

ICMJE Form for Disclosure of Potential Conflicts of Interest

Instructions

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Section 1. Identifying Information

1. Given Name (First Name)

Cibo

2. Surname (Last Name)

Huang

3. Date

08-July-2020

4. Are you the corresponding author?

Yes No

Corresponding Author's Name

Weiya Zhang, Changhai Ding, Xiaofeng Zeng

5. Manuscript Title

Development and Formulation of the Classification Criteria for Osteoarthritis

6. Manuscript Identifying Number (if you know it)

ATM-20-4673

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Dr. Huang has nothing to disclose.

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Zhiyi

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Zhang

3. Date

08-July-2020

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Section 1. Identifying Information

1. Given Name (First Name) Yaolong	2. Surname (Last Name) Chen	3. Date 08-July-2020
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Weiya Zhang, Changhai Ding, Xiaofeng Zeng
5. Manuscript Title Development and Formulation of the Classification Criteria for Osteoarthritis		
6. Manuscript Identifying Number (if you know it) ATM-20-4673		

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1. Given Name (First Name) Like	2. Surname (Last Name) Zhao	3. Date 08-July-2020
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Weiya Zhang, Changhai Ding, Xiaofeng Zeng
5. Manuscript Title Development and Formulation of the Classification Criteria for Osteoarthritis		
6. Manuscript Identifying Number (if you know it) ATM-20-4673		

Section 2. The Work Under Consideration for Publication

Did you or your institution **at any time** receive payment or services from a third party (government, commercial, private foundation, etc.) for any aspect of the submitted work (including but not limited to grants, data monitoring board, study design, manuscript preparation, statistical analysis, etc.)?

Are there any relevant conflicts of interest? Yes No

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Are there any relevant conflicts of interest? Yes No

Section 4. Intellectual Property -- Patents & Copyrights

Do you have any patents, whether planned, pending or issued, broadly relevant to the work? Yes No

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Dr. Zhao has nothing to disclose.

Evaluation and Feedback

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name) Jianhao	2. Surname (Last Name) Lin	3. Date 08-July-2020
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Weiya Zhang, Changhai Ding, Xiaofeng Zeng
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Yifang

2. Surname (Last Name)

Mei

3. Date

08-July-2020

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Yes No

Corresponding Author's Name

Weiya Zhang, Changhai Ding, Xiaofeng Zeng

5. Manuscript Title

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ATM-20-4673

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Section 1. Identifying Information

1. Given Name (First Name)

Hsiao-Yi

2. Surname (Last Name)

Lin

3. Date

08-July-2020

4. Are you the corresponding author?

Yes No

Corresponding Author's Name

Weiya Zhang, Changhai Ding, Xiaofeng Zeng

5. Manuscript Title

Development and Formulation of the Classification Criteria for Osteoarthritis

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ATM-20-4673

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name) Shengyun	2. Surname (Last Name) Liu	3. Date 08-July-2020
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Weiya Zhang, Changhai Ding, Xiaofeng Zeng
5. Manuscript Title Development and Formulation of the Classification Criteria for Osteoarthritis		
6. Manuscript Identifying Number (if you know it) ATM-20-4673		

Section 2. The Work Under Consideration for Publication

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Are there any relevant conflicts of interest? Yes No

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Dr. Liu has nothing to disclose.

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Quan

2. Surname (Last Name)

Jiang

3. Date

08-July-2020

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Yes

No

Corresponding Author's Name

Weiya Zhang, Changhai Ding, Xiaofeng Zeng

5. Manuscript Title

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ATM-20-4673

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Yes

No

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Yes

No

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ICMJE Form for Disclosure of Potential Conflicts of Interest

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1. Given Name (First Name)

Yi

2. Surname (Last Name)

Liu

3. Date

08-July-2020

4. Are you the corresponding author?

Yes

No

Corresponding Author's Name

Weiya Zhang, Changhai Ding, Xiaofeng Zeng

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Development and Formulation of the Classification Criteria for Osteoarthritis

