ICMJE Form for Disclosure of Potential Conflicts of Interest

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<td>Park</td>
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4. Are you the corresponding author? [ ] Yes [x] No

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6. Manuscript Identifying Number (if you know it)
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Dr. Park has nothing to disclose.

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Cheoun
**Section 1. Identifying Information**

1. Given Name (First Name)  
   Meelang

2. Surname (Last Name)  
   Cheoun

3. Date  
   03-August-2020

4. Are you the corresponding author?  
   ✔ No  
   Corresponding Author’s Name  
   Woong-Han Kim

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Dr. Cheoun has nothing to disclose.

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Choi

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1. **Given Name (First Name)**
   - Jongho

2. **Surname (Last Name)**
   - Heo

3. **Date**
   - 03-August-2020

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

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2. Surname (Last Name)  
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