

Instructions

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| Section 1. | Identifying Inform | ation | | |
|---|---|------------------------------------|--|----------------------------|
| 1. Given Name (First Name) No First Name | | 2. Surname (Last Name) Abdullah | | 3. Date 18-January-2021 |
| 4. Are you the corresponding author? | | Yes 🖌 No | Corresponding Author's Nam Xing Junping | ne |
| 5. Manuscript Title Hypogonadotropic hypogonadism associated with another small supernumerary marker chromosome (sSMC) derived from chromosome 22, a case report. | | | | |
| 6. Manuscript Ider TAU-20-1087-R1 | ntifying Number (if you kn (TAU-20-1147) | low it) | | |
| | | | - | |
| Section 2. | The Work Under Co | onsideration for Public | ation | |
| 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 Yes No | | | | |
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| Do you have any | patents, whether plan | ned, pending or issued, br | oadly relevant to the work? | Yes 🖌 No |



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Dr. Abdullah has nothing to disclose.

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| 1. Given Name (First Name) Cui | 2. Surname (Last Name) Li | 3. Date 18-January-2021 | | |
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| Section 1. | Identifying Inform | ation | | | |
|---|---|--------------------------------|---|--|--|
| 1. Given Name (First Name) Minggang | | 2. Surname (Last Name) Zhao | 3. Date 18-January-2021 | | |
| 4. Are you the corresponding author? | | Yes 🖌 No | Corresponding Author's Name Xing Junping | | |
| Hypogonadotro | 5. Manuscript Title Hypogonadotropic hypogonadism associated with another small supernumerary marker chromosome (sSMC) derived from chromosome 22, a case report. | | | | |
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| 1. Given Name (First Name) Xiang | | 2. Surname (Last Name) Wang | 3. Date 18-January-2021 | |
| 4. Are you the corresponding author? | | Yes 🖌 No | Corresponding Author's Name Xing Junping | |
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| 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 V No | | | | |
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Dr. Xing has nothing to disclose.

Evaluation and Feedback