

ICMJE Form for Disclosure of Potential Conflicts of Interest

Instructions

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Section 1. Identifying Information

1. Given Name (First Name) Aiyun	2. Surname (Last Name) Song	3. Date 15-November-2020
4. Are you the corresponding author? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Corresponding Author's Name Jing Chen, Qing Cao
5. Manuscript Title Exploration of the relationship between intestinal flora changes and gut aGVHD after HSCT		
6. Manuscript Identifying Number (if you know it) TP-20-208		

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1. Given Name (First Name) Nan	2. Surname (Last Name) Shen	3. Date 15-November-2020
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4. Are you the corresponding author? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
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1. Given Name (First Name) Changying	2. Surname (Last Name) Luo	3. Date 15-November-2020
4. Are you the corresponding author? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Corresponding Author's Name Jing Chen, Qing Cao
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1. Given Name (First Name) Jianmin	2. Surname (Last Name) Wang	3. Date 15-November-2020
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Jing Chen, Qing Cao
5. Manuscript Title Exploration of the relationship between intestinal flora changes and gut aGVHD after HSCT		
6. Manuscript Identifying Number (if you know it) TP-20-208		

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Section 1. Identifying Information

1. Given Name (First Name)

Jing

2. Surname (Last Name)

Chen

3. Date

15-November-2020

4. Are you the corresponding author?

☒ Yes ☐ No

5. Manuscript Title

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