

## ICMJE Form for Disclosure of Potential Conflicts of Interest

### Instructions

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#### 2. The work under consideration for publication.

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## ICMJE Form for Disclosure of Potential Conflicts of Interest

### Section 1. Identifying Information

1. Given Name (First Name)

Zongyuan

2. Surname (Last Name)

Jiang

3. Date

26-August-2020

4. Are you the corresponding author?

Yes  No

5. Manuscript Title

Bilateral postaxial polydactyly with hallux valgus in both feet: case presentation in an adult

6. Manuscript Identifying Number (if you know it)

QIMS-20-227

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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) Anxiong	2. Surname (Last Name) Liu	3. Date 26-August-2020
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Zongyuan Jiang
5. Manuscript Title Bilateral postaxial polydactyly with hallux valgus in both feet: case presentation in an adult		
6. Manuscript Identifying Number (if you know it) QIMS-20-227		

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Dr. Liu has nothing to disclose.

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1. Given Name (First Name) Yanggang	2. Surname (Last Name) Ouyang	3. Date 26-August-2020
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Zongyuan Jiang
5. Manuscript Title Bilateral postaxial polydactyly with hallux valgus in both feet: case presentation in an adult		
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1. Given Name (First Name)

Hai

2. Surname (Last Name)

Liang

3. Date

26-August-2020

4. Are you the corresponding author?

Yes

No

Corresponding Author's Name

Zongyuan Jiang

5. Manuscript Title

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