

## ICMJE DISCLOSURE FORM

**Date:**2021-6-4

**Your Name:**Yan-Jun Zheng

**Manuscript Title:**Establishment of a novel risk score for in-hospital mortality in adult sepsis patients

**Manuscript number (if known):**\_\_\_\_\_

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<b>Time frame: past 36 months</b>			
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4	Consulting fees	None	

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13	Other financial or non-financial interests	None	

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## ICMJE DISCLOSURE FORM

**Date:**2021-6-4

**Your Name:**Xiao-Juan Zhu

**Manuscript Title:**Establishment of a novel risk score for in-hospital mortality in adult sepsis patients

**Manuscript number (if known):**\_\_\_\_\_

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## ICMJE DISCLOSURE FORM

**Date:**2021-6-4

**Your Name:**Yu-Wei Chen

**Manuscript Title:**Establishment of a novel risk score for in-hospital mortality in adult sepsis patients

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**Date:**2021-6-4

**Your Name:**Yu-Zhen Zheng

**Manuscript Title:**Establishment of a novel risk score for in-hospital mortality in adult sepsis patients

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Date:2021-6-4

Your Name:Yi Zhou

Manuscript Title:Establishment of a novel risk score for in-hospital mortality in adult sepsis patients

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## ICMJE DISCLOSURE FORM

**Date:**2021-6-4

**Your Name:**Wen-Jie Chen

**Manuscript Title:**Establishment of a novel risk score for in-hospital mortality in adult sepsis patients

**Manuscript number (if known):**\_\_\_\_\_

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# ICMJE DISCLOSURE FORM

Date:2021-6-4

Your Name:Xiang-Tao Zheng

Manuscript Title:Establishment of a novel risk score for in-hospital mortality in adult sepsis patients

Manuscript number (if known):\_\_\_\_\_

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## ICMJE DISCLOSURE FORM

Date: 2021-6-4

Your Name: Ming Zhong

Manuscript Title: Establishment of a novel risk score for in-hospital mortality in adult sepsis patients

Manuscript number (if known): \_\_\_\_\_

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## ICMJE DISCLOSURE FORM

**Date:**2021-6-4

**Your Name:**Zhi-Tao Yang

**Manuscript Title:**Establishment of a novel risk score for in-hospital mortality in adult sepsis patients

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## ICMJE DISCLOSURE FORM

**Date:**2021-6-4

**Your Name:**En-Qiang Mao

**Manuscript Title:**Establishment of a novel risk score for in-hospital mortality in adult sepsis patients

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**Your Name:**Er-Zhen Chen

**Manuscript Title:**Establishment of a novel risk score for in-hospital mortality in adult sepsis patients

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6	Payment for expert testimony	None	
7	Support for attending meetings and/or travel	None	
8	Patents planned, issued or pending	None	
9	Participation on a Data Safety Monitoring Board or Advisory Board	None	
10	Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid	None	
11	Stock or stock options	None	
12	Receipt of equipment, materials, drugs, medical writing, gifts or other services	None	
13	Other financial or non-financial interests	None	

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

The author has no conflicts of interest to declare.

**Please place an "X" next to the following statement to indicate your agreement:**

  X   I certify that I have answered every question and have not altered the wording of any of the questions on this form.