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) Qing
2. Surname (Last Name) Jiang
3. Date 14-July-2020

4. Are you the corresponding author? ☑ No
   
   Corresponding Author’s Name Genying Chi

5. Manuscript Title
   Using the Ilizarov technique to treat limb shortening after replantation of a severed lower limb: a case report

6. Manuscript Identifying Number (if you know it)

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Are there any relevant conflicts of interest? ☑ No

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Jiang
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Dr. Jiang has nothing to disclose.

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**Section 1. Identifying Information**

| 1. Given Name (First Name) | 2. Surname (Last Name) | 3. Date |
|---------------------------|------------------------|--------|
| Kai                       | Huang                  | 14-July-2020 |

4. Are you the corresponding author?  ☑ No

5. Manuscript Title
   Using the Ilizarov technique to treat limb shortening after replantation of a severed lower limb: a case report

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**Section 2. The Work Under Consideration for Publication**

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**Section 4. Intellectual Property -- Patents & Copyrights**

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| 1. Given Name (First Name) | 2. Surname (Last Name) | 3. Date          |
|---------------------------|------------------------|-----------------|
| Yiyang                   | Liu                    | 14-July-2020    |

4. Are you the corresponding author? [ ] Yes [x] No

| Corresponding Author’s Name |
|-----------------------------|
| Genying Chi                 |

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   Genying  

2. Surname (Last Name)  
   Chi  

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