ICMJE DISCLOSURE FORM

Date: 26th May, 2021  
Your Name: Zhaohui Bai  
Manuscript Title: Human Albumin Infusion Strategy in Liver Cirrhosis: Liberal or Restrictive?  
Manuscript number (if known): ATM-21-2136

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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|---|---------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------|
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| **2** | Grants or contracts from any entity (if not indicated in item #1 above).                  | _X_ None                                                                         |
| **3** | Royalties or licenses                                                                      | _X_ None                                                                         |
| **4** | Consulting fees                                                                           | _X_ None                                                                         |
|   | Description                                                                 | Status |
|---|-----------------------------------------------------------------------------|--------|
| 5 | Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or educational events | X None |
| 6 | Payment for expert testimony                                                | X None |
| 7 | Support for attending meetings and/or travel                                | X None |
| 8 | Patents planned, issued or pending                                          | X None |
| 9 | Participation on a Data Safety Monitoring Board or Advisory Board           | X None |
|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 |

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

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

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Date: ___ May 26th, 2021

Your Name: ___ Gang Cheng

Manuscript Title: __________ Human Albumin Infusion Strategy in Liver Cirrhosis: Liberal or Restrictive? ________

Manuscript number (if known): ___ ATM-21-2136

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| 3 | Royalties or licenses                                                                     | _X_ None                                                                         |
| 4 | Consulting fees                                                                         | _X_ None                                                                         |

Time frame: Since the initial planning of the work

Time frame: past 36 months
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Date:_____May 26th, 2021____________________________________________________________
Your Name:___Nahum Méndez-Sánchez__________________________________________________________
Manuscript Title:___________Human Albumin Infusion Strategy in Liver Cirrhosis: Liberal or Restrictive?_____
Manuscript number (if known):__ATM-21-2136___________________________________________________________

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Date: ___ May 26th, 2021

Your Name: __Xingshun Qi__

Manuscript Title: __Human Albumin Infusion Strategy in Liver Cirrhosis: Liberal or Restrictive?__

Manuscript number (if known): _ ATM-21-2136 ____________________________

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