ICMJE Form for Disclosure of Potential Conflicts of Interest

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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   This section asks about patents and copyrights, whether pending, issued, licensed and/or receiving royalties.

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Section 1. Identifying Information

1. Given Name (First Name) Wen Jie
2. Surname (Last Name) Tian

4. Are you the corresponding author? [ ] Yes [ ] No
   Corresponding Author’s Name Sae Woong Kim

5. Manuscript Title
   Effect of High-BDNF Microenvironment Stem Cells Therapy on Neurogenic Bladder Model in Rats

6. Manuscript Identifying Number (if you know it)
   TAU-20-1072

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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1. Given Name (First Name)  Seung Hwan
2. Surname (Last Name)  Jeon
3. Date  28-September-2020
4. Are you the corresponding author?  No

Corresponding Author’s Name  Sae Woong Kim

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1. Given Name (First Name)  
   Guan Qun

2. Surname (Last Name)  
   Zhu

3. Date  
   28-September-2020

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

   Corresponding Author’s Name  
   Sae Woong Kim

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1. Given Name (First Name)  Eun Bi
2. Surname (Last Name)  Kwon
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# ICMJE Form for Disclosure of Potential Conflicts of Interest

## Section 1. Identifying Information

1. **Given Name (First Name)**
   - Ga Eun

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

3. **Date**
   - 28-September-2020

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

   **Corresponding Author’s Name**
   - Sae Woong Kim

5. **Manuscript Title**
   - Effect of High-BDNF Microenvironment Stem Cells Therapy on Neurogenic Bladder Model in Rats

6. **Manuscript Identifying Number (if you know it)**
   - TAU-20-1072

## 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**

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Section 1. Identifying Information

1. Given Name (First Name) Woong Jin
2. Surname (Last Name) Bae
3. Date 28-September-2020
4. Are you the corresponding author? ☑ No

Corresponding Author’s Name
Sae Woong Kim

5. Manuscript Title
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Corresponding Author's Name
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1. Given Name (First Name)  
   Ji Youl

2. Surname (Last Name)  
   Lee

3. Date  
   28-September-2020

4. Are you the corresponding author?  
   No

   ✔ Yes

5. Manuscript Title
   Effect of High-BDNF Microenvironment Stem Cells Therapy on Neurogenic Bladder Model in Rats

6. Manuscript Identifying Number (if you know it)
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1. Given Name (First Name) Kang Sup
2. Surname (Last Name) Kim
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   Corresponding Author's Name Sae Woong Kim
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