

## ICMJE DISCLOSURE FORM

Date: 2021-5-12

Your Name: Jie Wang

Manuscript Title: The application of the “omental wrapping” technique with autologous onlay flap/graft ureteroplasty for the management of long ureteral strictures

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

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## ICMJE DISCLOSURE FORM

Date: 2021-5-12

Your Name: Baiyu Zhang

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## ICMJE DISCLOSURE FORM

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Your Name: Shubo Fan

Manuscript Title: The application of the “omental wrapping” technique with autologous onlay flap/graft ureteroplasty for the management of long ureteral strictures

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## ICMJE DISCLOSURE FORM

Date: 2021-5-12

Your Name: Lu Yin

Manuscript Title: The application of the “omental wrapping” technique with autologous onlay flap/graft ureteroplasty for the management of long ureteral strictures

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Your Name: Zihua Li

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Your Name: Hua Guan

Manuscript Title: The application of the “omental wrapping” technique with autologous onlay flap/graft ureteroplasty for the management of long ureteral strictures

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Date: 2021-5-12

Your Name: Kunlin Yang

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