ICMJE Form for Disclosure of Potential Conflicts of Interest

Instructions

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<table>
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<tr>
<th>1. Given Name (First Name)</th>
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<th>3. Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>Jong-Nam</td>
<td>Kim</td>
<td>29-May-2020</td>
</tr>
</tbody>
</table>

4. Are you the corresponding author?  
   - Yes ✔  
   - No   

5. Manuscript Title  
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6. Manuscript Identifying Number (if you know it)  
AOS-19-16-MS

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1. Given Name (First Name)  Chan
2. Surname (Last Name)  Kim
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Corresponding Author's Name  Jong-Nam Kim

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