

## 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) Yang-Xi	2. Surname (Last Name) Liu	3. Date 25-May-2020
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Min Cui
5. Manuscript Title Bloodstream infection caused by Yersinia enterocolitica in a host with ankylosing spondylitis: a case report and literature review		
6. Manuscript Identifying Number (if you know it) APM-20-256		

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Are there any relevant conflicts of interest?  Yes  No

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Dr. Liu has nothing to disclose.

### Evaluation and Feedback

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### Section 1. Identifying Information

1. Given Name (First Name) Han	2. Surname (Last Name) Zhong	3. Date 25-May-2020
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Min Cui
5. Manuscript Title Bloodstream infection caused by Yersinia enterocolitica in a host with ankylosing spondylitis: a case report and literature review		
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Ke-Jia

2. Surname (Last Name)  
Le

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25-May-2020

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Min Cui

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Cui

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