials, drugs, medical				
	writing, gifts or other				
	services				
13	Other financial or non-	X_None			
	financial interests				
Plea	Please summarize the above conflict of interest in the following box:				
•					

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



Date: 13 September 2023 Your Name: __Devlin Eyden__

Manuscript Title: Effects of no mask, a surgical mask and a fabric buff on peripheral oxygenation saturation during moderate intensity exercise: a randomised cross-over study

Manuscript number (if known): Manuscript ID: JTD-23-1178

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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	_X_None			

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	lectures, presentations,				
	speakers bureaus,				
	manuscript writing or				
	educational events				
6		X None			
О	Payment for expert	XNone			
	testimony				
7	Support for attending	X None			
	meetings and/or travel				
	meetings and/or traver				
0	Detects plants discussion	V. None			
8	Patents planned, issued or	XNone			
	pending				
9	Participation on a Data	X None			
	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			
11	Stock of Stock options	NOTIC			
12	Receipt of equipment,	XNone			
	materials, drugs, medical				
	writing, gifts or other				
	services				
13	Other financial or non-	V None			
13		_XNone			
	financial interests				
DI	Please summarize the above conflict of interest in the following box:				
716	case summanze the above C	ominer of interest in the 10	nowing Dux.		

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



Date: _11/09/2023
Your Name: Claire Arnott
Manuscript Title: Effects of no mask, a surgical mask and a fabric buff on peripheral oxygenation saturation during
moderate intensity eversion a randomiced cross ever study

moderate intensity exercise: a randomised cross-over study Manuscript number (if known): Manuscript ID: JTD-23-1178

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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	x None	
	testimony		
7	Support for attending meetings and/or travel	xNone	
8	Patents planned, issued or	xNone	
	pending		
_	Pauticia sticu au a Data	Nava	
9	Participation on a Data Safety Monitoring Board or	xNone	
	Advisory Board		
10	Leadership or fiduciary role	x None	
	in other board, society,		
	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		

None

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

Claire Arnott

Date: 12 September 2023 Your Name: David Stevens

Manuscript Title: Effects of no mask, a surgical mask and a fabric buff on peripheral oxygenation saturation during

moderate intensity exercise: a randomised cross-over study Manuscript number (if known): Manuscript ID: JTD-23-1178

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4	Consulting fees	None	

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

No conflicts of interest pertaining to this manuscript.	

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