

ICMJE Form for Disclosure of Potential Conflicts of Interest

Instructions

The purpose of this form is to provide readers of your manuscript with information about your other interests that could influence how they receive and understand your work. The form is designed to be completed electronically and stored electronically. It contains programming that allows appropriate data display. Each author should submit a separate form and is responsible for the accuracy and completeness of the submitted information. The form is in six parts.

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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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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) Siyao	2. Surname (Last Name) Du	3. Date 10-May-2020
4. Are you the corresponding author? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Corresponding Author's Name Lina Zhang
5. Manuscript Title Chest lesion CT radiological features and quantitative analysis in RT-PCR turned negative and clinical symptoms resolved COVID-19 patients		
6. Manuscript Identifying Number (if you know it) QIMS-20-531		

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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Dr. Du has nothing to disclose.

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Section 1. Identifying Information

1. Given Name (First Name) Si	2. Surname (Last Name) Gao	3. Date 10-May-2020
4. Are you the corresponding author? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Corresponding Author's Name Lina Zhang
5. Manuscript Title Chest lesion CT radiological features and quantitative analysis in RT-PCR turned negative and clinical symptoms resolved COVID-19 patients		
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Dr. Gao has nothing to disclose.

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Section 1. Identifying Information

1. Given Name (First Name)

Guoliang

2. Surname (Last Name)

Huang

3. Date

10-May-2020

4. Are you the corresponding author?

☐ Yes

☒ No

Corresponding Author's Name

Lina Zhang

5. Manuscript Title

Chest lesion CT radiological features and quantitative analysis in RT-PCR turned negative and clinical symptoms resolved COVID-19 patients

6. Manuscript Identifying Number (if you know it)

QIMS-20-531

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1. Given Name (First Name)

Shu

2. Surname (Last Name)

Li

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10-May-2020

4. Are you the corresponding author?

☐ Yes

☒ No

Corresponding Author's Name

Lina Zhang

5. Manuscript Title

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QIMS-20-531

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Wei

2. Surname (Last Name)
Chong

3. Date
10-May-2020

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☐ Yes

☒ No

Corresponding Author's Name
Lina Zhang

5. Manuscript Title
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Section 1. Identifying Information

1. Given Name (First Name)
Ziyi

2. Surname (Last Name)
Jia

3. Date
10-May-2020

4. Are you the corresponding author?

☐ Yes☒ No

Corresponding Author's Name
Lina Zhang

5. Manuscript Title
Chest lesion CT radiological features and quantitative analysis in RT-PCR turned negative and clinical symptoms resolved COVID-19 patients

6. Manuscript Identifying Number (if you know it)
QIMS-20-531

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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)
Gang

2. Surname (Last Name)
Hou

3. Date
10-May-2020

4. Are you the corresponding author?

☐ Yes

☒ No

Corresponding Author's Name
Lina Zhang

5. Manuscript Title
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Yi Xiang J

2. Surname (Last Name)

Wang

3. Date

10-May-2020

4. Are you the corresponding author?

☐ Yes

☒ No

Corresponding Author's Name

Lina Zhang

5. Manuscript Title

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1. Given Name (First Name)

Lina

2. Surname (Last Name)

Zhang

3. Date

10-May-2020

4. Are you the corresponding author?

☒ Yes ☐ No

5. Manuscript Title

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