

ICMJE Form for Disclosure of Potential Conflicts of Interest

Instructions

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This section asks about patents and copyrights, whether pending, issued, licensed and/or receiving royalties.

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name) Bingsheng	2. Surname (Last Name) Huang	3. Date 25-September-2020
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Heng Liu; Yong Liu
5. Manuscript Title Mortality prediction for patients with acute respiratory distress syndrome based on machine learning: a population-based study		
6. Manuscript Identifying Number (if you know it) ATM-20-6624		

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Are there any relevant conflicts of interest? Yes No

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Dr. Huang has nothing to disclose.

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1. Given Name (First Name) Dong	2. Surname (Last Name) Liang	3. Date 25-September-2020
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Heng Liu; Yong Liu
5. Manuscript Title Mortality prediction for patients with acute respiratory distress syndrome based on machine learning: a population-based study		
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1. Given Name (First Name) Rushi	2. Surname (Last Name) Zou	3. Date 25-September-2020
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Heng Liu; Yong Liu
5. Manuscript Title Mortality prediction for patients with acute respiratory distress syndrome based on machine learning: a population-based study		
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Section 1. Identifying Information

1. Given Name (First Name) Xiaxia	2. Surname (Last Name) Yu	3. Date 25-September-2020
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Heng Liu; Yong Liu
5. Manuscript Title Mortality prediction for patients with acute respiratory distress syndrome based on machine learning: a population-based study		
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Section 1. Identifying Information

1. Given Name (First Name)

Guo

2. Surname (Last Name)

Dan

3. Date

25-September-2020

4. Are you the corresponding author?

Yes No

Corresponding Author's Name

Heng Liu; Yong Liu

5. Manuscript Title

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ICMJE Form for Disclosure of Potential Conflicts of Interest

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1. Given Name (First Name) Haofan	2. Surname (Last Name) Huang	3. Date 25-September-2020
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Heng Liu; Yong Liu
5. Manuscript Title Mortality prediction for patients with acute respiratory distress syndrome based on machine learning: a population-based study		
6. Manuscript Identifying Number (if you know it) ATM-20-6624		

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

Section 3. Relevant financial activities outside the submitted work.

Place a check in the appropriate boxes in the table to indicate whether you have financial relationships (regardless of amount of compensation) with entities as described in the instructions. Use one line for each entity; add as many lines as you need by clicking the "Add +" box. You should report relationships that were **present during the 36 months prior to publication**.

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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Section 6. Disclosure Statement

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Dr. Huang has nothing to disclose.

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Instructions

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1. Identifying information.

2. The work under consideration for publication.

This section asks for information about the work that you have submitted for publication. The time frame for this reporting is that of the work itself, from the initial conception and planning to the present. The requested information is about resources that you received, either directly or indirectly (via your institution), to enable you to complete the work. Checking "No" means that you did the work without receiving any financial support from any third party -- that is, the work was supported by funds from the same institution that pays your salary and that institution did not receive third-party funds with which to pay you. If you or your institution received funds from a third party to support the work, such as a government granting agency, charitable foundation or commercial sponsor, check "Yes".

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This section asks about your financial relationships with entities in the bio-medical arena that could be perceived to influence, or that give the appearance of potentially influencing, what you wrote in the submitted work. You should disclose interactions with ANY entity that could be considered broadly relevant to the work. For example, if your article is about testing an epidermal growth factor receptor (EGFR) antagonist in lung cancer, you should report all associations with entities pursuing diagnostic or therapeutic strategies in cancer in general, not just in the area of EGFR or lung cancer.

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Personal Fees: Monies paid to you for services rendered, generally honoraria, royalties, or fees for consulting, lectures, speakers bureaus, expert testimony, employment, or other affiliations

Non-Financial Support: Examples include drugs/equipment supplied by the entity, travel paid by the entity, writing assistance, administrative support, etc.

Other: Anything not covered under the previous three boxes

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Heng

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Yong

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