

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) Jia-Yi	2. Surname (Last Name) Zhang	3. Date 01-July-2017
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Min Gu
5. Manuscript Title Graft survival of en bloc versus single kidney transplantation from small pediatric donors: a meta-analysis with trial sequential analysis		
6. Manuscript Identifying Number (if you know it)		

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Are there any relevant conflicts of interest? Yes No

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Dr. Zhang has nothing to disclose.

Evaluation and Feedback

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1. Given Name (First Name) Heng-Cheng	2. Surname (Last Name) Zhang	3. Date 01-July-2017
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5. Manuscript Title Graft survival of en bloc versus single kidney transplantation from small pediatric donors: a meta-analysis with trial sequential analysis		
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Section 1. Identifying Information

1. Given Name (First Name)
Chuan-Jian

2. Surname (Last Name)
Suo

3. Date
01-July-2017

4. Are you the corresponding author?

Yes No

Corresponding Author's Name
Min Gu

5. Manuscript Title

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Min

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