

Instructions

The purpose of this form is to provide readers of your manuscript with information about your other interests that could influence how they receive and understand your work. The form is designed to be completed electronically and stored electronically. It contains programming that allows appropriate data display. Each author should submit a separate form and is responsible for the accuracy and completeness of the submitted information. The form is in six parts.

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Section 1. Identifying Inform	mation	
1. Given Name (First Name) Zhifen	2. Surname (Last Name) Zhang	3. Date 17-November-2019
4. Are you the corresponding author?	✓ Yes No	
5. Manuscript Title Epithelioid trophoblastic tumor found	on hysteroscopy	
6. Manuscript Identifying Number (if you l	know it)	
Section 2. The Work Under 0	Consideration for Publication	
	eive payment or services from a third party (government, c ig but not limited to grants, data monitoring board, study c rest? Yes V	
Section 3. Relevant financia	l activities outside the submitted work.	
Place a check in the appropriate boxes of compensation) with entities as desc	in the table to indicate whether you have financial re ribed in the instructions. Use one line for each entity; eport relationships that were present during the 36	add as many lines as you need by
Section 4. Intellectual Prope	erty Patents & Copyrights	
Do you have any patents, whether pla	nned, pending or issued, broadly relevant to the worl	☐ Yes ✓ No</th



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Section 3.	Relevant financial	activities outside the s	submitted work.	
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Sun 1



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Section 3.	Relevant financial	activities outside the s	submitted work.
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