

ICMJE DISCLOSURE FORM

Date: 2022-6.20

Your Name: Shuwei Wu

Manuscript Title: The effects of photobiomodulation therapy on inflammatory mediators, immune infiltration, and angiogenesis in a mouse model of rosacea

Manuscript number (if known):

In the interest of transparency, we ask you to disclose all relationships/activities/interests listed below that are related to the content of your manuscript. "Related" means any relation with for-profit or not-for-profit third parties whose interests may be affected by the content of the manuscript. Disclosure represents a commitment to transparency and does not necessarily indicate a bias. If you are in doubt about whether to list a relationship/activity/interest, it is preferable that you do so.

The following questions apply to the author's relationships/activities/interests as they relate to the current manuscript only.

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		Name all entities with whom you have this relationship or indicate none (add rows as needed)	Specifications/Comments (e.g., if payments were made to you or to your institution)
Time frame: Since the initial planning of the work			
1	All support for the present manuscript (e.g., funding, provision of study materials, medical writing, article processing charges, etc.) No time limit for this item.	__X__ None	
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2	Grants or contracts from any entity (if not indicated in item #1 above).	__X__ None	
3	Royalties or licenses	__X__ None	
4	Consulting fees	__X__ None	

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Please summarize the above conflict of interest in the following box:

The author has no conflicts of interest to declare.

Please place an "X" next to the following statement to indicate your agreement:

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Date: 2022-6.20

Your Name: Yaoxi Su

Manuscript Title: The effects of photobiomodulation therapy on inflammatory mediators, immune infiltration, and angiogenesis in a mouse model of rosacea

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Date: 2022-6.20

Your Name: Lian Wang

Manuscript Title: The effects of photobiomodulation therapy on inflammatory mediators, immune infiltration, and angiogenesis in a mouse model of rosacea

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