ICMJE Form for Disclosure of Potential Conflicts of Interest

Instructions

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<thead>
<tr>
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<th>3. Date</th>
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<tbody>
<tr>
<td>Dianzhong</td>
<td>Luo</td>
<td>06-February-2017</td>
</tr>
</tbody>
</table>

4. Are you the corresponding author?  
   - [ ] Yes  
   - ✔ No

5. Manuscript Title  
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6. Manuscript Identifying Number (if you know it)

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Zhang
ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)  
   Hong

2. Surname (Last Name)  
   Zhang

3. Date  
   06-February-2017

4. Are you the corresponding author?  
   ✔ Yes  
   ❏ No

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6. Manuscript Identifying Number (if you know it)

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1. **Given Name (First Name)**  
   Hui

2. **Surname (Last Name)**  
   Cheng

3. **Date**  
   06-February-2017

4. **Are you the corresponding author?**  
   [ ] Yes  
   [x] No

   **Corresponding Author’s Name**  
   Hong Zhang

5. **Manuscript Title**  
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6. **Manuscript Identifying Number (if you know it)**

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<tr>
<td>Kai</td>
<td>Xiao</td>
<td>06-February-2017</td>
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<th>4. Are you the corresponding author?</th>
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<tr>
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<th>Zhendong</th>
</tr>
</thead>
<tbody>
<tr>
<td>2. Surname (Last Name)</td>
<td>Zhang</td>
</tr>
<tr>
<td>3. Date</td>
<td>06-February-2017</td>
</tr>
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<td>4. Are you the corresponding author?</td>
<td>Yes ✔ No</td>
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<td>Corresponding Author’s Name</td>
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