

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

ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)
MIN

2. Surname (Last Name)
ZHOU

3. Date
10-April-2020

4. Are you the corresponding author?

☐ Yes ☒ No

Corresponding Author's Name
MIN WANG

5. Manuscript Title
Multifocal Adult Langerhans Cell Histiocytosis with Diabetes Insipidus as the Initial Symptom: A case report and literature review

6. Manuscript Identifying Number (if you know it)
JXYM-20-45

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Dr. ZHOU has nothing to disclose.

Evaluation and Feedback

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Section 1. Identifying Information

1. Given Name (First Name)

JIANHUI

2. Surname (Last Name)

YIN

3. Date

11-April-2020

4. Are you the corresponding author?

☐ Yes

☒ No

Corresponding Author's Name

MIN WANG

5. Manuscript Title

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Dr. YIN has nothing to disclose.

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LAN

2. Surname (Last Name)
LIAO

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10-April-2020

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MIN WANG

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MIN

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WANG

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