ICMJE Form for Disclosure of Potential Conflicts of Interest

Instructions

The purpose of this form is to provide readers of your manuscript with information about your other interests that could influence how they receive and understand your work. The form is designed to be completed electronically and stored electronically. It contains programming that allows appropriate data display. Each author should submit a separate form and is responsible for the accuracy and completeness of the submitted information. The form is in six parts.

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Section 1. Identifying Information

1. Given Name (First Name) Zhenyu
2. Surname (Last Name) Li
3. Date 28-June-2020
4. Are you the corresponding author? Yes No
5. Manuscript Title Thinking about the neonates born to mothers with COVID-19
6. Manuscript Identifying Number (if you know it) TP-20-97-R1

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Dr. Li has nothing to disclose.

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Section 1. Identifying Information

1. Given Name (First Name)  
   Dan

2. Surname (Last Name)  
   Dang

3. Date  
   28-June-2020

4. Are you the corresponding author?  
   No

   ✔ Yes

   Corresponding Author’s Name  
   Hui Wu

5. Manuscript Title  
   Thinking about the neonates born to mothers with COVID-19

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Section 2. The Work Under Consideration for Publication

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Section 1. Identifying Information
1. Given Name (First Name)  Yangming
2. Surname (Last Name)  Qu
3. Date  28-June-2020

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

Corresponding Author's Name  Hui Wu

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<tr>
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<td>Wu</td>
<td>28-June-2020</td>
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