

ICMJE DISCLOSURE FORM

Date: 2021.11.26

Your Name: Haijun Li

Manuscript Title: Early physical therapy for a patient affected by coronavirus disease 2019 (COVID-19) on awake veno-venous extracorporeal membrane oxygenation: a case report

Manuscript number (if known): _____

In the interest of transparency, we ask you to disclose all relationships/activities/interests listed below that are related to the content of your manuscript. "Related" means any relation with for-profit or not-for-profit third parties whose interests may be affected by the content of the manuscript. Disclosure represents a commitment to transparency and does not necessarily indicate a bias. If you are in doubt about whether to list a relationship/activity/interest, it is preferable that you do so.

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Please summarize the above conflict of interest in the following box:

None

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Date: 2021.11.26
 Your Name: Jinxiu Chen
 Manuscript Title: Early physical therapy for a patient affected by coronavirus disease 2019 (COVID-19) on awake veno-venous extracorporeal membrane oxygenation: a case report
 Manuscript number (if known): _____

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Date: 2021.11.26

Your Name: Lin Mao

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Date: 2021.11.26
 Your Name: Lunjie Luo
 Manuscript Title: Early physical therapy for a patient affected by coronavirus disease 2019 (COVID-19) on awake veno-venous extracorporeal membrane oxygenation: a case report
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 Your Name: Liliang Zou
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Date: 2021.11.26
 Your Name: Jian Yang
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