Date	e:2022/8/8	3		
You	r Name:Sisi Zh	ou		
Mar	nuscript Title: Sheng-Xi	ue-Xiao-Ban Capsule–indu	iced ischemic colitis and pulmonary embolism in an idio	pathic
	mbocytopenic purpura pati			
Mar	nuscript number (if known):			
rela part to ti	ted to the content of your nices whose interests may be	nanuscript. "Related" mea affected by the content o ecessarily indicate a bias.	relationships/activities/interests listed below that are ans any relation with for-profit or not-for-profit third of the manuscript. Disclosure represents a commitment If you are in doubt about whether to list a so.	
	following questions apply to nuscript only.	o the author's relationshi	ps/activities/interests as they relate to the <u>current</u>	
to tl		nsion, you should declare	defined broadly. For example, if your manuscript pertai all relationships with manufacturers of antihypertensiv he manuscript.	
	em #1 below, report all sup time frame for disclosure is	=	d in this manuscript without time limit. For all other ite	ms,
		Name all entities with	Specifications/Comments	
		whom you have this	(e.g., if payments were made to you or to your	
		relationship or indicate	institution)	
		none (add rows as	·	
		needed)		
		Time frame: Since the initia	al planning of the work	
1	All support for the present	XNone		
	manuscript (e.g., funding,			
	provision of study materials, medical writing, article			
	processing charges, etc.)			
	No time limit for this item.			
		Time frame: pas	t 36 months	
2	Grants or contracts from	XNone		
	any entity (if not indicated			
	in item #1 above).			
3	Royalties or licenses	XNone		

Consulting fees

X\_\_None

5	Payment or honoraria for lectures, presentations,	XNone				
	speakers bureaus,					
	manuscript writing or					
	educational events	V. None				
6	Payment for expert testimony	XNone				
	testimony					
7	Support for attending meetings and/or travel	XNone				
8	Patents planned, issued or	XNone				
	pending					
9	Participation on a Data	X None				
	Safety Monitoring Board or					
	Advisory Board					
10	Leadership or fiduciary role	XNone				
	in other board, society, committee or advocacy					
	group, paid or unpaid					
11	Stock or stock options	XNone				
	_					
12	Receipt of equipment, materials, drugs, medical	XNone				
	writing, gifts or other					
	services					
13	Other financial or non-	XNone				
	financial interests					
	Please summarize the above conflict of interest in the following box:					
Plea	ase summarize the above co	nflict of interest in the follo	owing box:			
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Date	e:2022/8/8	3	
	r Name:Quan		
Man	nuscript Title: Sheng-X	ue-Xiao-Ban Capsule–indu	iced ischemic colitis and pulmonary embolism in an idiopathic
thro	mbocytopenic purpura pati	ent: a rare case report	
Man	nuscript number (if known):		
relat part to tr	ted to the content of your n ies whose interests may be	nanuscript. "Related" mea affected by the content o ecessarily indicate a bias.	relationships/activities/interests listed below that are ans any relation with for-profit or not-for-profit third of the manuscript. Disclosure represents a commitment of the same in doubt about whether to list a so.
	following questions apply touscript only.	o the author's relationshi	ps/activities/interests as they relate to the <u>current</u>
to th med In ite	ne epidemiology of hyperter lication, even if that medica	nsion, you should declare tion is not mentioned in t port for the work reporte	defined broadly. For example, if your manuscript pertains all relationships with manufacturers of antihypertensive the manuscript.  d in this manuscript without time limit. For all other items,
		Name all entities with	Specifications/Comments
		whom you have this	(e.g., if payments were made to you or to your
		relationship or indicate	institution)
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		needed)	
		Time frame: Since the initia	al planning of the work
1	All support for the present	XNone	
	manuscript (e.g., funding,		
	provision of study materials,		
	medical writing, article		
	processing charges, etc.)		
	No time limit for this item.		
		Time frame: pas	t 36 months
2	Grants or contracts from	XNone	
	any entity (if not indicated		
	in item #1 above).		
3	Royalties or licenses	XNone	
4	Consulting fees	XNone	

