

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)

Mario

2. Surname (Last Name)

Ganau

3. Date

27-July-2020

4. Are you the corresponding author?

☒ Yes ☐ No

5. Manuscript Title

Breakthrough in the assessment of cerebral perfusion and vascular permeability after brain trauma through the adoption of dynamic indocyanine green-enhanced near-infrared spectroscopy

6. Manuscript Identifying Number (if you know it)

QIMS-20-905

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Are there any relevant conflicts of interest? ☐ Yes ☒ No

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Dr. Ganau has nothing to disclose.

Evaluation and Feedback

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name) Mohammad	2. Surname (Last Name) Iqbal	3. Date 27-July-2020
4. Are you the corresponding author? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
5. Manuscript Title Breakthrough in the assessment of cerebral perfusion and vascular permeability after brain trauma through the adoption of dynamic indocyanine green-enhanced near-infrared spectroscopy		
6. Manuscript Identifying Number (if you know it) QIMS-20-905		

Section 2. The Work Under Consideration for Publication

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Are there any relevant conflicts of interest? ☐ Yes ☒ No

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Dr. Iqbal has nothing to disclose.

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1. Given Name (First Name)
Gianfranco

2. Surname (Last Name)
Ligarotti

3. Date
27-July-2020

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

5. Manuscript Title
Breakthrough in the assessment of cerebral perfusion and vascular permeability after brain trauma through the adoption of dynamic indocyanine green-enhanced near-infrared spectroscopy

6. Manuscript Identifying Number (if you know it)
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1. Given Name (First Name)

Nikolaos

2. Surname (Last Name)

Syrmos

3. Date

27-July-2020

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☒ Yes ☐ No

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