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)  
   Yan-Qiu

2. Surname (Last Name)  
   Han

3. Date  
   14-April-2020

4. Are you the corresponding author?  
   Yes ☐  No ☑
   Corresponding Author’s Name  
   Zhi-De Hu

5. Manuscript Title  
   Net benefit of routine urine parameters for urinary tract infection screening: A decision curve analysis

6. Manuscript Identifying Number (if you know it)  
   ATM-19-1164

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   Yes ☐  No ☑

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)  
Lei

2. Surname (Last Name)  
Zhang

3. Date  
14-April-2020

4. Are you the corresponding author?  
☐ Yes  ✔ No  
Corresponding Author’s Name  
Zhi-De Hu

5. Manuscript Title  
Net benefit of routine urine parameters for urinary tract infection screening: A decision curve analysis

6. Manuscript Identifying Number (if you know it)  
ATM-19-1164

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Dr. Zhang has nothing to disclose.

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Section 1. Identifying Information

1. Given Name (First Name)  Jun-Rui
2. Surname (Last Name)  Wang
3. Date  14-April-2020
4. Are you the corresponding author?  Yes  ☑  No
   Corresponding Author’s Name  Zhi-De Hu
5. Manuscript Title
   Net benefit of routine urine parameters for urinary tract infection screening: A decision curve analysis
6. Manuscript Identifying Number (if you know it)
   ATM-19-1164

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## Section 1. Identifying Information

1. **Given Name (First Name)**
   - Shang-Cheng

2. **Surname (Last Name)**
   - Xu

3. **Date**
   - 14-April-2020

4. **Are you the corresponding author?**
   - Yes [x]

5. **Manuscript Title**
   - Net benefit of routine urine parameters for urinary tract infection screening: A decision curve analysis

6. **Manuscript Identifying Number (if you know it)**
   - ATM-19-1164

## Section 2. The Work Under Consideration for Publication

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### ICMJE Form for Disclosure of Potential Conflicts of Interest

#### Section 1. Identifying Information

1. **Given Name (First Name)**  
   Zhi-De
2. **Surname (Last Name)**  
   Hu
3. **Date**  
   13-April-2020
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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Dr. Hu has nothing to disclose.

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