

ICMJE Form for Disclosure of Potential Conflicts of Interest

Instructions

The purpose of this form is to provide readers of your manuscript with information about your other interests that could influence how they receive and understand your work. The form is designed to be completed electronically and stored electronically. It contains programming that allows appropriate data display. Each author should submit a separate form and is responsible for the accuracy and completeness of the submitted information. The form is in six parts.

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4. Intellectual Property.

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Section 1.

Identifying Information

1. Given Name (First Name)

Kana

2. Surname (Last Name)

Wang

3. Date

27-September-2020

4. Are you the corresponding author?

☐ Yes

☒ No

Corresponding Author's Name

Haiyan Yu

5. Manuscript Title

Successful deliveries of uterine prolapse in two primigravid women after obstetric management and perinatal care : case reports and literature review

6. Manuscript Identifying Number (if you know it)

APM-20-1322-R1

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Section 1. Identifying Information

1. Given Name (First Name) Jian	2. Surname (Last Name) Zhang	3. Date 27-September-2020
4. Are you the corresponding author? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Corresponding Author's Name Haiyan Yu
5. Manuscript Title Successful deliveries of uterine prolapse in two primigravid women after obstetric management and perinatal care : case reports and literature review		
6. Manuscript Identifying Number (if you know it) APM-20-1322-R1		

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1. Given Name (First Name) Tingting	2. Surname (Last Name) Xu	3. Date 28-September-2020
4. Are you the corresponding author? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Corresponding Author's Name Haiyan Yu
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Identifying Information

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Haiyan

2. Surname (Last Name)

Yu

3. Date

28-September-2020

4. Are you the corresponding author?

☒ Yes ☐ No

5. Manuscript Title

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6. Manuscript Identifying Number (if you know it)

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