

ICMJE DISCLOSURE FORM

Date: 2021.12.14

Your Name: Wen-Ting Jiang

Manuscript Title:

Development and validation of an UHPLC-Orbitrap-HRMS method for rapid determination of endogenous L-carnitine in patients on hemodialysis/peritoneal dialysis and its application to promote rational drug use

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.

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		the Youth Project of Soochow Scientific Research Project	KJXW2019017
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		National Natural Science Foundation of China	82070838
		Lift Project for Discipline	XKTJ-XK202010

		Construction of the Second Affiliated Hospital of Soochow University	
		Tianqing Pharmaceutical Foundation of Jiangsu Pharmaceutical Association	TQ2021058
Time frame: past 36 months			
2	Grants or contracts from any entity (if not indicated in item #1 above).	<u> X </u> None	
3	Royalties or licenses	<u> X </u> None	
4	Consulting fees	<u> X </u> None	
5	Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or educational events	<u> X </u> None	
6	Payment for expert testimony	<u> X </u> None	
7	Support for attending meetings and/or travel	<u> X </u> None	
8	Patents planned, issued or pending	<u> X </u> None	
9	Participation on a Data Safety Monitoring Board or Advisory Board	<u> X </u> None	
10	Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid	<u> X </u> None	
11	Stock or stock options	<u> X </u> None	
12	Receipt of equipment, materials, drugs, medical	<u> X </u> None	

	writing, gifts or other services		
13	Other financial or non-financial interests	<input checked="" type="checkbox"/> None	

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ICMJE DISCLOSURE FORM

Date: 2021.12.14

Your Name: Liu-Xing Tang

Manuscript Title:

Development and validation of an UHPLC-Orbitrap-HRMS method for rapid determination of endogenous L-carnitine in patients on hemodialysis/peritoneal dialysis and its application to promote rational drug use

Manuscript number (if known): _____

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Date: 2021.12.14

Your Name: Jie Pan

Manuscript Title:

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Your Name: Cun-Jin Su

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Date: 2021.12.14

Your Name: Zhu Shen

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Date: 2021.12.14

Your Name: Zhan-Hong Hu

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Your Name: Zhou-Bing Zhan

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Your Name: Ai-Ming Shi

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13	Other financial or non-financial interests	<u> X </u> None	

Please summarize the above conflict of interest in the following box:

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

X I certify that I have answered every question and have not altered the wording of any of the questions on this form.