

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) Mengying	2. Surname (Last Name) Zhang	3. Date 28-May-2020
4. Are you the corresponding author? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Corresponding Author's Name Jun Zhou
5. Manuscript Title Adult-onset Still's disease presenting as fever of unknown origin: a single-center retrospective observational study from China		
6. Manuscript Identifying Number (if you know it) 2490		

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Are there any relevant conflicts of interest? ☐ Yes ☒ No

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Dr. Zhang has nothing to disclose.

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Section 1. Identifying Information

1. Given Name (First Name)

Yaman

2. Surname (Last Name)

Wang

3. Date

28-May-2020

4. Are you the corresponding author?

☐ Yes

☒ No

Corresponding Author's Name

Jun Zhou

5. Manuscript Title

Adult-onset Still's disease presenting as fever of unknown origin: a single-center retrospective observational study from China

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Jie

2. Surname (Last Name)
Li

3. Date
28-May-2020

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☐ Yes

☒ No

Corresponding Author's Name
Jun Zhou

5. Manuscript Title

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