

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) Na	2. Surname (Last Name) Li	3. Date 27-June-2020
4. Are you the corresponding author? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Corresponding Author's Name Xun Gao
5. Manuscript Title Protective effects of recombinant human brain natriuretic peptide on the myocardial injury induced by acute carbon monoxide poisoning		
6. Manuscript Identifying Number (if you know it) _____		

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Dr. Li has nothing to disclose.

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1.

Identifying Information

1. Given Name (First Name)

Xun

2. Surname (Last Name)

Gao

3. Date

27-June-2020

4. Are you the corresponding author?

☒ Yes ☐ No

5. Manuscript Title

Protective effects of recombinant human brain natriuretic peptide on the myocardial injury induced by acute carbon monoxide poisoning

6. Manuscript Identifying Number (if you know it)

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Dr. Gao has nothing to disclose.

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Baoyue

2. Surname (Last Name)

Zhu

3. Date

27-June-2020

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☐ Yes

☒ No

Corresponding Author's Name

Xun Gao

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