

ICMJE DISCLOSURE FORM

Date: April 24th, 2024

Your Name: Han-Ting Li

Manuscript Title: Clinical and Radiological Features of a Cluster of Immunocompetent Adolescents with Varicella Pneumonia: A Descriptive Study

Manuscript number (if known): JTD-24-149

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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4	Consulting fees	__X__ None	

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

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ICMJE DISCLOSURE FORM

Date: April 24th, 2024

Your Name: Lu Chen

Manuscript Title: Clinical and Radiological Features of a Cluster of Immunocompetent Adolescents with Varicella Pneumonia: A Descriptive Study

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ICMJE DISCLOSURE FORM

Date: April 24th, 2024

Your Name: Le-Qing Chen

Manuscript Title: Clinical and Radiological Features of a Cluster of Immunocompetent Adolescents with Varicella Pneumonia: A Descriptive Study

Manuscript number (if known): JTD-24-149

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ICMJE DISCLOSURE FORM

Date: April 24th, 2024

Your Name: Yan-Qing Fan

Manuscript Title: Clinical and Radiological Features of a Cluster of Immunocompetent Adolescents with Varicella Pneumonia: A Descriptive Study

Manuscript number (if known): JTD-24-149

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Date: April 24th, 2024

Your Name: Yu-Ting Zheng

Manuscript Title: Clinical and Radiological Features of a Cluster of Immunocompetent Adolescents with Varicella Pneumonia: A Descriptive Study

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Date: April 24th, 2024

Your Name: Qin-Yue Luo

Manuscript Title: Clinical and Radiological Features of a Cluster of Immunocompetent Adolescents with Varicella Pneumonia: A Descriptive Study

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Date: April 24th,2024

Your Name: Xiao-Yu Han

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Date: April 24th, 2024

Your Name: He-Shui Shi

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