

ICMJE Form for Disclosure of Potential Conflicts of Interest

Instructions

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4. Intellectual Property.

This section asks about patents and copyrights, whether pending, issued, licensed and/or receiving royalties.

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1.

Identifying Information

1. Given Name (First Name)

Yang

2. Surname (Last Name)

Luan

3. Date

22-October-2020

4. Are you the corresponding author?

☐ Yes

☒ No

Corresponding Author's Name

Tao Wang

5. Manuscript Title

Optimize the management of urological tube-related emergencies during the COVID-19 pandemic

6. Manuscript Identifying Number (if you know it)

TAU-20-1194

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☒ No

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Intellectual Property -- Patents & Copyrights

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Dr. Luan has nothing to disclose.

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1. Given Name (First Name) Yan	2. Surname (Last Name) Zhang	3. Date 22-October-2020
4. Are you the corresponding author? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Corresponding Author's Name Tao Wang
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1. Given Name (First Name) Kai	2. Surname (Last Name) Cui	3. Date 22-October-2020
4. Are you the corresponding author? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Corresponding Author's Name Tao Wang
5. Manuscript Title Optimize the management of urological tube-related emergencies during the COVID-19 pandemic		
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Are there any relevant conflicts of interest? ☐ Yes ☒ No

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Section 1.

Identifying Information

1. Given Name (First Name)

Fan

2. Surname (Last Name)

Li

3. Date

22-October-2020

4. Are you the corresponding author?

☐ Yes

☒ No

Corresponding Author's Name

Tao Wang

5. Manuscript Title

Optimize the management of urological tube-related emergencies during the COVID-19 pandemic

6. Manuscript Identifying Number (if you know it)

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Royalties: Funds are coming in to you or your institution due to your patent

ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name) Yajun	2. Surname (Last Name) Ruan	3. Date 22-October-2020
4. Are you the corresponding author? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Corresponding Author's Name Tao Wang
5. Manuscript Title Optimize the management of urological tube-related emergencies during the COVID-19 pandemic		
6. Manuscript Identifying Number (if you know it) TAU-20-1194		

Section 2. The Work Under Consideration for Publication

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Are there any relevant conflicts of interest? ☐ Yes ☒ No

Section 3. Relevant financial activities outside the submitted work.

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Are there any relevant conflicts of interest? ☐ Yes ☒ No

Section 4. Intellectual Property -- Patents & Copyrights

Do you have any patents, whether planned, pending or issued, broadly relevant to the work? ☐ Yes ☒ No

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Dr. Ruan has nothing to disclose.

Evaluation and Feedback

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name) Kun	2. Surname (Last Name) Tang	3. Date 22-October-2020
4. Are you the corresponding author? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Corresponding Author's Name Tao Wang
5. Manuscript Title Optimize the management of urological tube-related emergencies during the COVID-19 pandemic		
6. Manuscript Identifying Number (if you know it) TAU-20-1194		

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Are there any relevant conflicts of interest? ☐ Yes ☒ No

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Are there any relevant conflicts of interest? ☐ Yes ☒ No

Section 4. Intellectual Property -- Patents & Copyrights

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Dr. Tang has nothing to disclose.

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name) Hongyang	2. Surname (Last Name) Jiang	3. Date 22-October-2020
4. Are you the corresponding author? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Corresponding Author's Name Tao Wang
5. Manuscript Title Optimize the management of urological tube-related emergencies during the COVID-19 pandemic		
6. Manuscript Identifying Number (if you know it) TAU-20-1194		

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Are there any relevant conflicts of interest? ☐ Yes ☒ No

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Dr. Jiang has nothing to disclose.

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name) Hao	2. Surname (Last Name) Li	3. Date 22-October-2020
4. Are you the corresponding author? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Corresponding Author's Name Tao Wang
5. Manuscript Title Optimize the management of urological tube-related emergencies during the COVID-19 pandemic		
6. Manuscript Identifying Number (if you know it) TAU-20-1194		

Section 2. The Work Under Consideration for Publication

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Are there any relevant conflicts of interest? ☐ Yes ☒ No

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Section 4. Intellectual Property -- Patents & Copyrights

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ICMJE Form for Disclosure of Potential Conflicts of Interest

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Dr. Li has nothing to disclose.

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name) Xiaoyi	2. Surname (Last Name) Yuan	3. Date 22-October-2020
4. Are you the corresponding author? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Corresponding Author's Name Tao Wang
5. Manuscript Title Optimize the management of urological tube-related emergencies during the COVID-19 pandemic		
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Are there any relevant conflicts of interest? ☐ Yes ☒ No

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ICMJE Form for Disclosure of Potential Conflicts of Interest

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1. Given Name (First Name) Zhuo	2. Surname (Last Name) Liu	3. Date 22-October-2020
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4. Intellectual Property.

