

ICMJE Form for Disclosure of Potential Conflicts of Interest

Instructions

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name) Yan-Qiu	2. Surname (Last Name) Han	3. Date 14-April-2020
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Zhi-De Hu
5. Manuscript Title Net benefit of routine urine parameters for urinary tract infection screening: A decision curve analysis		
6. Manuscript Identifying Number (if you know it) ATM-19-1164		

Section 2. The Work Under Consideration for Publication

Did you or your institution **at any time** receive payment or services from a third party (government, commercial, private foundation, etc.) for any aspect of the submitted work (including but not limited to grants, data monitoring board, study design, manuscript preparation, statistical analysis, etc.)?

Are there any relevant conflicts of interest? Yes No

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Are there any relevant conflicts of interest? Yes No

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Dr. Han 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) Lei	2. Surname (Last Name) Zhang	3. Date 14-April-2020
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Zhi-De Hu
5. Manuscript Title Net benefit of routine urine parameters for urinary tract infection screening: A decision curve analysis		
6. Manuscript Identifying Number (if you know it) ATM-19-1164		

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Dr. Zhang 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)

Jun-Rui

2. Surname (Last Name)

Wang

3. Date

14-April-2020

4. Are you the corresponding author?

Yes No

Corresponding Author's Name

Zhi-De Hu

5. Manuscript Title

Net benefit of routine urine parameters for urinary tract infection screening: A decision curve analysis

6. Manuscript Identifying Number (if you know it)

ATM-19-1164

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1. Given Name (First Name) Shang-Cheng	2. Surname (Last Name) Xu	3. Date 14-April-2020
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Zhi-De Hu
5. Manuscript Title Net benefit of routine urine parameters for urinary tract infection screening: A decision curve analysis		
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Section 1. Identifying Information

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Zhi-De

2. Surname (Last Name)

Hu

3. Date

13-April-2020

4. Are you the corresponding author?

Yes No

5. Manuscript Title

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