

ICMJE Form for Disclosure of Potential Conflicts of Interest

Instructions

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)

Yan

2. Surname (Last Name)

Lin

3. Date

08-November-2020

4. Are you the corresponding author?

Yes

No

Corresponding Author's Name

Min Liu

5. Manuscript Title

The effectiveness of uterine parametrics measured by three-dimensional transvaginal sonography in the diagnosis of uterine cavity distortions

6. Manuscript Identifying Number (if you know it)

ATM-20-6755

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Dr. Lin has nothing to disclose.

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Section 1. Identifying Information

1. Given Name (First Name)

Min

2. Surname (Last Name)

Liu

3. Date

08-November-2020

4. Are you the corresponding author?

Yes No

5. Manuscript Title

The effectiveness of uterine parametrics measured by three-dimensional transvaginal sonography in the diagnosis of uterine cavity distortions

6. Manuscript Identifying Number (if you know it)

ATM-20-6755

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Dr. Liu has nothing to disclose.

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Section 1. Identifying Information

1. Given Name (First Name) Suhui	2. Surname (Last Name) He	3. Date 08-November-2020
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Min Liu
5. Manuscript Title The effectiveness of uterine parametrics measured by three-dimensional transvaginal sonography in the diagnosis of uterine cavity distortions		
6. Manuscript Identifying Number (if you know it) ATM-20-6755		

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1. Given Name (First Name)

Minmin

2. Surname (Last Name)

Yang

3. Date

08-November-2020

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Yes

No

Corresponding Author's Name

Min Liu

5. Manuscript Title

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Qiumei

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Wu

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08-November-2020

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Yes No

Corresponding Author's Name

Min Liu

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