| Date: | 6/27/2023 |
|-------------------------------|--|
| Your Name: | Yanzhao Wang |
| Manuscript Title: | Two Cases of Hemangioma with Kasabach-Merritt Phenomenon Diagnosed by Ultrasound |
| Manuscript Number (if known): | QIMS-23-81 |

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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| | | | Time frame: past 36 month | IS |
| 2 | Grants or contracts from any entity (if not indicated in item #1 above). | None | | |
| 3 | Royalties or licenses | None | | |

| 4 | Consulting fees | ⊠ None |
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| | | |
| 5 | Payment or honoraria for | □ None |
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| | presentations, speakers | |
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| 9 | Participation on a Data Safety | |
| | Monitoring Board or | |
| | Advisory Board | |
| 10 | Leadership or fiduciary role in | ⊠ None |
| | other board, | |
| | society, committee or | |
| | advocacy group, paid or unpaid | i |

| 11 | Stock or stock options | | None |
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| 12 | Receipt of equipment, materials, drugs, medical writing, gifts or other services | | None |
| 13 | Other financial or non-financial interests | | None |
| Plea 🖂 | Please place an "X" next to the following statement to indicate your agreement: I certify that I have answered every question and have not altered the wording of any of the questions on this form. | | |

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| Your Name: | Wenjing Guo |
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| Your Name: | Tiangang Li |
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