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.

5. Relationships not covered above.

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Royalties: Funds are coming in to you or your institution due to your patent

Kim
ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)  
   Moon Seong

2. Surname (Last Name)  
   Kim

3. Date  
   12-June-2020

4. Are you the corresponding author?  
   No

Corresponding Author's Name  
   Young Dong Yu

5. Manuscript Title  
The role of Ureaplasma parvum serovar-3 or serovar-14 infection in female patients with chronic micturition urethral pain and recurrent microscopic hematuria

6. Manuscript Identifying Number (if you know it)  
TAU-20-920

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Are there any relevant conflicts of interest?  

No

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Are there any relevant conflicts of interest?  

No

Section 4. Intellectual Property -- Patents & Copyrights

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Dr. Kim has nothing to disclose.

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**Section 1. Identifying Information**

1. Given Name (First Name)  
   Dong Hyun  

2. Surname (Last Name)  
   Lee  

3. Date  
   12-June-2020  

4. Are you the corresponding author?  
   ☑ No  

Corresponding Author's Name  
Young Dong Yu

5. Manuscript Title  
The role of Ureaplasma parvum serovar-3 or serovar-14 infection in female patients with chronic micturition urethral pain and recurrent microscopic hematuria  

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Dr. Lee has nothing to disclose.

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### Identifying Information

1. Given Name (First Name)  
   Tae Jin

2. Surname (Last Name)  
   Kim

3. Date  
   12-June-2020

4. Are you the corresponding author?  
   ✔ No  
   Corresponding Author's Name  
   Young Dong Yu

5. Manuscript Title  
   The role of Ureaplasma parvum serovar-3 or serovar-14 infection in female patients with chronic micturition urethral pain and recurrent microscopic hematuria

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Section 1. Identifying Information

1. Given Name (First Name)  
   Jong Jin

2. Surname (Last Name)  
   Oh

3. Date  
   12-June-2020

4. Are you the corresponding author?  
   Yes  ✔  No

5. Manuscript Title  
The role of Ureaplasma parvum serovar-3 or serovar-14 infection in female patients with chronic micturition urethral pain and recurrent microscopic hematuria

6. Manuscript Identifying Number (if you know it)  
TAU-20-920

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Rhee
ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)  Seung Ryeol
2. Surname (Last Name)  Rhee
3. Date  12-June-2020
4. Are you the corresponding author?  ☑ No

Corresponding Author's Name  Young Dong Yu

5. Manuscript Title
The role of Ureaplasma parvum serovar-3 or serovar-14 infection in female patients with chronic micturition urethral pain and recurrent microscopic hematuria

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Dr. Rhee has nothing to disclose.

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Definitions.

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- **Other**: Anything not covered under the previous three boxes
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**ICMJE Form for Disclosure of Potential Conflicts of Interest**

### Section 1. Identifying Information

| 1. Given Name (First Name) | 2. Surname (Last Name) | 3. Date       |
|---------------------------|------------------------|--------------|
| Dong Soo                  | Park                   | 12-June-2020 |

4. Are you the corresponding author?  
   - [ ] Yes  
   - [x] No

Corresponding Author’s Name  
Young Dong Yu

5. Manuscript Title  
The role of Ureaplasma parvum serovar-3 or serovar-14 infection in female patients with chronic micturition urethral pain and recurrent microscopic hematuria

6. Manuscript Identifying Number (if you know it)  
TAU-20-920

### 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.)?  
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Dr. Park has nothing to disclose.

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Instructions

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   This section asks for information about the work that you have submitted for publication. The time frame for this reporting is that of the work itself, from the initial conception and planning to the present. The requested information is about resources that you received, either directly or indirectly (via your institution), to enable you to complete the work. Checking "No" means that you did the work without receiving any financial support from any third party -- that is, the work was supported by funds from the same institution that pays your salary and that institution did not receive third-party funds with which to pay you. If you or your institution received funds from a third party to support the work, such as a government granting agency, charitable foundation or commercial sponsor, check "Yes".

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1. Given Name (First Name)  Young Dong
2. Surname (Last Name)  Yu
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