ICMJE Form for Disclosure of Potential Conflicts of Interest

**Instructions**

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1. **Identifying information.**

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4. **Intellectual Property.**

   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)
   - Xianjing

2. Surname (Last Name)
   - Peng

3. Date
   - 05-June-2020

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

   Corresponding Author’s Name
   - Weihua Liao; Xiaoguang Cheng

5. Manuscript Title
   - Age-Related Fatty Infiltration of Lumbar Paraspinal Muscles: A Normative Reference Database Study in 516 Chinese females

6. Manuscript Identifying Number (if you know it)
   - QIMS-19-835

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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  Yes  No

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Dr. Peng has nothing to disclose.

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\end{itemize}
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**Section 1. Identifying Information**

| 1. Given Name (First Name) | Xintong |
| 2. Surname (Last Name)     | Li      |
| 3. Date                    | 07-June-2020 |
| 4. Are you the corresponding author? | Yes | No |
| 5. Manuscript Title        | Age-Related Fatty Infiltration of Lumbar Paraspinal Muscles: A Normative Reference Database Study in 516 Chinese females |
| 6. Manuscript Identifying Number (if you know it) | QIMS-19-835 |

**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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Dr. Li has nothing to disclose.

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Xu
# ICMJE Form for Disclosure of Potential Conflicts of Interest

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<td>1. Given Name (First Name)</td>
<td>2. Surname (Last Name)</td>
<td>3. Date</td>
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<td>Zhengyang</td>
<td>Xu</td>
<td>08-June-2020</td>
</tr>
</tbody>
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4. Are you the corresponding author?  

- [ ] Yes  
- [x] No

Corresponding Author’s Name  

Weihua Liao; Xiaoguang Cheng

5. Manuscript Title  

Age-Related Fatty Infiltration of Lumbar Paraspinal Muscles: A Normative Reference Database Study in 516 Chinese females

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QIMS-19-835

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Are there any relevant conflicts of interest?  

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- [x] No

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Wang
ICMJE Form for Disclosure of Potential Conflicts of Interest

**Section 1. Identifying Information**

1. Given Name (First Name)  
   Ling

2. Surname (Last Name)  
   Wang

3. Date  
   02-June-2020

4. Are you the corresponding author?  
   Yes  
   No

   Corresponding Author’s Name  
   Weihua Liao; Xiaoguang Cheng

5. Manuscript Title  
   Age-Related Fatty Infiltration of Lumbar Paraspinal Muscles: A Normative Reference Database Study in 516 Chinese females

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<td>Cai</td>
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4. Are you the corresponding author? ☑ Yes ☐ No

Corresponding Author’s Name

Weihua Liao, Xiaoguang Cheng

5. Manuscript Title

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Are there any relevant conflicts of interest? ☑ Yes ☐ No

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Dr. Cai has nothing to disclose.

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ICMJE Form for Disclosure of Potential Conflicts of Interest

### Section 1. Identifying Information

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<th>2. Surname (Last Name)</th>
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<tr>
<td>Shuai</td>
<td>Yang</td>
<td>07-June-2020</td>
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<th>4. Are you the corresponding author?</th>
<th>5. Manuscript Title</th>
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<tr>
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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?  

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Dr. Yang has nothing to disclose.

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1. Given Name (First Name)  
   Weihua

2. Surname (Last Name)  
   Liao

3. Date  
   05-June-2020

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

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1. **Given Name (First Name)**  
   Xiaoguang

2. **Surname (Last Name)**  
   Cheng

3. **Date**  
   06-June-2020

4. **Are you the corresponding author?**  
   Yes  
   No

5. **Manuscript Title**  
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