

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)
Yu

2. Surname (Last Name)
Zhu

3. Date
10-April-2020

4. Are you the corresponding author?

☐ Yes

☒ No

Corresponding Author's Name
Li-Jing Zhu

5. Manuscript Title

Ineffective communication equals no communication: A case report of splenic hyperfunction combined with pseudothrombocytopenia

6. Manuscript Identifying Number (if you know it)

APM-19-295

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Dr. Zhu has nothing to disclose.

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Section 1. Identifying Information

1. Given Name (First Name)

Yan

2. Surname (Last Name)

Pan

3. Date

10-April-2020

4. Are you the corresponding author?

☐ Yes

☒ No

Corresponding Author's Name

Li-Jing Zhu

5. Manuscript Title

Ineffective communication equals no communication: A case report of splenic hyperfunction combined with pseudothrombocytopenia

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Pan-Fei

2. Surname (Last Name)

Hou

3. Date

10-April-2020

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☐ Yes

☒ No

Corresponding Author's Name

Li-Jing Zhu

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Li-Jing

2. Surname (Last Name)
Zhu

3. Date
10-April-2020

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