



ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)
Alisan

2. Surname (Last Name)
Kahraman

3. Date
29-November-2017

4. Are you the corresponding author? Yes No

5. Manuscript Title
Potential triggering factors of acute liver failure as a first manifestation of autoimmune hepatitis - a single center experience of 52 adult patients

6. Manuscript Identifying Number (if you know it)
37348

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

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Are there any relevant conflicts of interest? Yes No

Section 4. Intellectual Property -- Patents & Copyrights

Do you have any patents, whether planned, pending or issued, broadly relevant to the work? Yes No



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1. Given Name (First Name)
Matthias

2. Surname (Last Name)
Büchter

3. Date
29-November-2017

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Yes No

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Alisan Kahraman

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Paul

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Manka

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29-November-2017

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1. Given Name (First Name) Falko Markus
2. Surname (Last Name) Heinemann
3. Date 29-November-2017

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Corresponding Author's Name
Alisan Kahraman

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Monika

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Lindemann

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Yes No

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Hideo Andreas

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Baba

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Martin

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Schlattjan

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Yes No

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Ali

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Canbay

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Yes

No

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Guido

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