

ICMJE Form for Disclosure of Potential Conflicts of Interest

Instructions

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

ICMJJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)

Karthik

2. Surname (Last Name)

Kovvuru

3. Date

18-March-2020

4. Are you the corresponding author?

Yes No

Corresponding Author's Name

Wisit Cheungpasitporn

5. Manuscript Title

Diagnostic approach to Orthstatic Proteinuria: A combination of Urine Micro-proteinuria with Ultrasonography of the Left Renal Vein

6. Manuscript Identifying Number (if you know it)

ATM-20-844(E2020010044-ATM)

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Section 6. Disclosure Statement

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Dr. Kovvuru has nothing to disclose.

Evaluation and Feedback

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name) Swetha Rani	2. Surname (Last Name) Kanduri	3. Date 18-March-2020
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Wisit Cheungpasitporn
5. Manuscript Title Diagnostic approach to Orthstatic Proteinuria: A combination of Urine Micro-proteinuria with Ultrasonography of the Left Renal Vein		
6. Manuscript Identifying Number (if you know it) ATM-20-844(E2020010044-ATM)		

Section 2. The Work Under Consideration for Publication

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1. Given Name (First Name)
Charat

2. Surname (Last Name)
Thongprayoon

3. Date
18-March-2020

4. Are you the corresponding author?

Yes No

Corresponding Author's Name
Wisit Cheungpasitporn

5. Manuscript Title
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WISIT

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CHEUNGPASITPORN

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