



ICMJE Form for Disclosure of Potential Conflicts of Interest

Instructions

The purpose of this form is to provide readers of your manuscript with information about your other interests that could influence how they receive and understand your work. The form is designed to be completed electronically and stored electronically. It contains programming that allows appropriate data display. Each author should submit a separate form and is responsible for the accuracy and completeness of the submitted information. The form is in six parts.

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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)

Hassib

2. Surname (Last Name)

Narchi

3. Date

20-October-2017

4. Are you the corresponding author?

☐ Yes☒ No

Corresponding Author's Name

Afaf Al Blooshi

5. Manuscript Title

Is Forced Oscillation Technique the next respiratory function test of choice in childhood asthma?

6. Manuscript Identifying Number (if you know it)

33729-Review

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

ADD

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

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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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Disclosure Statement

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Dr. Narchi has nothing to disclose.

Evaluation and Feedback

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Section 1. Identifying Information

1. Given Name (First Name)

AFAF

2. Surname (Last Name)

ALBLOOSHI

3. Date

20-October-2017

4. Are you the corresponding author?

☒ Yes ☐ No

5. Manuscript Title

Is Forced Oscillation Technique the next respiratory function test of choice in childhood asthma

6. Manuscript Identifying Number (if you know it)

33729

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

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Dr. ALBLOOSHI has nothing to disclose.

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1. Given Name (First Name)

ALIA

2. Surname (Last Name)

ALKALBANI

3. Date

22-October-2017

4. Are you the corresponding author?

☐ Yes☒ No

Corresponding Author's Name

AFAF ALBLOOSHI

5. Manuscript Title

Is Forced Oscillation Technique the next respiratory function test of choice in childhood asthma

6. Manuscript Identifying Number (if you know it)

33729

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1. Given Name (First Name)

Ghaya

2. Surname (Last Name)

AlBadi

3. Date

22-October-2017

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☐ Yes

☒ No

Corresponding Author's Name

Dr. Afaf AlBlooshi

5. Manuscript Title

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Graham

2. Surname (Last Name)

Hall

3. Date

23-October-2017

4. Are you the corresponding author?

☐

Yes

☒

No

Corresponding Author's Name

5. Manuscript Title

Is Forced Oscillation Technique the next respiratory function test of choice in childhood asthma

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