

#### **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.

## Identifying information.

## 2. The work under consideration for publication.

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# 4. Intellectual Property.

This section asks about patents and copyrights, whether pending, issued, licensed and/or receiving royalties.

# 5. Relationships not covered above.

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Fan 1



Section 1. Identifying Inform	nation			
Given Name (First Name)  Xueqiang	2. Surname (Last Name) Fan	3. Date 27-August-2020		
4. Are you the corresponding author?	✓ Yes No			
5. Manuscript Title Diagnosis and management of free floa	ating filling defect in carotid artery – case report			
6. Manuscript Identifying Number (if you kr JXYM-20-91	now it)			
Section 2. The Work Under C	onsideration for Publication			
Did you or your institution <b>at any time</b> 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				
Section 3. Relevant financial	activities outside the submitted work.			
of compensation) with entities as descr	in the table to indicate whether you have financial re ibed in the instructions. Use one line for each entity; port relationships that were <b>present during the 36</b> rest? Yes V	add as many lines as you need by		
Section 4. Intellectual Proper	rty Patents & Copyrights			
Do you have any patents, whether plan	ned, pending or issued, broadly relevant to the work	x?		

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Section 5. Polotionships not solvered above				
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Section 6. Disclosure Statement				
Disciosure statement				
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Zhou 1



Section 1. Identifying Inform	mation	
1. Given Name (First Name) Zhiyong	2. Surname (Last Name) Zhou	3. Date 27-August-2020
4. Are you the corresponding author?	☐ Yes ✓ No	Corresponding Author's Name Xueqiang Fan
5. Manuscript Title Diagnosis and management of free flo	ating filling defect in carot	id artery – case report
6. Manuscript Identifying Number (if you k JXYM-20-91	now it)	
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any aspect of the submitted work (includin statistical analysis, etc.)? Are there any relevant conflicts of inter	g but not limited to grants, da	a a third party (government, commercial, private foundation, etc.) for ata monitoring board, study design, manuscript preparation,
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Do you have any patents, whether plan	nned, pending or issued, bi	roadly relevant to the work? Yes No

Zhou 2



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Zhang 1



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