ICMJE Form for Disclosure of Potential Conflicts of Interest

Instructions

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

5. **Relationships not covered above.**

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Section 1. Identifying Information

1. Given Name (First Name)  Jia-jun
2. Surname (Last Name)  Yuan
3. Date  22-November-2020
4. Are you the corresponding author?  No
5. Manuscript Title
Is there possibility of vertical transmission of COVID-19: a systematic review
6. Manuscript Identifying Number (if you know it)
TP-20-144

Section 2. The Work Under Consideration for Publication

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Jia-jun Yuan has nothing to disclose.

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Section 1. Identifying Information

| 1. Given Name (First Name) | 2. Surname (Last Name) | 3. Date |
|---------------------------|------------------------|---------|
| Han                       | Qian                   | 22-November-2020 |

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

Corresponding Author’s Name
Bo-Tao Ning, Lie-bin Zhao

5. Manuscript Title
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## Section 1. Identifying Information

| 1. Given Name (First Name) | 2. Surname (Last Name) | 3. Date                   |
|----------------------------|-------------------------|---------------------------|
| Shi-yan                    | Cao                     | 22-November-2020          |

4. Are you the corresponding author?  
   - Yes  
   - No ✔

5. Manuscript Title  
   Is there possibility of vertical transmission of COVID-19: a systematic review

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Shi-yan Cao has nothing to disclose.

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### Section 1. Identifying Information

| 1. Given Name (First Name) | 2. Surname (Last Name) | 3. Date |
|---------------------------|------------------------|---------|
| Bin                       | Dong                   | 02-December-2020 |

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

5. Manuscript Title
   Is there possibility of vertical transmission of COVID-19: a systematic review

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

1. Given Name (First Name)  Xiao-yu
2. Surname (Last Name)  Yan
3. Date  02-December-2020
4. Are you the corresponding author?  Yes  No  ✔
Corresponding Author's Name  Bo-Tao Ning, Lie-bin Zhao
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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name) Shuang-hong
2. Surname (Last Name) Luo
3. Date 02-December-2020
4. Are you the corresponding author? ☐ Yes ☑ No
5. Manuscript Title
   Is there possibility of vertical transmission of COVID-19: a systematic review
6. Manuscript Identifying Number (if you know it)
   TP-20-144

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

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Do you have any patents, whether planned, pending or issued, broadly relevant to the work? ☐ Yes ☑ No
Section 5. Relationships not covered above

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Shuang-hong Luo has nothing to disclose.

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Zhou

1
Section 1. Identifying Information

1. Given Name (First Name)  
   Min

2. Surname (Last Name)  
   Zhou

3. Date  
   02-December-2020

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

Corresponding Author's Name  
   Bo-Tao Ning, Lie-bin Zhao

5. Manuscript Title  
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Section 1. Identifying Information

1. Given Name (First Name) Sha
2. Surname (Last Name) Zhou
3. Date 02-December-2020
4. Are you the corresponding author? Yes ☐ No ☑
Corresponding Author's Name
Bo-Tao Ning, Lie-bin Zhao

5. Manuscript Title
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**Section 1. Identifying Information**

1. Given Name (First Name)  
Bo-tao  

2. Surname (Last Name)  
Ning  

3. Date  
22-November-2020  

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

5. Manuscript Title  
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### Identifying Information

1. Given Name (First Name)  
   Lie-bin  
2. Surname (Last Name)  
   Zhao  
3. Date  
   22-November-2020  
4. Are you the corresponding author?  
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   No  
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