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)  Guanyu
2. Surname (Last Name)  Zhou
3. Date  05-June-2020
4. Are you the corresponding author?  ✔ Yes  ☐ No

5. Manuscript Title
   Retrospective analysis of 1,641 cases of classic fever of unknown origin

6. Manuscript Identifying Number (if you know it)
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Dr. Zhou has nothing to disclose.

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Zhou
ICMJE Form for Disclosure of Potential Conflicts of Interest

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1. Given Name (First Name)  Ying
2. Surname (Last Name)  Zhou
3. Date 05-June-2020
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1. Given Name (First Name)  
   Cejun

2. Surname (Last Name)  
   Zhong

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4. Are you the corresponding author?  
   ✔ Yes  
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<tr>
<td>Hui</td>
<td>Ye</td>
<td>05-June-2020</td>
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   No

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   ZhenZhen

2. Surname (Last Name)  
   Liu

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### Section 1. Identifying Information

<table>
<thead>
<tr>
<th>1. Given Name (First Name)</th>
<th>2. Surname (Last Name)</th>
<th>3. Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>Yanbin</td>
<td>Liu</td>
<td>05-June-2020</td>
</tr>
</tbody>
</table>

4. Are you the corresponding author?  
   ✔ Yes  
   No

5. Manuscript Title  
   Retrospective analysis of 1,641 cases of classic fever of unknown origin

6. Manuscript Identifying Number (if you know it)  
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Are there any relevant conflicts of interest?  
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Section 1. Identifying Information

1. Given Name (First Name)  
Guangmin

2. Surname (Last Name)  
Tang

3. Date  
05-June-2020

4. Are you the corresponding author?  
✔ Yes  
No

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   Junyan

2. Surname (Last Name)  
   Qu

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   05-June-2020

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Xiaoju

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Lv

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05-June-2020

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