

ICMJE DISCLOSURE FORM

Date: May. 21th, 2021

Your Name: Jiao-Ping Mi

Manuscript Title: Cephalometric craniofacial features of patients with Sagliker syndrome: a primary analysis of our experience

Manuscript number (if known): ATM-21-1544

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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ICMJJE DISCLOSURE FORM

Date: May. 21th, 2021

Your Name: Peng He

Manuscript Title: Cephalometric craniofacial features of patients with Sagliker syndrome: a primary analysis of our experience

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ICMJJE DISCLOSURE FORM

Date: May. 21th, 2021

Your Name: Kai Shi

Manuscript Title: Cephalometric craniofacial features of patients with Sagliker syndrome: a primary analysis of our experience

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Your Name: Shao-Yan Feng

Manuscript Title: Cephalometric craniofacial features of patients with Sagliker syndrome: a primary analysis of our experience

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Date: May. 21th, 2021

Your Name: Xian-Zhen Chen

Manuscript Title: Cephalometric craniofacial features of patients with Sagliker syndrome: a primary analysis of our experience

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Your Name: Ming-Yue Zhao

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