

ICMJE Form for Disclosure of Potential Conflicts of Interest

Instructions

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Section 1. Identifying Information

1. Given Name (First Name)
Qianfang

2. Surname (Last Name)
Guo

3. Date
08-February-2020

4. Are you the corresponding author?

Yes No

Corresponding Author's Name
Jie Wu

5. Manuscript Title
SARS-CoV-2 Viral Load in Upper Respiratory Specimens of Patients

6. Manuscript Identifying Number (if you know it)
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1. Given Name (First Name) Jianfeng	2. Surname (Last Name) He	3. Date 08-February-2020
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Jie Wu
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Huitao

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4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Jie Wu
5. Manuscript Title SARS-CoV-2 Viral Load in Upper Respiratory Specimens of Patients		
6. Manuscript Identifying Number (if you know it) 20-01737		

Section 2. The Work Under Consideration for Publication

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Are there any relevant conflicts of interest? Yes No

Section 3. Relevant financial activities outside the submitted work.

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Are there any relevant conflicts of interest? Yes No

Section 4. Intellectual Property -- Patents & Copyrights

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

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Mr. Kang has nothing to disclose.

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name) Lijun	2. Surname (Last Name) Liang	3. Date 08-February-2020
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Jie Wu
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Dr. Huang has nothing to disclose.

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)
Malik

2. Surname (Last Name)
Peiris

3. Date
08-February-2020

4. Are you the corresponding author?

Yes No

Corresponding Author's Name
Jie Wu

5. Manuscript Title
SARS-CoV-2 Viral Load in Upper Respiratory Specimens of Patients

6. Manuscript Identifying Number (if you know it)
20-01737

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Dr. Peiris has nothing to disclose.

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Section 1. Identifying Information

1. Given Name (First Name) Feng	2. Surname (Last Name) Ruan	3. Date 08-February-2020
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Jie Wu
5. Manuscript Title SARS-CoV-2 Viral Load in Upper Respiratory Specimens of Patients		
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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)
Jie

2. Surname (Last Name)
Wu

3. Date
08-February-2020

4. Are you the corresponding author? Yes No

5. Manuscript Title
SARS-CoV-2 Viral Load in Upper Respiratory Specimens of Patients

6. Manuscript Identifying Number (if you know it)
20-01737

Section 2. The Work Under Consideration for Publication

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Are there any relevant conflicts of interest? Yes No

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Are there any relevant conflicts of interest? Yes No

Section 4. Intellectual Property -- Patents & Copyrights

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

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Dr. Wu has nothing to disclose.

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name) Jinyu	2. Surname (Last Name) Xia	3. Date 08-February-2020
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Jie Wu
5. Manuscript Title SARS-CoV-2 Viral Load in Upper Respiratory Specimens of Patients		
6. Manuscript Identifying Number (if you know it) 20-01737		

Section 2. The Work Under Consideration for Publication

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Are there any relevant conflicts of interest? Yes No

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Are there any relevant conflicts of interest? Yes No

Section 4. Intellectual Property -- Patents & Copyrights

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Dr. Xia has nothing to disclose.

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name) Hui-Ling	2. Surname (Last Name) Yen	3. Date 07-February-2020
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Jie Wu
5. Manuscript Title SARS-CoV-2 Viral Load in Upper Respiratory Specimens of Patients		
6. Manuscript Identifying Number (if you know it) 20-01737		

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 No

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Are there any relevant conflicts of interest? Yes No

Section 4. Intellectual Property -- Patents & Copyrights

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

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Dr. Yen has nothing to disclose.

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name) Jianxiang	2. Surname (Last Name) Yu	3. Date 08-February-2020
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Jie Wu
5. Manuscript Title SARS-CoV-2 Viral Load in Upper Respiratory Specimens of Patients		
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Mr. Yu has nothing to disclose.

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ICMJE Form for Disclosure of Potential Conflicts of Interest

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1. Given Name (First Name) Lirong	2. Surname (Last Name) Zou	3. Date 08-February-2020
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Jie Wu
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Ms. Zou has nothing to disclose.

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