5	Payment or honoraria for lectures, presentations,	XNone	
	speakers bureaus, manuscript writing or educational events		
6	Payment for expert	XNone	
	testimony		
7	Support for attending meetings and/or travel	XNone	
8	Patents planned, issued or pending	XNone	
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9	Participation on a Data	XNone	
	Safety Monitoring Board or		
10	Advisory Board  Leadership or fiduciary role	V. None	
10	in other board, society,	XNone	
	committee or advocacy		
	group, paid or unpaid		
11	Stock or stock options	XNone	
12	Receipt of equipment,	X None	
	materials, drugs, medical		
	writing, gifts or other		
12	services	V. Name	
13	Other financial or non- financial interests	XNone	
	iniancial interests		
Plea	ase summarize the above co	nflict of interest in the foll	owing box:
N	lone.		

Dat	e:2022/8/8	3 <u></u>	
	ır Name:Yanfe		
Ma	nuscript Title: Sheng-X	ue-Xiao-Ban Capsule–indı	iced ischemic colitis and pulmonary embolism in an idiopathic
thro	ombocytopenic purpura pati	ent: a rare case report	<del></del>
Ma	nuscript number (if known):		
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			relationships/activities/interests listed below that are any relation with for-profit or not-for-profit third
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	itionship/activity/interest, it	=	
	icionsinp, activity, interest, it	is preferable that you do	. 30.
The	following questions apply t	o the author's relationshi	ps/activities/interests as they relate to the <u>current</u>
	nuscript only.		<u></u>
The	author's relationships/activ	vities/interests should be	defined broadly. For example, if your manuscript pertains
		-	all relationships with manufacturers of antihypertensive
	dication, even if that medica		
In it	tem #1 below, report all sup	port for the work reporte	d in this manuscript without time limit. For all other items,
the	time frame for disclosure is	the past 36 months.	
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		Name all entities with	Specifications/Comments
		whom you have this	(e.g., if payments were made to you or to your
		relationship or indicate none (add rows as	institution)
		needed)	
		Time frame: Since the initia	al planning of the work
1	All support for the present	X None	
_	manuscript (e.g., funding,		
	provision of study materials,		
	medical writing, article		
	processing charges, etc.)		
	No time limit for this item.		
		Time frame: pas	at 36 months
2	Grants or contracts from	XNone	
	any entity (if not indicated		
2	in item #1 above).	V No.	
3	Royalties or licenses	XNone	
4	Consulting fees	XNone	
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5	Payment or honoraria for lectures, presentations,	XNone	
	speakers bureaus, manuscript writing or educational events		
6	Payment for expert	XNone	
	testimony		
7	Support for attending meetings and/or travel	XNone	
8	Patents planned, issued or pending	XNone	
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9	Participation on a Data	XNone	
	Safety Monitoring Board or		
10	Advisory Board  Leadership or fiduciary role	V. None	
10	in other board, society,	XNone	
	committee or advocacy		
	group, paid or unpaid		
11	Stock or stock options	XNone	
12	Receipt of equipment,	X None	
	materials, drugs, medical		
	writing, gifts or other		
12	services	V. Name	
13	Other financial or non- financial interests	XNone	
	iniancial interests		
Plea	ase summarize the above co	nflict of interest in the foll	owing box:
N	lone.		

