

ICMJE DISCLOSURE FORM

Date: Aug. 7th, 2021

Your Name: Xiao Chen

Manuscript Title: Effects of voriconazole on population pharmacokinetics and optimization of the initial dose of tacrolimus in children with chronic granulomatous disease undergoing hematopoietic stem cell transplantation

Manuscript number (if known): _____

In the interest of transparency, we ask you to disclose all relationships/activities/interests listed below that are related to the content of your manuscript. "Related" means any relation with for-profit or not-for-profit third parties whose interests may be affected by the content of the manuscript. Disclosure represents a commitment to transparency and does not necessarily indicate a bias. If you are in doubt about whether to list a relationship/activity/interest, it is preferable that you do so.

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Please summarize the above conflict of interest in the following box:

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Date: Aug. 7th, 2021

Your Name: Dongdong Wang

Manuscript Title: Effects of voriconazole on population pharmacokinetics and optimization of the initial dose of tacrolimus in children with chronic granulomatous disease undergoing hematopoietic stem cell transplantation

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Date: Aug. 7th, 2021

Your Name: Jianger Lan

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Date: Aug. 7th, 2021

Your Name: Guangfei Wang

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Date: Aug. 7th, 2021

Your Name: Lin Zhu

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Date: Aug. 7th, 2021

Your Name: Xiaoyong Xu

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Date: Aug. 7th, 2021

Your Name: Zhiping Li

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