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)  
Kai

2. Surname (Last Name)  
Zhao

3. Date  
16-April-2020

4. Are you the corresponding author?  
☑ No

Corresponding Author’s Name  
Ninghong Song

5. Manuscript Title  
Primary renal lymphoma: a case report and review of the literature

6. Manuscript Identifying Number (if you know it)  
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Section 1. Identifying Information

1. Given Name (First Name)  Qijie
2. Surname (Last Name)  Zhang
3. Date  16-April-2020
4. Are you the corresponding author?  Yes  ☑  No
Corresponding Author’s Name  Ninghong Song
5. Manuscript Title  Primary renal lymphoma: a case report and review of the literature
6. Manuscript Identifying Number (if you know it)  ACR-19-139

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### Section 1. Identifying Information

1. **Given Name (First Name)**
   - Rong
2. **Surname (Last Name)**
   - Cong
3. **Date**
   - 16-April-2020
4. **Are you the corresponding author?**
   - Yes [ ] No [✓]
   - **Corresponding Author’s Name**
   - Ninghong Song
5. **Manuscript Title**
   - Primary renal lymphoma: a case report and review of the literature
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1. Given Name (First Name)  
Yamin

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Wang

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- **Other:** Anything not covered under the previous three boxes
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1. Given Name (First Name)  
Ninghong

2. Surname (Last Name)  
Song

3. Date  
16-April-2020

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

5. Manuscript Title  
Primary renal lymphoma: a case report and review of the literature

6. Manuscript Identifying Number (if you know it)  
ACR-19-139

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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.)?

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Dr. Song has nothing to disclose.

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