ICMJE Form for Disclosure of Potential Conflicts of Interest

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)
   Zhangwei

2. Surname (Last Name)
   Qiu

3. Date
   2020/02/23

4. Are you the corresponding author?
   ☑ No

Corresponding Author’s Name
Yuanrong Dai, Songmin Ying, Xian Shen

5. Manuscript Title
   Clinical features of 64 patients (outside Hubei) with COVID-19 in Wenzhou, China

6. Manuscript Identifying Number (if you know it)
   JTD-20-1861

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Yes ☐ No ☑

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Yes ☐ No ☑

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Dr. qiu has nothing to disclose.

Evaluation and Feedback

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Section 1. Identifying Information

1. Given Name (First Name)  
   Wei

2. Surname (Last Name)  
   Dai

3. Date  
   2020/02/23

4. Are you the corresponding author?  
   Yes ☐  No ☑

Corresponding Author's Name
Yuanrong Dai, Songmin Ying, Xian Shen

5. Manuscript Title  
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6. Manuscript Identifying Number (if you know it)  
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**Section 1. Identifying Information**

1. Given Name (First Name)  
   Madiha Zahra

2. Surname (Last Name)  
   Syeda

3. Date  
   2020/02/23

4. Are you the corresponding author?  
   Yes  ✔  No

**Corresponding Author’s Name**  
Yuanrong Dai, Songmin Ying, Xian Shen

5. Manuscript Title  
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6. Manuscript Identifying Number (if you know it)  
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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. Syeda has nothing to disclose.

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**Section 1. Identifying Information**

1. Given Name (First Name) 
   Liujuan 
2. Surname (Last Name) 
   Ouyang 
3. Date 
   2020/02/23
4. Are you the corresponding author?  
   ☐ Yes  ✔ No
5. Manuscript Title 
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6. Manuscript Identifying Number (if you know it) 
   JTD-20-1861

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Dr. Ouyang has nothing to disclose.

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## Section 1. Identifying Information

1. Given Name (First Name)  
   Jie  
2. Surname (Last Name)  
   Lin  
3. Date  
   2020/02/23  
4. Are you the corresponding author?  
   [ ] Yes  
   ✔ No  

Corresponding Author's Name:

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6. Manuscript Identifying Number (if you know it)  
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Are there any relevant conflicts of interest?  
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✔ No

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Dr. Lin has nothing to disclose.

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)  
   Laifang

2. Surname (Last Name)  
   Sun

3. Date  
   2020/02/23

4. Are you the corresponding author?  
   Yes ☐  No ☑

Corresponding Author’s Name  
Yuanrong Dai, Songmin Ying, Xian Shen

5. Manuscript Title  
   Clinical features of 64 patients (outside Hubei) with COVID-19 in Wenzhou, China

6. Manuscript Identifying Number (if you know it)  
   JTD-20-1861

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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Are there any relevant conflicts of interest?  
   Yes ☐  No ☑

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. Sun has nothing to disclose.

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Section 1. Identifying Information

1. Given Name (First Name)  
   Zhefeng

2. Surname (Last Name)  
   Leng

3. Date  
   2020/02/23

4. Are you the corresponding author?  
   Yes  No

   Corresponding Author’s Name  
   Yuanrong Dai, Songmin Ying, Xian Shen

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6. Manuscript Identifying Number (if you know it)  
   JTD-20-1861

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   Yes  No

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Are there any relevant conflicts of interest?  
   Yes  No

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Dr. Leng has nothing to disclose.

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Section 1. Identifying Information

1. Given Name (First Name)  
   Xinmiao

2. Surname (Last Name)  
   Chen

3. Date  
   2020/02/23

4. Are you the corresponding author?  
   Yes  ✔  No

Corresponding Author's Name  
Yuanrong Dai, Songmin Ying, Xian Shen

5. Manuscript Title  
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Dr. chen has nothing to disclose.

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)  Xiaoting
2. Surname (Last Name)  Xu
3. Date  2020/02/23

4. Are you the corresponding author?  ✔ No

Corresponding Author’s Name
Yuanrong Dai, Songmin Ying, Xian Shen

5. Manuscript Title
Clinical features of 64 patients (outside Hubei) with COVID-19 in Wenzhou, China

6. Manuscript Identifying Number (if you know it)
JTD-20-1861

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Are there any relevant conflicts of interest?  ✔ No

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Dr. xu has nothing to disclose.

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**Section 1. Identifying Information**

1. Given Name (First Name)  
   Yaxin

2. Surname (Last Name)  
   Zhao

3. Date  
   2020/02/23

4. Are you the corresponding author?  
   ☑ No

5. Manuscript Title  
   Clinical features of 64 patients (outside Hubei) with COVID-19 in Wenzhou, China

6. Manuscript Identifying Number (if you know it)  
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Dr. Zhao has nothing to disclose.

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Section 1. Identifying Information

1. Given Name (First Name)  
   Binyu

2. Surname (Last Name)  
   Ying

3. Date  
   2020/02/23

4. Are you the corresponding author?  
   ☐ Yes  ☑ No

5. Manuscript Title  
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6. Manuscript Identifying Number (if you know it)  
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Section 6. Disclosure Statement

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Dr. Ying has nothing to disclose.

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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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1. Given Name (First Name) | 2. Surname (Last Name) | 3. Date  
Xian | Shen | 2020/02/23  
4. Are you the corresponding author? ✔ Yes □ No  

5. Manuscript Title  
Clinical features of 64 patients (outside Hubei) with COVID-19 in Wenzhou, China  

6. Manuscript Identifying Number (if you know it)  
JTD-20-1861

## Section 2. The Work Under Consideration for Publication

Did you or your institution at any time receive payment or services from a third party (government, commercial, private foundation, etc.) for any aspect of the submitted work (including but not limited to grants, data monitoring board, study design, manuscript preparation, statistical analysis, etc.)? 
Are there any relevant conflicts of interest? □ Yes ✔ No

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Are there any relevant conflicts of interest? □ Yes ✔ No

## 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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Section 1. Identifying Information

1. Given Name (First Name)  
   Songmin

2. Surname (Last Name)  
   Ying

3. Date  
   2020/02/23

4. Are you the corresponding author?  
   Yes ✔ No

5. Manuscript Title  
   Clinical features of 64 patients (outside Hubei) with COVID-19 in Wenzhou, China

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Are there any relevant conflicts of interest?  
   Yes  ✔ No

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Section 1. Identifying Information

1. Given Name (First Name)  
Yuanrong

2. Surname (Last Name)  
Dai

3. Date  
2020/02/23

4. Are you the corresponding author?  
✓ Yes  □ No

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