



POTENTIAL CONFLICTS OF INTEREST DISCLOSURE

Instructions: The purpose of this "Potential Conflicts of Interest Disclosure Form" is to provide readers of your manuscript with comprehensive information about any interests that could potentially influence how they interpret and understand your work. This transparency is crucial for maintaining the integrity and credibility of the research.

Each author must submit a separate form and is personally responsible for the accuracy and completeness of the submitted information. It is essential that all authors take this responsibility seriously to maintain trust in the scientific community.

At the time of manuscript acceptance, journals will ask authors to confirm, and if necessary, update their disclosure statements. This ensures that any changes in potential conflicts of interest are reflected accurately. Occasionally, journals may request additional information about reported relationships to ensure clarity and transparency.

Disclosing potential conflicts of interest helps readers evaluate the research in context and understand any factors that might have influenced the findings or conclusions. It is a critical step in maintaining the highest standards of academic integrity.

This enhanced version emphasizes the importance of transparency and accuracy in disclosing potential conflicts of interest, ensuring that authors understand their role in maintaining the integrity of the research.

The form is in six parts.

1. Identifying information. This section collects basic information about the article and you as the author. Please ensure all details are accurate and up-to-date.

2. The work under consideration for publication. Provide details about the resources used to support your submitted work, from conception to the present. If you received third-party funding, check "Yes"; otherwise, check "No" if the work was supported solely by your institution's funds.

3. Relevant financial activities outside the submitted work. Disclose any financial relationships with entities in the dental research and supply arena. Include all relevant interactions, even if they are not directly related to the submitted work. Public funding sources like government agencies do not need to be disclosed.

4. Intellectual Property. Report any patents or copyrights related to your work, whether pending, issued, licensed, or generating royalties.

5. Relationships not covered above. Use this section to report other relationships or activities not covered in the sections above.

6. Disclosure statement. Summarize your disclosures and confirm the accuracy of the information provided.

Definitions

- Entity: Government agency, foundation, commercial sponsor, academic institution, etc.
- Grant: A grant from an entity, generally (but not always) paid to your organization
- Personal Fees: Money paid to you for services rendered, generally honoraria, royalties, or fees for consulting, lectures, speakers bureaus, expert testimony, employment, or other affiliations
- Non-Financial Support: Examples include drugs/equipment supplied by the entity, travel paid by the entity, writing assistance, administrative support, etc.
- Other: Anything not covered under the previous three boxes
- Pending: The patent has been filed but not issued
- Issued: The patent has been issued by the agency
- Licensed: The patent has been licensed to an entity, whether earning royalties or not
- Royalties: Funds are coming in to you or your institution due to your patent



Section I: Identifying Information

Article Title ("The Work"): _____

Paper ID : _____

Article # : _____

of Pages : _____

Page No. : _____

Submitted : _____

Resubmitted : _____

Accepted : _____

Author's Name: _____

Designation: _____

Affiliation/s: _____

Email: _____

ORCID: _____

Scopus ID, if any: _____

Corresponding Author: ☐ Yes ☐ No

Section II: 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

If yes, please fill out the appropriate information below.

Name of Institution/ Company	Grant	Personal Fees	Non- Financial Support	Other	Comments



Section III: Relevant Financial Activities Outside the Submitted Work

Place a check in the appropriate boxes in the table to indicate whether you have financial relationships (regardless of amount of compensation) with entities as described in the instructions. Use one line for each entity. You should report relationships that were present during the 36 months prior to publication.

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

If yes, please fill out the appropriate information below.

Name of Institution/ Company	Grant	Personal Fees	Non- Financial Support	Other	Comments

Section IV: Intellectual Property- Patents and Copyrights

Do you have any patents, whether planned, pending or issued, broadly relevant to the work?
☐ Yes ☐ No

If yes, please fill out the appropriate information below.

Patent	Pending	Issued	Licensed	Royalties	Licensee	Comments

Section V: Relationships Not Covered Above

Are there other relationships or activities that present a potential conflict of interest which have not been covered in the sections above?

☐ Yes, the following relationships/conditions/circumstances are present (explain)

☐ No other relationships/conditions/circumstances that present a potential conflict of interest



VirtualRealia.Org

Email: support@virtualrealia.org

Phone: + (968) 9283 4948

Postal Address

National Office:

Block 21, Lot 50, Phase 1A, Macopa St.,
San Lorenzo South Subd, Santa Rosa City, Laguna, Philippines

International Office:

Room 402, Al Qiyumi Building, Way 5509,
Bowsher Heights, Muscat City, Sultanate of Oman

Postal Code: 111

Section VI: Disclosure Statement

Please insert a disclosure statement in the box below. If you have nothing to disclose, please write : "Dr. XXX has nothing to disclose". If you have relationships which could be considered conflicts of interest in relation to the manuscript, please write a brief summary of the information given in this form. For instance, "Dr. XXX reports grants from XXX during the conduct of the study and non-financial support from XXX outside of the submitted work. In addition, Dr. XXX has a patent XXX issued".

(☐) I certify that the information provided in this form is accurate to the best of my knowledge.

Author Name and Signature/ E-Signature

Date: _____

Note: This form is a modified version of the ICMJE Form for Disclosure of Potential Conflicts of Interest, which is available here:
<http://www.icmje.org/conflicts-of-interest/>