

ICMJE Form for Disclosure of Potential Conflicts of Interest

Instructions

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Section 1. Identifying Information

| | | |
|---|---|---------------------------------------|
| 1. Given Name (First Name) Yue | 2. Surname (Last Name) Zheng | 3. Date 11-August-2020 |
| 4. Are you the corresponding author? | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | Corresponding Author's Name Yue Du |
| 5. Manuscript Title A review of nephrotic syndrome and atopic diseases in children | | |
| 6. Manuscript Identifying Number (if you know it) TAU-20-665-R1 | | |

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| | | |
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| 1. Given Name (First Name) Ling | 2. Surname (Last Name) Hou | 3. Date 11-August-2020 |
| 4. Are you the corresponding author? | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | Corresponding Author's Name Yue Du |
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| | | |
|---|---|---------------------------------------|
| 1. Given Name (First Name) Xiu-Li | 2. Surname (Last Name) Wang | 3. Date 11-August-2020 |
| 4. Are you the corresponding author? | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | Corresponding Author's Name Yue Du |
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| 1. Given Name (First Name) Cheng-Guang | 2. Surname (Last Name) Zhao | 3. Date 11-August-2020 |
| 4. Are you the corresponding author? | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | Corresponding Author's Name Yue Du |
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Yue

2. Surname (Last Name)

Du

3. Date

11-August-2020

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Yes No

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