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ATM-20-4673

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Yes

No

Section 4. Intellectual Property -- Patents & Copyrights

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2. Surname (Last Name)

Chen

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08-July-2020

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Corresponding Author's Name

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ICMJE Form for Disclosure of Potential Conflicts of Interest

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1. Given Name (First Name) Zhizhong	2. Surname (Last Name) Ye	3. Date 08-July-2020
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Weiya Zhang, Changhai Ding, Xiaofeng Zeng
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6. Manuscript Identifying Number (if you know it)

ATM-20-4673

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Are there any relevant conflicts of interest? Yes No

Section 4. Intellectual Property -- Patents & Copyrights

Do you have any patents, whether planned, pending or issued, broadly relevant to the work? Yes No

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)

Yingjuan

2. Surname (Last Name)

Chen

3. Date

08-July-2020

4. Are you the corresponding author?

Yes

No

Corresponding Author's Name

Weiya Zhang, Changhai Ding, Xiaofeng Zeng

5. Manuscript Title

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ATM-20-4673

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Section 1. Identifying Information

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Cong-Qiu

2. Surname (Last Name)

Chu

3. Date

08-July-2020

4. Are you the corresponding author?

Yes No

Corresponding Author's Name

Weiya Zhang, Changhai Ding, Xiaofeng Zeng

5. Manuscript Title

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ATM-20-4673

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)

Ming

2. Surname (Last Name)

Gao

3. Date

08-July-2020

4. Are you the corresponding author?

Yes No

Corresponding Author's Name

Weiya Zhang, Changhai Ding, Xiaofeng Zeng

5. Manuscript Title

Development and Formulation of the Classification Criteria for Osteoarthritis

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ATM-20-4673

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name) Lan	2. Surname (Last Name) He	3. Date 08-July-2020
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Weiya Zhang, Changhai Ding, Xiaofeng Zeng
5. Manuscript Title Development and Formulation of the Classification Criteria for Osteoarthritis		
6. Manuscript Identifying Number (if you know it) ATM-20-4673		

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Jin

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Lin

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)

Lijun

2. Surname (Last Name)

Wu

3. Date

08-July-2020

4. Are you the corresponding author?

Yes No

Corresponding Author's Name

Weiya Zhang, Changhai Ding, Xiaofeng Zeng

5. Manuscript Title

Development and Formulation of the Classification Criteria for Osteoarthritis

6. Manuscript Identifying Number (if you know it)

ATM-20-4673

Section 2. The Work Under Consideration for Publication

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Are there any relevant conflicts of interest? Yes No

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Are there any relevant conflicts of interest? Yes No

Section 4. Intellectual Property -- Patents & Copyrights

Do you have any patents, whether planned, pending or issued, broadly relevant to the work? Yes No

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Dr. Wu has nothing to disclose.

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name) Jianhua	2. Surname (Last Name) Xu	3. Date 08-July-2020
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Weiya Zhang, Changhai Ding, Xiaofeng Zeng
5. Manuscript Title Development and Formulation of the Classification Criteria for Osteoarthritis		
6. Manuscript Identifying Number (if you know it) ATM-20-4673		

Section 2. The Work Under Consideration for Publication

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Are there any relevant conflicts of interest? Yes No

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Dr. Xu has nothing to disclose.

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)
Pinting

2. Surname (Last Name)
Yang

3. Date
08-July-2020

4. Are you the corresponding author? Yes No

Corresponding Author's Name
Weiya Zhang, Changhai Ding, Xiaofeng Zeng

5. Manuscript Title
Development and Formulation of the Classification Criteria for Osteoarthritis

6. Manuscript Identifying Number (if you know it)
ATM-20-4673

Section 2. The Work Under Consideration for Publication

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Are there any relevant conflicts of interest? Yes No

Section 4. Intellectual Property -- Patents & Copyrights

Do you have any patents, whether planned, pending or issued, broadly relevant to the work? Yes No

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Dr. Yang has nothing to disclose.

