

ICMJE DISCLOSURE FORM

Date: 11 September 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 intensity exercise: a randomised cross-over study

Manuscript number (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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12	Receipt of equipment, materials, drugs, medical writing, gifts or other services	<input checked="" type="checkbox"/> None	
13	Other financial or non-financial interests	<input checked="" type="checkbox"/> None	

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:

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



ICMJE DISCLOSURE FORM

Date: 11/09/2023

Your Name: Audrey Jansen van Rensburg

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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ICMJE DISCLOSURE FORM

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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ICMJE DISCLOSURE FORM

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**

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ICMJE DISCLOSURE FORM

Date: 11/09/2023

Your Name: Dimakatso Althea Ramagole

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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ICMJE DISCLOSURE FORM

Date: 11/9/2023

Your Name: Lervasen Pillay

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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Lervasen Pillay

ICMJE DISCLOSURE FORM

Date: 13 / 09 / 2023

Your Name: Shona Hendricks

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**

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ICMJE DISCLOSURE FORM

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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ICMJE DISCLOSURE FORM

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 exercise: a randomised cross-over study**

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Claire Arnott

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ICMJE DISCLOSURE FORM

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](#)

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