

## ICMJE DISCLOSURE FORM

Date: Jan. 11<sup>st</sup>, 2023

Your Name: Panpan Meng

Manuscript Title: Lactobacillus treatment for geographic tongue and fissured tongue with gastritis: case report

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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In item #1 below, report all support for the work reported in this manuscript without time limit. For all other items, the time frame for disclosure is the past 36 months.

		Name all entities with whom you have this relationship or indicate none (add rows as needed)	Specifications/Comments (e.g., if payments were made to you or to your institution)
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12	Receipt of equipment, materials, drugs, medical writing, gifts or other services	<input checked="" type="checkbox"/> None	
13	Other financial or non-financial interests	<input checked="" type="checkbox"/> None	

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:

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: Jan. 11<sup>st</sup>, 2023

Your Name: Wenjuan Du

Manuscript Title: Lactobacillus treatment for geographic tongue and fissured tongue with gastritis: case report

Manuscript number (if known): \_\_\_\_\_

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## ICMJE DISCLOSURE FORM

Date: Jan. 11<sup>st</sup>, 2023

Your Name: Laiqing Xu

Manuscript Title: Lactobacillus treatment for geographic tongue and fissured tongue with gastritis: case report

Manuscript number (if known): \_\_\_\_\_

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## ICMJE DISCLOSURE FORM

Date: Jan. 11<sup>st</sup>, 2023

Your Name: Tao Liu

Manuscript Title: Lactobacillus treatment for geographic tongue and fissured tongue with gastritis: case report

Manuscript number (if known): \_\_\_\_\_

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## ICMJE DISCLOSURE FORM

Date: Mar. 07<sup>th</sup>, 2023

Your Name: Junkai Cao

Manuscript Title: Lactobacillus treatment for geographic tongue and fissured tongue with gastritis: case report

Manuscript number (if known): \_\_\_\_\_

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## ICMJE DISCLOSURE FORM

Date: Jan. 11<sup>st</sup>, 2023

Your Name: Qian Chen

Manuscript Title: Lactobacillus treatment for geographic tongue and fissured tongue with gastritis: case report

Manuscript number (if known): \_\_\_\_\_

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## ICMJE DISCLOSURE FORM

Date: Jan. 11<sup>st</sup>, 2023

Your Name: Rui Xiao

Manuscript Title: Lactobacillus treatment for geographic tongue and fissured tongue with gastritis: case report

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