

ICMJE DISCLOSURE FORM

Date: 10/11/2021

Your Name: Chengcheng Zheng

Manuscript Title: False-negative aldosterone-to-renin ratio in a primary aldosteronism patient complicated with primary polydipsia: case report

Manuscript number (if known): GS-21-607

In the interest of transparency, we ask you to disclose all relationships/activities/interests listed below that are related to the content of your manuscript. "Related" means any relation with for-profit or not-for-profit third parties whose interests may be affected by the content of the manuscript. Disclosure represents a commitment to transparency and does not necessarily indicate a bias. If you are in doubt about whether to list a relationship/activity/interest, it is preferable that you do so.

The following questions apply to the author's relationships/activities/interests as they relate to the current manuscript only.

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Time frame: Since the initial planning of the work			
1	All support for the present manuscript (e.g., funding, provision of study materials, medical writing, article processing charges, etc.) No time limit for this item.	the 1.3.5 project for disciplines of West China Hospital, Sichuan Uni numbers ZYGD18022)	The cost of purchasing CYP11B1 antibody and anti-CYP11B2 antibody
Time frame: past 36 months			
2	Grants or contracts from any entity (if not indicated in item #1 above).	<u> X </u> None	
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4	Consulting fees	<u> X </u> None	

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Date: 10/11/2021

Your Name: Lianling Zhao

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Date: 10/11/2021

Your Name: Chang Zheng

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Your Name: Yan Ren

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Your Name: Haoming Tian

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Your Name: Tao Chen

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