ICMJE Form for Disclosure of Potential Conflicts of Interest

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Section 1. Identifying Information

1. Given Name (First Name)  
   Jheelam

2. Surname (Last Name)  
   Biswas

3. Date  
   28-April-2020

4. Are you the corresponding author?  
   □ Yes  ✔ No  
   Corresponding Author’s Name  
   Palash Chandra Banik

5. Manuscript Title  
   Salt Intake Behavior among the Undergraduate Students of Bangladesh University of Health Sciences

6. Manuscript Identifying Number (if you know it)  
   JXYM-20-47

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Dr. Biswas has nothing to disclose.

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Section 1. Identifying Information

1. Given Name (First Name)  
Mohammad Masumul

2. Surname (Last Name)  
Haque

3. Date  
29-April-2020

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

Corresponding Author's Name  
Palash Chandra Banik

5. Manuscript Title  
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Dr. Haque has nothing to disclose.

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<tr>
<td>Md. Shahriar</td>
<td>Mahbub</td>
<td>29-April-2020</td>
</tr>
</tbody>
</table>

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

Corresponding Author's Name
Palash Chandra Banik

5. Manuscript Title
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Dr. Mahbub has nothing to disclose.

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Nurani
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1. Given Name (First Name)  
Rokaiatun Nura

2. Surname (Last Name)  
Nurani

3. Date  
29-April-2020

4. Are you the corresponding author?  
☐ Yes  ✔ No  
Corresponding Author's Name  
Palash Chandra Banik

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<tr>
<td>Nadim Ahmed</td>
<td>Shah</td>
<td>30-April-2020</td>
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4. Are you the corresponding author? [ ] Yes [ ] No

Corresponding Author’s Name
Palash Chandra Banik

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Dr. Shah has nothing to disclose.

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Barua
ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)  
   Lingkan

2. Surname (Last Name)  
   Barua

3. Date  
   30-April-2020

4. Are you the corresponding author?  
   ✔ No

Corresponding Author’s Name  
   Palash Chandra Banik

5. Manuscript Title  
   Salt Intake Behavior among the Undergraduate Students of Bangladesh University of Health Sciences

6. Manuscript Identifying Number (if you know it)  
   JXYM-20-47

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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   ✔ No

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Do you have any patents, whether planned, pending or issued, broadly relevant to the work?  
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**Section 6. Disclosure Statement**

Based on the above disclosures, this form will automatically generate a disclosure statement, which will appear in the box below.

Dr. Barua has nothing to disclose.

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# ICMJE Form for Disclosure of Potential Conflicts of Interest

## Section 1. Identifying Information

<table>
<thead>
<tr>
<th>1. Given Name (First Name)</th>
<th>Palash Chandra</th>
</tr>
</thead>
<tbody>
<tr>
<td>2. Surname (Last Name)</td>
<td>Banik</td>
</tr>
<tr>
<td>3. Date</td>
<td>01-May-2020</td>
</tr>
<tr>
<td>4. Are you the corresponding author?</td>
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Are there any relevant conflicts of interest? Yes ✔ No

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</thead>
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<tr>
<td>Mithila</td>
<td>Faruque</td>
<td>02-May-2020</td>
</tr>
</tbody>
</table>

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☐ Yes  ☑ No

Corresponding Author's Name  
Palash Chandra Banik

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Dr. Faruque has nothing to disclose.

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**Section 1. Identifying Information**

1. Given Name (First Name)  
   M Mostafa

2. Surname (Last Name)  
   Zaman

3. Date  
   30-April-2020

4. Are you the corresponding author?  
   ✔ No

5. Manuscript Title  
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Dr. Zaman has nothing to disclose.

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