Date	e:2022/8/8	3	
	r Name:Yihan		
Man	nuscript Title: Sheng-Xi	ue-Xiao-Ban Capsule–indu	aced ischemic colitis and pulmonary embolism in an idiopathic
thro	mbocytopenic purpura pati	ent: a rare case report	
Man	nuscript number (if known):		
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	following questions apply to suscript only.	o the author's relationshi	ps/activities/interests as they relate to the <u>current</u>
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	em #1 below, report all sup time frame for disclosure is	=	d in this manuscript without time limit. For all other items,
		Name all entities with	Specifications/Comments
		whom you have this	(e.g., if payments were made to you or to your
		relationship or indicate	institution)
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		needed)	
		Time frame: Since the initial	al planning of the work
1	All support for the present	X None	
	manuscript (e.g., funding,		
	provision of study materials,		
	medical writing, article		
	processing charges, etc.)		
	No time limit for this item.		
		Time frame: pas	at 36 months
2	Grants or contracts from	XNone	
	any entity (if not indicated		
	in item #1 above).		
3	Royalties or licenses	XNone	
4	Consulting fees	XNone	

5	Payment or honoraria for lectures, presentations,	XNone	
	speakers bureaus, manuscript writing or educational events		
6	Payment for expert	XNone	
	testimony		
7	Support for attending meetings and/or travel	XNone	
8	Patents planned, issued or pending	XNone	
	,		
9	Participation on a Data	XNone	
	Safety Monitoring Board or		
10	Advisory Board  Leadership or fiduciary role	V. None	
10	in other board, society,	XNone	
	committee or advocacy		
	group, paid or unpaid		
11	Stock or stock options	XNone	
12	Receipt of equipment,	X None	
	materials, drugs, medical		
	writing, gifts or other		
12	services	V. Name	
13	Other financial or non- financial interests	XNone	
	iniancial interests		
Plea	ase summarize the above co	nflict of interest in the foll	owing box:
N	lone.		

Dat	e:2022/8/8	3	
	r Name:Yiting		
Maı	nuscript Title: Sheng-X	ue-Xiao-Ban Capsule–indu	iced ischemic colitis and pulmonary embolism in an idiopathi
thro	mbocytopenic purpura pati	ent: a rare case report	<del></del>
Maı	nuscript number (if known):		
In ti	ne interest of transparency	we ask you to disclose all	relationships/activities/interests listed below that are
		-	ans any relation with for-profit or not-for-profit third
	_		of the manuscript. Disclosure represents a commitment
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	tionship/activity/interest, it		
The	following questions apply t	o the author's relationshi	ps/activities/interests as they relate to the <u>current</u>
mar	nuscript only.		
The	author's relationships/activ	vities/interests should be	defined broadly. For example, if your manuscript pertains
			all relationships with manufacturers of antihypertensive
med	lication, even if that medica	tion is not mentioned in t	the manuscript.
	-	-	d in this manuscript without time limit. For all other items,
the	time frame for disclosure is	the past 36 months.	
		Name all entities with	Specifications/Comments
		whom you have this	(e.g., if payments were made to you or to your
		relationship or indicate	institution)
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		needed)	
		Time frame: Since the initia	al planning of the work
1	All support for the present	XNone	
	manuscript (e.g., funding,		
	provision of study materials,		
	medical writing, article		
	processing charges, etc.)		
	No time limit for this item.		
		Time frame: pas	t 26 months
2	Grants or contracts from	X None	it 30 months
_	any entity (if not indicated		
	in item #1 above).		
3	Royalties or licenses	XNone	
4	Consulting fees	XNone	

5	Payment or honoraria for lectures, presentations,	XNone	
	speakers bureaus, manuscript writing or educational events		
6	Payment for expert	XNone	
	testimony		
7	Support for attending meetings and/or travel	XNone	
8	Patents planned, issued or pending	XNone	
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9	Participation on a Data	XNone	
	Safety Monitoring Board or		
10	Advisory Board  Leadership or fiduciary role	V. None	
10	in other board, society,	XNone	
	committee or advocacy		
	group, paid or unpaid		
11	Stock or stock options	XNone	
12	Receipt of equipment,	X None	
	materials, drugs, medical		
	writing, gifts or other		
12	services	V. Name	
13	Other financial or non- financial interests	XNone	
	iniancial interests		
Plea	ase summarize the above co	nflict of interest in the foll	owing box:
N	lone.		

