

ICMJE DISCLOSURE FORM

Date: 13/04/2023

Your Name: Wei Chen

Manuscript Title: Nutritional status in patients with active pulmonary tuberculosis and new nutritional risk screening model for active tuberculosis: A national, multicenter, cross-sectional study in China

Manuscript number (if known): _____

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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No conflict of interest to declare

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ICMJE DISCLOSURE FORM

Date: 13/04/2023

Your Name: Qin Ding

Manuscript Title: Nutritional status in patients with active pulmonary tuberculosis and new nutritional risk screening model for active tuberculosis: A national, multicenter, cross-sectional study in China

Manuscript number (if known): _____

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ICMJE DISCLOSURE FORM

Date: 13/04/2023

Your Name: Sheng-Kang Zhang

Manuscript Title: Nutritional status in patients with active pulmonary tuberculosis and new nutritional risk screening model for active tuberculosis: A national, multicenter, cross-sectional study in China

Manuscript number (if known): _____

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ICMJE DISCLOSURE FORM

Date: 13/04/2023

Your Name: Zhao-Wei Tong

Manuscript Title: Nutritional status in patients with active pulmonary tuberculosis and new nutritional risk screening model for active tuberculosis: A national, multicenter, cross-sectional study in China

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ICMJE DISCLOSURE FORM

Date: 13/04/2023

Your Name: Fei Ren

Manuscript Title: Nutritional status in patients with active pulmonary tuberculosis and new nutritional risk screening model for active tuberculosis: A national, multicenter, cross-sectional study in China

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ICMJE DISCLOSURE FORM

Date: 13/04/2023

Your Name: Chun-Mei Hu

Manuscript Title: Nutritional status in patients with active pulmonary tuberculosis and new nutritional risk screening model for active tuberculosis: A national, multicenter, cross-sectional study in China

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Date: 13/04/2023

Your Name: Shi-Fang Su

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Date: 13/04/2023

Your Name: Xiao-Hong Kan

Manuscript Title: Nutritional status in patients with active pulmonary tuberculosis and new nutritional risk screening model for active tuberculosis: A national, multicenter, cross-sectional study in China

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ICMJE DISCLOSURE FORM

Date: 13/04/2023

Your Name: Han-Juan Cao

Manuscript Title: Nutritional status in patients with active pulmonary tuberculosis and new nutritional risk screening model for active tuberculosis: A national, multicenter, cross-sectional study in China

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Date: 13/04/2023

Your Name: Rong Li

Manuscript Title: Nutritional status in patients with active pulmonary tuberculosis and new nutritional risk screening model for active tuberculosis: A national, multicenter, cross-sectional study in China

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Your Name: Gang Fang

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Please summarize the above conflict of interest in the following box:

No conflict of interest to declare

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.

ICMJE DISCLOSURE FORM

Date: 13/04/2023

Your Name: Xin-Zhi Guo

Manuscript Title: Nutritional status in patients with active pulmonary tuberculosis and new nutritional risk screening model for active tuberculosis: A national, multicenter, cross-sectional study in China

Manuscript number (if known): _____

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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ICMJE DISCLOSURE FORM

Date: 13/04/2023

Your Name: Xiao-Hong Chen

Manuscript Title: Nutritional status in patients with active pulmonary tuberculosis and new nutritional risk screening model for active tuberculosis: A national, multicenter, cross-sectional study in China

Manuscript number (if known): _____

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ICMJE DISCLOSURE FORM

Date: 13/04/2023

Your Name: Gu-Qing Zhu

Manuscript Title: Nutritional status in patients with active pulmonary tuberculosis and new nutritional risk screening model for active tuberculosis: A national, multicenter, cross-sectional study in China

Manuscript number (if known): _____

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ICMJE DISCLOSURE FORM

Date: 13/04/2023

Your Name: Qian Yao

Manuscript Title: Nutritional status in patients with active pulmonary tuberculosis and new nutritional risk screening model for active tuberculosis: A national, multicenter, cross-sectional study in China

Manuscript number (if known): _____

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ICMJE DISCLOSURE FORM

Date: 13/04/2023

Your Name: Hai-Yan Luo

Manuscript Title: Nutritional status in patients with active pulmonary tuberculosis and new nutritional risk screening model for active tuberculosis: A national, multicenter, cross-sectional study in China

Manuscript number (if known): _____

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ICMJE DISCLOSURE FORM

Date: 13/04/2023

Your Name: Han-Mei Tang

Manuscript Title: Nutritional status in patients with active pulmonary tuberculosis and new nutritional risk screening model for active tuberculosis: A national, multicenter, cross-sectional study in China

Manuscript number (if known): _____

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ICMJE DISCLOSURE FORM

Date: 13/04/2023

Your Name: Jian-Yan Lin

Manuscript Title: Nutritional status in patients with active pulmonary tuberculosis and new nutritional risk screening model for active tuberculosis: A national, multicenter, cross-sectional study in China

Manuscript number (if known): _____

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ICMJE DISCLOSURE FORM

Date: 04/04/2023

Your Name: Luca Bertolaccini

Manuscript Title: Nutritional status in patients with active pulmonary tuberculosis and new nutritional risk screening model for active tuberculosis: A national, multicenter, cross-sectional study in China

Manuscript number (if known): _____

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ICMJE DISCLOSURE FORM

Date: 13/04/2023

Your Name: Lin Fan

Manuscript Title: Nutritional status in patients with active pulmonary tuberculosis and new nutritional risk screening model for active tuberculosis: A national, multicenter, cross-sectional study in China

Manuscript number (if known): _____

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