

ICMJE Form for Disclosure of Potential Conflicts of Interest

Instructions

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)

Kangqi

2. Surname (Last Name)

Ng

3. Date

13-March-2020

4. Are you the corresponding author?

☒ Yes ☐ No

5. Manuscript Title

COVID-19 and the Risk to Health Care Workers: A Case Report

6. Manuscript Identifying Number (if you know it)

L20-0175

Section 2. The Work Under Consideration for Publication

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Dr. Ng has nothing to disclose.

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Section 1. Identifying Information

1. Given Name (First Name)

YU JUN

2. Surname (Last Name)

WONG

3. Date

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☐ Yes

☒ No

Corresponding Author's Name

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L20-0175

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Dr. WONG has nothing to disclose.

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Section 1. Identifying Information

1. Given Name (First Name) Raghuram	2. Surname (Last Name) Jagadesan	3. Date 13-March-2020
4. Are you the corresponding author? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Corresponding Author's Name Dr. Ng Kangqi
5. Manuscript Title COVID-19 and the Risk for Healthcare Workers: A Case Report		
6. Manuscript Identifying Number (if you know it) REF: L20-0175		

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1. Given Name (First Name) Beng Hoong	2. Surname (Last Name) Poon	3. Date 13-March-2020
4. Are you the corresponding author? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Corresponding Author's Name Kangqi Ng
5. Manuscript Title COVID-19 and the Risk for Healthcare Workers: A Case Report		
6. Manuscript Identifying Number (if you know it) 		

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1. Given Name (First Name) Troy	2. Surname (Last Name) Puar	3. Date 14-March-2020
4. Are you the corresponding author? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Corresponding Author's Name Ng Kangqi
5. Manuscript Title COVID-19 and the Risk for Healthcare Workers: A Case Report		
6. Manuscript Identifying Number (if you know it) 		

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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

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3. Relevant financial activities outside the submitted work.

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.

Report all sources of revenue paid (or promised to be paid) directly to you or your institution on your behalf over the 36 months prior to submission of the work. This should include all monies from sources with relevance to the submitted work, not just monies from the entity that sponsored the research. Please note that your interactions with the work's sponsor that are outside the submitted work should also be listed here. If there is any question, it is usually better to disclose a relationship than not to do so.

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Definitions.

Entity: government agency, foundation, commercial sponsor, academic institution, etc.

Grant: A grant from an entity, generally [but not always] paid to your organization

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

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ICMJE Form for Disclosure of Potential Conflicts of Interest

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1. Given Name (First Name) Thean Yen	2. Surname (Last Name) Tan	3. Date 14-March-2020
4. Are you the corresponding author? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
Corresponding Author's Name _____		
5. Manuscript Title COVID-19 and the Risk for Healthcare Workers: A Case Report		
6. Manuscript Identifying Number (if you know it) L20-0175		

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Section 1. Identifying Information

1. Given Name (First Name)

Wann Jia

2. Surname (Last Name)

Loh

3. Date

14-March-2020

4. Are you the corresponding author?

☐ Yes ☒ No

Corresponding Author's Name

Ng Kangqi

5. Manuscript Title

COVID-19 and the Risk for Healthcare Workers: A Case Report

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