

ICMJE Form for Disclosure of Potential Conflicts of Interest

Instructions

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Section 1. Identifying Information

1. Given Name (First Name) Liping	2. Surname (Last Name) Liang	3. Date 06-June-2020
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Zhen Zhang
5. Manuscript Title Regulation of the regeneration of the intestinal stem cells after irradiation		
6. Manuscript Identifying Number (if you know it)		

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Dr. Liang 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)

Shen

3. Date

06-June-2020

4. Are you the corresponding author?

Yes

No

Corresponding Author's Name

Zhen Zhang

5. Manuscript Title

Regulation of the regeneration of intestinal stem cells after irradiation

6. Manuscript Identifying Number (if you know it)

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Dr. Shen has nothing to disclose.

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Section 1. Identifying Information

1. Given Name (First Name) Guoxiang	2. Surname (Last Name) Fu	3. Date 06-June-2020
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Zhen Zhang
5. Manuscript Title Regulation of the regeneration of the intestinal stem cells after irradiation		
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Section 1. Identifying Information

1. Given Name (First Name)

Ye

2. Surname (Last Name)

Yao

3. Date

07-June-2020

4. Are you the corresponding author?

Yes No

Corresponding Author's Name

Zhen Zhang

5. Manuscript Title

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2. Surname (Last Name)

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Corresponding Author's Name

Zhen Zhang

5. Manuscript Title

Regulation of the regeneration of the intestinal stem cells after irradiation

6. Manuscript Identifying Number (if you know it)

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

ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 5. Relationships not covered above

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Dr. Deng 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)

Zhen

2. Surname (Last Name)

Zhang

3. Date

06-June-2020

4. Are you the corresponding author?

Yes No

5. Manuscript Title

Regulation of the regeneration of the intestinal stem cells after irradiation

6. Manuscript Identifying Number (if you know it)

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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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name) Menglong	2. Surname (Last Name) Zhou	3. Date 06-June-2020
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Zhen Zhang
5. Manuscript Title Regulation of the regeneration of the intestinal stem cells after irradiation		
6. Manuscript Identifying Number (if you know it) _____		

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Section 4. Intellectual Property -- Patents & Copyrights

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name) Wang	2. Surname (Last Name) Yang	3. Date 06-June-2020
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Zhen Zhang
5. Manuscript Title Regulation of the regeneration of the intestinal stem cells after irradiation		
6. Manuscript Identifying Number (if you know it) _____		

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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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1. Given Name (First Name) Guoqiang	2. Surname (Last Name) Hua	3. Date 06-June-2020
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Zhen Zhang
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1. Given Name (First Name) Hui	2. Surname (Last Name) Zhang	3. Date 07-June-2020
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