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) jinguo
2. Surname (Last Name) yu
3. Date 02-February-2021
4. Are you the corresponding author? Yes ☐ No ☑
   Corresponding Author’s Name
   Hua Yan
5. Manuscript Title
   Repair of Unilateral Combined Orbital Floor and Medial Wall Fracture Using Two Titanium Mesh Plates: a Modified Technique
6. Manuscript Identifying Number (if you know it)
   ATM-21-598

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Dr. yu has nothing to disclose.

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Section 1. Identifying Information

| 1. Given Name (First Name) | 2. Surname (Last Name) | 3. Date |
|---------------------------|------------------------|---------|
| jingkai                   | zhang                  | 02-February-2021 |

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

5. Manuscript Title  
Repair of Unilateral Combined Orbital Floor and Medial Wall Fracture Using Two Titanium Mesh Plates: a Modified Technique

6. Manuscript Identifying Number (if you know it)  
ATM-21-598

Section 2. The Work Under Consideration for Publication

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Dr. zhang has nothing to disclose.

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Section 1. Identifying Information

1. Given Name (First Name)  
song

2. Surname (Last Name)  
chen

3. Date  
02-February-2021

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

5. Manuscript Title  
Repair of Unilateral Combined Orbital Floor and Medial Wall Fracture Using Two Titanium Mesh Plates: a Modified Technique

6. Manuscript Identifying Number (if you know it)  
ATM-21-598

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Dr. chen has nothing to disclose.

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Section 1. Identifying Information

1. Given Name (First Name)  qi
2. Surname (Last Name)  han
3. Date  02-February-2021
4. Are you the corresponding author?  ✔ No
5. Manuscript Title  Repair of Unilateral Combined Orbital Floor and Medial Wall Fracture Using Two Titanium Mesh Plates: a Modified Technique
6. Manuscript Identifying Number (if you know it)  ATM-21-598

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   yan

3. Date  
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5. Manuscript Title  
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