ICMJE Form for Disclosure of Potential Conflicts of Interest

Instructions

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Section 1. Identifying Information

1. Given Name (First Name) Kun
2. Surname (Last Name) Yuan
3. Date 19-March-2020
4. Are you the corresponding author? Yes
Corresponding Author's Name Qi Xie

5. Manuscript Title
A 12-hour Comprehensive Nutrition Care Benefits Blood Glucose Level and Weight Gain and Improves Outcomes in
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Dr. Yuan has nothing to disclose.

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1. Given Name (First Name) Haoyuan
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<thead>
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<th>1. Given Name (First Name)</th>
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<th>3. Date</th>
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<tbody>
<tr>
<td>Yujia</td>
<td>Chen</td>
<td>19-March-2020</td>
</tr>
</tbody>
</table>

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

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2. Surname (Last Name) Li
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Shuqing

2. Surname (Last Name)  
Gao

3. Date  
19-March-2020

4. Are you the corresponding author?  
[ ] Yes  [✓] No  
Corresponding Author's Name
Qi Xie

5. Manuscript Title  
A 12-hour Comprehensive Nutrition Care Benefits Blood Glucose Level and Weight Gain and Improves Outcomes in Pregnant Women with Gestational Diabetes Mellitus

6. Manuscript Identifying Number (if you know it)  
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   Yanmin

2. **Surname (Last Name)**  
   Cao

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   19-March-2020

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   - [ ] Yes  
   - ✔ No  

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   Qi Xie

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   Xiaoli

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<thead>
<tr>
<th>1. Given Name (First Name)</th>
<th>Qi</th>
</tr>
</thead>
<tbody>
<tr>
<td>2. Surname (Last Name)</td>
<td>Xie</td>
</tr>
<tr>
<td>3. Date</td>
<td>19-March-2020</td>
</tr>
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