

## 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)  
Min

2. Surname (Last Name)  
Zhao

3. Date  
01-July-2020

4. Are you the corresponding author?

Yes  No

Corresponding Author's Name  
Lijuan Liu

5. Manuscript Title  
Cytomegalovirus (CMV) infection in HIV/AIDS patients and diagnostic values of CMV-DNA detection across different sample types

6. Manuscript Identifying Number (if you know it)

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Dr. Zhao 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) Chuanshang	2. Surname (Last Name) Li	3. Date 01-July-2020
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Lijuan Liu
5. Manuscript Title Cytomegalovirus (CMV) infection in HIV/AIDS patients and diagnostic values of CMV-DNA detection from different types of clinical sample		
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Dr. Zhuo has nothing to disclose.

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Qinguang

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Li

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01-July-2020

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Lijuan

2. Surname (Last Name)  
Liu

3. Date  
01-July-2020

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