

ICMJE Form for Disclosure of Potential Conflicts of Interest

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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4. Intellectual Property.

This section asks about patents and copyrights, whether pending, issued, licensed and/or receiving royalties.

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Royalties: Funds are coming in to you or your institution due to your patent

ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)
QIN JIAN

2. Surname (Last Name)
LOW

3. Date
23-October-2018

4. Are you the corresponding author? Yes No

5. Manuscript Title
A case report on Kocuria kristinae continuous ambulatory peritoneal dialysis peritonitis

6. Manuscript Identifying Number (if you know it)

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Section 6. Disclosure Statement

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Dr. LOW has nothing to disclose.

Evaluation and Feedback

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1. Given Name (First Name)
ZHER LIN

2. Surname (Last Name)
GO

3. Date
23-October-2018

4. Are you the corresponding author? Yes No

5. Manuscript Title
A case report on Kocuria kristinae continuous ambulatory peritoneal dialysis peritonitis

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1. Given Name (First Name)
SOO FOONG

2. Surname (Last Name)
CHEW

3. Date
23-October-2018

4. Are you the corresponding author? Yes No

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