Date	e:2022/8/8	3	
	r Name:Zeyu l		
Mar	nuscript Title: Sheng-X	ue-Xiao-Ban Capsule–indu	iced ischemic colitis and pulmonary embolism in an idiopathic
thro	mbocytopenic purpura pati	ent: a rare case report	<del></del>
Mar	nuscript number (if known):		
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	following questions apply t nuscript only.	o the author's relationshi	ps/activities/interests as they relate to the <u>current</u>
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	em #1 below, report all sup time frame for disclosure is		d in this manuscript without time limit. For all other items,
		Name all entities with	Specifications/Comments
		whom you have this	(e.g., if payments were made to you or to your
		relationship or indicate	institution)
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		needed)	
		Time frame: Since the initia	al planning of the work
1	All support for the present	X None	p.a.m.ng
1	manuscript (e.g., funding,	XNone	
	provision of study materials,		
	medical writing, article		
	processing charges, etc.)		
	No time limit for this item.		
	No time limit for this item.		
		Time frame: pas	t 36 months
2	Grants or contracts from	XNone	
	any entity (if not indicated		
	in item #1 above).		
3	Royalties or licenses	XNone	
4	Consulting fees	XNone	

5	Payment or honoraria for lectures, presentations,	XNone	
	speakers bureaus, manuscript writing or educational events		
6	Payment for expert	XNone	
	testimony		
7	Support for attending meetings and/or travel	XNone	
8	Patents planned, issued or pending	XNone	
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9	Participation on a Data	XNone	
	Safety Monitoring Board or		
10	Advisory Board  Leadership or fiduciary role	V. None	
10	in other board, society,	XNone	
	committee or advocacy		
	group, paid or unpaid		
11	Stock or stock options	XNone	
12	Receipt of equipment,	X None	
	materials, drugs, medical		
	writing, gifts or other		
12	services	V. Name	
13	Other financial or non- financial interests	XNone	
	iniancial interests		
Plea	ase summarize the above co	nflict of interest in the foll	owing box:
N	lone.		

Date	e:2022/8/8	3	
	r Name:Jing Y		
Man	nuscript Title: Sheng-Xi	ue-Xiao-Ban Capsule–indu	aced ischemic colitis and pulmonary embolism in an idiopathic
	mbocytopenic purpura pati		
Mar	nuscript number (if known):		
relat part to tr	ted to the content of your n ies whose interests may be	nanuscript. "Related" mea affected by the content o ecessarily indicate a bias.	relationships/activities/interests listed below that are ans any relation with for-profit or not-for-profit third of the manuscript. Disclosure represents a commitment of you are in doubt about whether to list a so.
	following questions apply touscript only.	o the author's relationshi	ps/activities/interests as they relate to the <u>current</u>
to th		nsion, you should declare	defined broadly. For example, if your manuscript pertains all relationships with manufacturers of antihypertensive the manuscript.
	em #1 below, report all sup time frame for disclosure is	-	d in this manuscript without time limit. For all other items,
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		whom you have this	(e.g., if payments were made to you or to your
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		Time frame: Since the initia	al planning of the work
1	All support for the present	X None	
	manuscript (e.g., funding,		
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2	Grants or contracts from	XNone	
	any entity (if not indicated		
	in item #1 above).		
3	Royalties or licenses	XNone	
4	Consulting fees	XNone	

5	Payment or honoraria for lectures, presentations,	XNone			
	speakers bureaus, manuscript writing or educational events				
6	Payment for expert testimony	XNone			
	testimony				
7	Support for attending meetings and/or travel	XNone			
	ŭ ,				
8	Patents planned, issued or pending	XNone			
	pending				
9	Participation on a Data	XNone			
	Safety Monitoring Board or				
10	Advisory Board  Leadership or fiduciary role	V. None			
10	in other board, society,	XNone			
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11	Stock or stock options	XNone			
12	Receipt of equipment,	XNone			
	materials, drugs, medical				
	writing, gifts or other services				
13	Other financial or non-	XNone			
	financial interests				
Plea	Please summarize the above conflict of interest in the following box:				
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