

ICMJE DISCLOSURE FORM

Date: 12/7/2021

Your Name: Rui Tang

Manuscript Title: Safety analysis of COVID-19 vaccines in liver transplant recipients: a two-center study

Manuscript number (if known): HBSN-21-392

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.

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Time frame: past 36 months			
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4	Consulting fees	None	

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13	Other financial or non-financial interests	None	

Please summarize the above conflict of interest in the following box:

No conflict of interest to declare.

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X I certify that I have answered every question and have not altered the wording of any of the questions on this form.

ICMJE DISCLOSURE FORM

Date: 12/7/2021

Your Name: Chao Li

Manuscript Title: Safety analysis of COVID-19 vaccines in liver transplant recipients: a two-center study

Manuscript number (if known): HBSN-21-392

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ICMJE DISCLOSURE FORM

Date: 12/7/2021

Your Name: Guangdong Wu

Manuscript Title: Safety analysis of COVID-19 vaccines in liver transplant recipients: a two-center study

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ICMJE DISCLOSURE FORM

Date: 12/7/2021

Your Name: Xuan Tong

Manuscript Title: Safety analysis of COVID-19 vaccines in liver transplant recipients: a two-center study

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ICMJE DISCLOSURE FORM

Date: 12/7/2021

Your Name: Lihan Yu

Manuscript Title: Safety analysis of COVID-19 vaccines in liver transplant recipients: a two-center study

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Date: 12/7/2021

Your Name: Huayuan Hao

Manuscript Title: Safety analysis of COVID-19 vaccines in liver transplant recipients: a two-center study

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Date: 12/7/2021

Your Name: Rui Liao

Manuscript Title: Safety analysis of COVID-19 vaccines in liver transplant recipients: a two-center study

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Date: 12/7/2021

Your Name: Yucheng Hou

Manuscript Title: Safety analysis of COVID-19 vaccines in liver transplant recipients: a two-center study

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Date: 12/7/2021

Your Name: Jun Li

Manuscript Title: Safety analysis of COVID-19 vaccines in liver transplant recipients: a two-center study

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ICMJE DISCLOSURE FORM

Date: 12/7/2021

Your Name: Wenping Zhao

Manuscript Title: Safety analysis of COVID-19 vaccines in liver transplant recipients: a two-center study

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Date: 12/7/2021

Your Name: Tieyan Fan

Manuscript Title: Safety analysis of COVID-19 vaccines in liver transplant recipients: a two-center study

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ICMJE DISCLOSURE FORM

Date: 12/7/2021

Your Name: Leida Zhang

Manuscript Title: Safety analysis of COVID-19 vaccines in liver transplant recipients: a two-center study

Manuscript number (if known): HBSN-21-392

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Date: 12/7/2021

Your Name: Qian Lu

Manuscript Title: Safety analysis of COVID-19 vaccines in liver transplant recipients: a two-center study

Manuscript number (if known): HBSN-21-392

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