Date:_2023-07-05

Your Name: Miaomiao Shen

Manuscript Title: <u>Risk factors for the occurrence of infection in patients with oral squamous cell carcinoma after</u> <u>restorative reconstruction and its impact on recurrence and quality of life: a retrospective cohort study</u> Manuscript number (if known):______

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

The author has no conflicts of interest to declare.

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

Date:_2023-07-05

Your Name: Weilan Shan

Manuscript Title: <u>Risk factors for the occurrence of infection in patients with oral squamous cell carcinoma after</u> <u>restorative reconstruction and its impact on recurrence and quality of life: a retrospective cohort study</u> Manuscript number (if known):______

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	lectures, presentations,	
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6	Payment for expert	X None
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	Safety Monitoring Board or	
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10	Leadership or fiduciary role	XNone
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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-	X None
12	financial interests	
	iniancial interests	

The author has no conflicts of interest to declare.

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

Date: 2023-07-05

Your Name:____Siyi Lv_

Manuscript Title: <u>Risk factors for the occurrence of infection in patients with oral squamous cell carcinoma after</u> <u>restorative reconstruction and its impact on recurrence and quality of life: a retrospective cohort study</u> Manuscript number (if known):______

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6	Payment for expert	X None	
	testimony		
7	Support for attending	XNone	
	meetings and/or travel		
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9	Participation on a Data	XNone	
	Safety Monitoring Board or		
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10	Leadership or fiduciary role	X None	
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11	Stock or stock options	X None	
12	Receipt of equipment,	X None	
14	materials, drugs, medical		
	writing, gifts or other		
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13	Other financial or non-	X None	
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	financial interests		

The author has no conflicts of interest to declare.

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

Date:_2023-07-05
Your Name:Kuan Cai
Manuscript Title: Risk factors for the occurrence of infection in patients with oral squamous cell carcinoma after
restorative reconstruction and its impact on recurrence and quality of life: a retrospective cohort study
Manuscript number (if known):

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	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	X None	
	in other board, society,		
	committee or advocacy		
	group, paid or unpaid		
11	Stock or stock options	X None	
12	Receipt of equipment,	X None	
14	materials, drugs, medical		
	writing, gifts or other		
	services		
13	Other financial or non-	X None	
13			
	financial interests		

The author has no conflicts of interest to declare.

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

Date: 2023-07-05

Your Name:____Xuan Chen__

Manuscript Title: <u>Risk factors for the occurrence of infection in patients with oral squamous cell carcinoma after</u> <u>restorative reconstruction and its impact on recurrence and quality of life: a retrospective cohort study</u> Manuscript number (if known):______

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	testimony		
7	Support for attending	XNone	
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8	Patents planned, issued or	XNone	
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9	Participation on a Data	XNone	
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	Advisory Board		
10	Leadership or fiduciary role	X None	
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14	materials, drugs, medical		
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The author has no conflicts of interest to declare.

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

Date:_2023-07-05
Your Name:Zhengyun Xu
Manuscript Title: Risk factors for the occurrence of infection in patients with oral squamous cell carcinoma after
restorative reconstruction and its impact on prognosis: a retrospective cohort study design
Manuscript number (if known):

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9	Participation on a Data	XNone
	Safety Monitoring Board or	
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13	Other financial or non-	XNone
	financial interests	

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

Date:_2023-07-05

Your Name: Mingjin Gao

Manuscript Title: <u>Risk factors for the occurrence of infection in patients with oral squamous cell carcinoma after</u> <u>restorative reconstruction and its impact on recurrence and quality of life: a retrospective cohort study</u> Manuscript number (if known):______

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	educational events	
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7	Support for attending	XNone
	meetings and/or travel	
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	Safety Monitoring Board or	
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13	Other financial or non-	X None
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Date:_2023-07-05

Your Name: Guodong Wang

Manuscript Title: <u>Risk factors for the occurrence of infection in patients with oral squamous cell carcinoma after</u> <u>restorative reconstruction and its impact on recurrence and quality of life: a retrospective cohort study</u> Manuscript number (if known):______

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