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name) Xiaming	2. Surname (Last Name) Liu	3. Date 22-October-2020
4. Are you the corresponding author? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Corresponding Author's Name Tao Wang
5. Manuscript Title Optimize the management of urological tube-related emergencies during the COVID-19 pandemic		
6. Manuscript Identifying Number (if you know it) TAU-20-1194		

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Are there any relevant conflicts of interest? ☐ Yes ☒ No

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Dr. Liu has nothing to disclose.

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1. Given Name (First Name) Gan	2. Surname (Last Name) Yu	3. Date 22-October-2020
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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name) Shengfei	2. Surname (Last Name) Xu	3. Date 22-October-2020
4. Are you the corresponding author? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Corresponding Author's Name Tao Wang
5. Manuscript Title Optimize the management of urological tube-related emergencies during the COVID-19 pandemic		
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Section 4. Intellectual Property -- Patents & Copyrights

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1.

Identifying Information

1. Given Name (First Name)

Ruibao

2. Surname (Last Name)

Chen

3. Date

22-October-2020

4. Are you the corresponding author?

☐ Yes

☒ No

Corresponding Author's Name

Tao Wang

5. Manuscript Title

Optimize the management of urological tube-related emergencies during the COVID-19 pandemic

6. Manuscript Identifying Number (if you know it)

TAU-20-1194

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name) Xiaolin	2. Surname (Last Name) Guo	3. Date 22-October-2020
4. Are you the corresponding author? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Corresponding Author's Name Tao Wang
5. Manuscript Title Optimize the management of urological tube-related emergencies during the COVID-19 pandemic		
6. Manuscript Identifying Number (if you know it) TAU-20-1194		

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Are there any relevant conflicts of interest? ☐ Yes ☒ No

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Are there any relevant conflicts of interest? ☐ Yes ☒ No

Section 4. Intellectual Property -- Patents & Copyrights

Do you have any patents, whether planned, pending or issued, broadly relevant to the work? ☐ Yes ☒ No

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Dr. Guo has nothing to disclose.

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ICMJE Form for Disclosure of Potential Conflicts of Interest

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1. Given Name (First Name) Xiaoyong	2. Surname (Last Name) Zeng	3. Date 22-October-2020
4. Are you the corresponding author? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Corresponding Author's Name Tao Wang
5. Manuscript Title Optimize the management of urological tube-related emergencies during the COVID-19 pandemic		
6. Manuscript Identifying Number (if you know it) TAU-20-1194		

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Are there any relevant conflicts of interest? ☐ Yes ☒ No

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Dr. Zeng has nothing to disclose.

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ICMJE Form for Disclosure of Potential Conflicts of Interest

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1. Given Name (First Name) Zhong	2. Surname (Last Name) Chen	3. Date 22-October-2020
4. Are you the corresponding author? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Corresponding Author's Name Tao Wang
5. Manuscript Title Optimize the management of urological tube-related emergencies during the COVID-19 pandemic		
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Dr. Chen has nothing to disclose.

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name) Zhiqiang	2. Surname (Last Name) Chen	3. Date 22-October-2020
4. Are you the corresponding author? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Corresponding Author's Name Tao Wang
5. Manuscript Title Optimize the management of urological tube-related emergencies during the COVID-19 pandemic		
6. Manuscript Identifying Number (if you know it) TAU-20-1194		

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name) Zhiquan	2. Surname (Last Name) Hu	3. Date 22-October-2020
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1. Given Name (First Name) Xiaodong	2. Surname (Last Name) Song	3. Date 22-October-2020
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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1.

Identifying Information

1. Given Name (First Name)

Zhihua

2. Surname (Last Name)

Wang

3. Date

22-October-2020

4. Are you the corresponding author?

☐ Yes

☒ No

Corresponding Author's Name

Tao Wang

5. Manuscript Title

Optimize the management of urological tube-related emergencies during the COVID-19 pandemic

6. Manuscript Identifying Number (if you know it)

TAU-20-1194

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name) Shaogang	2. Surname (Last Name) Wang	3. Date 22-October-2020
4. Are you the corresponding author? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Corresponding Author's Name Tao Wang
5. Manuscript Title Optimize the management of urological tube-related emergencies during the COVID-19 pandemic		
6. Manuscript Identifying Number (if you know it) TAU-20-1194		

Section 2. The Work Under Consideration for Publication

Did you or your institution **at any time** receive payment or services from a third party (government, commercial, private foundation, etc.) for any aspect of the submitted work (including but not limited to grants, data monitoring board, study design, manuscript preparation, statistical analysis, etc.)?

Are there any relevant conflicts of interest? ☐ Yes ☒ No

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Jihong

2. Surname (Last Name)

Liu

3. Date

22-October-2020

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☐ Yes

☒ No

Corresponding Author's Name

Tao Wang

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Tao

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Wang

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