

ICMJE Form for Disclosure of Potential Conflicts of Interest

Instructions

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)

Jianrong

2. Surname (Last Name)

Zhang

3. Date

30-January-2018

4. Are you the corresponding author?

Yes No

5. Manuscript Title

China's universal healthcare reform: the first phase [2009–2011] of the ambitious plan

6. Manuscript Identifying Number (if you know it)

JHMHP-18-1

Section 2. The Work Under Consideration for Publication

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Are there any relevant conflicts of interest? Yes No

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Section 6. Disclosure Statement

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Dr. Zhang has nothing to disclose.

Evaluation and Feedback

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name) Huijun	2. Surname (Last Name) Zeng	3. Date 30-January-2018
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Jianrong Zhang
5. Manuscript Title China's universal healthcare reform: the first phase [2009–2011] of the ambitious plan		
6. Manuscript Identifying Number (if you know it) JHMHP-18-1		

Section 2. The Work Under Consideration for Publication

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Are there any relevant conflicts of interest? Yes No

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Section 4. Intellectual Property -- Patents & Copyrights

Do you have any patents, whether planned, pending or issued, broadly relevant to the work? Yes No

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Dr. Zeng has nothing to disclose.

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1. Given Name (First Name) Tiange	2. Surname (Last Name) Yu	3. Date 30-January-2018
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Jianrong Zhang
5. Manuscript Title China's universal healthcare reform: the first phase [2009–2011] of the ambitious plan		
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