

## 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)

Yi

2. Surname (Last Name)

Xiao

3. Date

07-July-2020

4. Are you the corresponding author?

Yes  No

Corresponding Author's Name

Shaohong Huang and Libao Liu

5. Manuscript Title

Desmoid-type fibromatosis of the chest wall: a case report

6. Manuscript Identifying Number (if you know it)

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Dr. Xiao 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)

Jinyuan

2. Surname (Last Name)

He

3. Date

08-July-2020

4. Are you the corresponding author?

Yes  No

Corresponding Author's Name

Shaohong Huang and Libao Liu

5. Manuscript Title

Desmoid-type fibromatosis of the chest wall: a case report

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Dr. He has nothing to disclose.

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1. Given Name (First Name)

Chulian

2. Surname (Last Name)

Gong

3. Date

08-July-2020

4. Are you the corresponding author?

Yes  No

Corresponding Author's Name

Shaohong Huang, Libao Liu

5. Manuscript Title

Desmoid-type fibromatosis of the chest wall: a case report

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1. Given Name (First Name)

Libao

2. Surname (Last Name)

Liu

3. Date

07-July-2020

4. Are you the corresponding author?

Yes  No

5. Manuscript Title

Desmoid-type fibromatosis of the chest wall: a case report

6. Manuscript Identifying Number (if you know it)

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Shaohong

2. Surname (Last Name)

Huang

3. Date

10-July-2020

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Yes  No

5. Manuscript Title

Desmoid-type fibromatosis of the chest wall: a case report

6. Manuscript Identifying Number (if you know it)

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