



ICMJE Form for Disclosure of Potential Conflicts of Interest

Instructions

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4. Intellectual Property.

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)
Keith

2. Surname (Last Name)
Sultan

3. Date
19-May-2020

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

5. Manuscript Title
Inflammatory Bowel Disease and COVID-19: Rapid review of current evidence and evolving expert opinion

6. Manuscript Identifying Number (if you know it)
56239

Section 2. The Work Under Consideration for Publication

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Dr. Sultan has nothing to disclose.

Evaluation and Feedback

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Section 1. Identifying Information

1. Given Name (First Name)

Laura

2. Surname (Last Name)

Durbin

3. Date

20-May-2020

4. Are you the corresponding author?

☐ Yes

☒ No

Corresponding Author's Name

Keith Sultan

5. Manuscript Title

Inflammatory Bowel Disease and COVID-19: Rapid review of current evidence and evolving expert opinion

6. Manuscript Identifying Number (if you know it)

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Are there any relevant conflicts of interest?

☐ Yes

☒ No

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Ms. Durbin has nothing to disclose.

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1. Given Name (First Name)
Anjali

2. Surname (Last Name)
Mone

3. Date
20-May-2020

4. Are you the corresponding author?

☐ Yes ☒ No

Corresponding Author's Name
Keith Sultan

5. Manuscript Title

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

2. Surname (Last Name)

Khuwaja

3. Date

20-May-2020

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☐ Yes ☒ No

Corresponding Author's Name

Keith Sultan

5. Manuscript Title

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Dr. Khuwaja has nothing to disclose.

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Arun

2. Surname (Last Name)
Swaminath

3. Date
20-May-2020

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☐ Yes ☒ No

Corresponding Author's Name
Keith Sultan

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Dr. Swaminath has nothing to disclose.

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