

## 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) Pinglin	2. Surname (Last Name) lai	3. Date 27-May-2020
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Xiaochun Bai
5. Manuscript Title Deletion of TSC1 in limb bud mesenchyme causes chondrodysplasia and severe knee joint osteoarthritis in mice		
6. Manuscript Identifying Number (if you know it) AOJ-17-21		

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Are there any relevant conflicts of interest?  Yes  No

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Dr. lai has nothing to disclose.

### Evaluation and Feedback

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1. Given Name (First Name) Jiansen	2. Surname (Last Name) lu	3. Date 27-May-2020
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Xiaochun Bai
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Dr. Lu has nothing to disclose.

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1. Given Name (First Name)

Xiaochun

2. Surname (Last Name)

Bai

3. Date

27-May-2020

4. Are you the corresponding author?

Yes  No

5. Manuscript Title

Deletion of TSC1 in limb bud mesenchyme causes chondrodysplasia and severe knee joint osteoarthritis in mice

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