

ICMJE DISCLOSURE FORM

Date: 2022. 10. 14

Your Name: Ning Han

Manuscript Title: Hereditary spherocytosis complicated by intrahepatic cholestasis: two case reports

Manuscript number (if known): _____

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: past 36 months			
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Please summarize the above conflict of interest in the following box:

None

Please place an "X" next to the following statement to indicate your agreement:

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Date: 2022. 10. 14

Your Name: Wei Huang

Manuscript Title: Hereditary spherocytosis complicated by intrahepatic cholestasis: two case reports

Manuscript number (if known): _____

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Date: 2022. 10. 14

Your Name: Juan Wang

Manuscript Title: Hereditary spherocytosis complicated by intrahepatic cholestasis: two case reports

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Your Name: Hong Tang

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