

## ICMJE DISCLOSURE FORM

Date:      May 7<sup>th</sup>, 2021     

Your Name:     Xingtong Dong    

Manuscript Title:     Two unusual cases of autologous HSCT related TMA with kidney injury    

Manuscript number (if known):     APM-21-226    

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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I certify that I have answered every question and have not altered the wording of any of the questions on this form.

## ICMJE DISCLOSURE FORM

Date:     May 7<sup>th</sup>, 2021    

Your Name:     Qiang Jia    

Manuscript Title: **Two unusual cases of autologous HSCT related TMA with kidney injury**

Manuscript number (if known): **APM-21-226**

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Date:     May 7<sup>th</sup>, 2021    

Your Name:     Wenjing Fu    

Manuscript Title: **Two unusual cases of autologous HSCT related TMA with kidney injury**

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## ICMJE DISCLOSURE FORM

Date:     May 7<sup>th</sup>, 2021    

Your Name:     Yinping Li    

Manuscript Title: **Two unusual cases of autologous HSCT related TMA with kidney injury**

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Date:     May 7<sup>th</sup>, 2021    

Your Name:     Yubing Wen    

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Date: May 7<sup>th</sup>, 2021

Your Name: Aihua Zhang

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