

ICMJE Form for Disclosure of Potential Conflicts of Interest

Instructions

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4. Intellectual Property.

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name) Xuehong	2. Surname (Last Name) Diao	3. Date 17-August-2017
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Jia Zhan; Lin Chen
5. Manuscript Title Quantification of solid hypo-echoic thyroid nodule enhancement with contrast-enhanced ultrasound		
6. Manuscript Identifying Number (if you know it)		

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Dr. Diao has nothing to disclose.

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Section 1. Identifying Information

1. Given Name (First Name)
Jia

2. Surname (Last Name)
Zhan

3. Date
17-August-2017

4. Are you the corresponding author? Yes No

5. Manuscript Title
Quantification of solid hypo-echoic thyroid nodule enhancement with contrast-enhanced ultrasound

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Dr. Zhan has nothing to disclose.

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1. Given Name (First Name)
Lin

2. Surname (Last Name)
Chen

3. Date
17-August-2017

4. Are you the corresponding author? Yes No

5. Manuscript Title
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