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)

Xuewu

2. Surname (Last Name)

Zhang

3. Date

08-July-2020

4. Are you the corresponding author?

Yes No

Corresponding Author's Name

Weiya Zhang, Changhai Ding, Xiaofeng Zeng

5. Manuscript Title

Development and Formulation of the Classification Criteria for Osteoarthritis

6. Manuscript Identifying Number (if you know it)

ATM-20-4673

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Dr. Zhang has nothing to disclose.

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2. Surname (Last Name)

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08-July-2020

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Yes No

Corresponding Author's Name

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Dr. Jiang has nothing to disclose.

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name) Guanghua	2. Surname (Last Name) Lei	3. Date 08-July-2020
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Weiya Zhang, Changhai Ding, Xiaofeng Zeng
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Are there any relevant conflicts of interest? Yes No

Section 4. Intellectual Property -- Patents & Copyrights

Do you have any patents, whether planned, pending or issued, broadly relevant to the work? Yes No

ICMJE Form for Disclosure of Potential Conflicts of Interest

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Dr. Lei has nothing to disclose.

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name) Mengtao	2. Surname (Last Name) Li	3. Date 08-July-2020
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Weiya Zhang, Changhai Ding, Xiaofeng Zeng
5. Manuscript Title Development and Formulation of the Classification Criteria for Osteoarthritis		
6. Manuscript Identifying Number (if you know it) ATM-20-4673		

Section 2. The Work Under Consideration for Publication

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)
Wanling

2. Surname (Last Name)
Yang

3. Date
08-July-2020

4. Are you the corresponding author? Yes No

Corresponding Author's Name
Weiya Zhang, Changhai Ding, Xiaofeng Zeng

5. Manuscript Title
Development and Formulation of the Classification Criteria for Osteoarthritis

6. Manuscript Identifying Number (if you know it)
ATM-20-4673

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Dr. Yang has nothing to disclose.

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)

Xin

2. Surname (Last Name)

Gu

3. Date

08-July-2020

4. Are you the corresponding author?

Yes No

Corresponding Author's Name

Weiya Zhang, Changhai Ding, Xiaofeng Zeng

5. Manuscript Title

Development and Formulation of the Classification Criteria for Osteoarthritis

6. Manuscript Identifying Number (if you know it)

ATM-20-4673

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Dr. Gu has nothing to disclose.

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08-July-2020

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1. Given Name (First Name) Dongyi	2. Surname (Last Name) He	3. Date 08-July-2020
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Weiya Zhang, Changhai Ding, Xiaofeng Zeng
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Dr. He has nothing to disclose.

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Section 1. Identifying Information

1. Given Name (First Name)

Wei

2. Surname (Last Name)

Liu

3. Date

08-July-2020

4. Are you the corresponding author?

Yes No

Corresponding Author's Name

Weiya Zhang, Changhai Ding, Xiaofeng Zeng

5. Manuscript Title

Development and Formulation of the Classification Criteria for Osteoarthritis

6. Manuscript Identifying Number (if you know it)

ATM-20-4673

Section 2. The Work Under Consideration for Publication

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)

Weiya

2. Surname (Last Name)

Zhang

3. Date

08-July-2020

4. Are you the corresponding author?

Yes No

5. Manuscript Title

Development and Formulation of the Classification Criteria for Osteoarthritis

6. Manuscript Identifying Number (if you know it)

ATM-20-4673

Section 2. The Work Under Consideration for Publication

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Section 1. Identifying Information

1. Given Name (First Name)
Changhai

2. Surname (Last Name)
Ding

3. Date
08-July-2020

4. Are you the corresponding author? Yes No

5. Manuscript Title
Development and Formulation of the Classification Criteria for Osteoarthritis

6. Manuscript Identifying Number (if you know it)
ATM-20-4673

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Xiaofeng

2. Surname (Last Name)

Zeng

3. Date

08-July-2020

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