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.

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# ICMJE Form for Disclosure of Potential Conflicts of Interest

## Section 1. Identifying Information

1. **Given Name (First Name)**  
   Haiyan  

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

3. **Date**  
   12-April-2020  

4. **Are you the corresponding author?**  
   □ Yes  
   ✓ No  

   **Corresponding Author’s Name**  
   Xiaodong Wang and Yu Tong  

5. **Manuscript Title**  
   Outcome of twin pregnancy in a patient with Gitelman syndrome: a case report and literature review  

6. **Manuscript Identifying Number (if you know it)**  
   Manuscript ID: APM-19-299-R1

## Section 2. The Work Under Consideration for Publication

Did you or your institution **at any time** receive payment or services from a third party (government, commercial, private foundation, etc.) for any aspect of the submitted work (including but not limited to grants, data monitoring board, study design, manuscript preparation, statistical analysis, etc.)?  

Are there any relevant conflicts of interest?  
   □ Yes  
   ✓ No

## Section 3. Relevant financial activities outside the submitted work.

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Dr. Yu has nothing to disclose.

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Liao
## Section 1. Identifying Information

1. Given Name (First Name)  
Hua

2. Surname (Last Name)  
Liao

3. Date  
12-April-2020

4. Are you the corresponding author?  
[ ] Yes  [✓] No  
Corresponding Author’s Name  
Xiaodong Wang and Yu Tong

5. Manuscript Title  
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Do you have any patents, whether planned, pending or issued, broadly relevant to the work?  
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Dr. Liao has nothing to disclose.

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1. Given Name (First Name) Xiaodong
2. Surname (Last Name) Wang
3. Date 12-April-2020
4. Are you the corresponding author? ☑ Yes ☐ No

5. Manuscript Title
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