

## ICMJE Form for Disclosure of Potential Conflicts of Interest

### Instructions

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### Section 1. Identifying Information

1. Given Name (First Name)  
Guangju

2. Surname (Last Name)  
Ge

3. Date  
09-October-2020

4. Are you the corresponding author?

Yes  No

Corresponding Author's Name  
Liang Ma

5. Manuscript Title  
Complete urethral injury in the penile fracture: a case report and literature review

6. Manuscript Identifying Number (if you know it)  
TAU-20-1155

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1. Given Name (First Name) Huan	2. Surname (Last Name) Wang	3. Date 09-October-2020
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Liang Ma
5. Manuscript Title Complete urethral injury in the penile fracture: a case report and literature review		
6. Manuscript Identifying Number (if you know it) TAU-20-1155		

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1. Given Name (First Name) Yuanlei	2. Surname (Last Name) Chen	3. Date 09-October-2020
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Liang Ma
5. Manuscript Title Complete urethral injury in the penile fracture: a case report and literature review		
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Liang

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