ICMJE DISCLOSURE FORM

Date: July 28, 2021
Your Name: Xiaomin Wen
Manuscript Title: The potential mechanism of Astragali Radix in the treatment of children with nephrotic syndrome
Manuscript number (if known): None

In the interest of transparency, we ask you to disclose all relationships/activities/interests listed below that are related to the content of your manuscript. “Related” means any relation with for-profit or not-for-profit third parties whose interests may be affected by the content of the manuscript. Disclosure represents a commitment to transparency and does not necessarily indicate a bias. If you are in doubt about whether to list a relationship/activity/interest, it is preferable that you do so.

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| 1 | All support for the present manuscript (e.g., funding, provision of study materials, medical writing, article processing charges, etc.) No time limit for this item. | _X_ None |
|   | **Time frame: Since the initial planning of the work** | **Time frame: past 36 months** |
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| 6 | Payment for expert testimony                                                            | X  |
| 7 | Support for attending meetings and/or travel                                             | X  |
| 8 | Patents planned, issued or pending                                                       | X  |
| 9 | Participation on a Data Safety Monitoring Board or Advisory Board                       | X  |
| 10| Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid | X |}

Please summarize the above conflict of interest in the following box:

The author has no conflicts of interest to declare.

Please place an “X” next to the following statement to indicate your agreement:

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ICMJE DISCLOSURE FORM

Date: July 28, 2021
Your Name: Wenxiang Wang
Manuscript Title: The potential mechanism of *Astragali Radix* in the treatment of children with nephrotic syndrome

Manuscript number (if known): None

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|4 | Consulting fees | _X_ None |
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|---|---|
| lectures, presentations, speakers bureaus, manuscript writing or educational events |   |
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| 10 | Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid | _X_ None |
| 11 | Stock or stock options | _X_ None |
| 12 | Receipt of equipment, materials, drugs, medical writing, gifts or other services | _X_ None |
| 13 | Other financial or non-financial interests | _X_ None |

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Date: July 28, 2021
Your Name: Mei Zheng
Manuscript Title: The potential mechanism of *Astragali Radix* in the treatment of children with nephrotic syndrome
Manuscript number (if known): None

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Date: July 28, 2021
Your Name: Bei Song
Manuscript Title: The potential mechanism of Astragali Radix in the treatment of children with nephrotic syndrome
Manuscript number (if known): None

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**Time frame: Since the initial planning of the work**

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|---|-----------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------|
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| 3 | Royalties or licenses                                                                             | **X** None                                                                     |
| 4 | Consulting fees                                                                                   | **X** None                                                                     |
| 5 | Payment or honoraria for                                                                           | **X** None                                                                     |

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