

ICMJE DISCLOSURE FORM

Date: 2022-11-22
 Your Name: Lany You
 Manuscript Title: Predictors of hyperperfusion syndrome after stent implantation in symptomatic intracranial atherosclerotic stenosis
 Manuscript number (if known): QIMS-22-682

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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12	Receipt of equipment, materials, drugs, medical writing, gifts or other services	<input checked="" type="checkbox"/> None	
13	Other financial or non-financial interests	<input checked="" type="checkbox"/> None	

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

None.

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Date: 2022-11-22
 Your Name: Jiasong
 Manuscript Title: Predictors of hyperperfusion syndrome after stent implantation in symptomatic intracranial atherosclerotic stenosis
 Manuscript number (if known): QIMS-22-682

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Date: 2022-11-22
 Your Name: Ying Yu
 Manuscript Title: Predictors of hyperperfusion syndrome after stent implantation in symptomatic intracranial atherosclerotic stenosis
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Date: 2022-11-22
 Your Name: Zhikai Hou
 Manuscript Title: Predictors of hyperperfusion syndrome after stent implantation in symptomatic intracranial atherosclerotic stenosis
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ICMJE DISCLOSURE FORM

Date: 2022-11-22
 Your Name: Mellen Fu
 Manuscript Title: Predictors of hyperperfusion syndrome after stent implantation in symptomatic intracranial atherosclerotic stenosis
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Date: 2022-11-22
 Your Name: Ruzong Cai
 Manuscript Title: Predictors of hyperperfusion syndrome after stent implantation in symptomatic intracranial atherosclerotic stenosis
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Date: 2022-11-22 Min Wan
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Date: 2022-11-22
 Your Name: Ming Ly
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ICMJE DISCLOSURE FORM

Date: 2022-11-22 Yangjun Wang
 Your Name: _____
 Manuscript Title: Predictors of hyperperfusion syndrome after stent implantation in symptomatic intracranial atherosclerotic stenosis
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Date: 2022-11-22
 Your Name: Zhongyong Miao
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Time frame: past 36 months			
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5	Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or educational events	<input checked="" type="checkbox"/> None	
6	Payment for expert testimony	<input checked="" type="checkbox"/> None	
7	Support for attending meetings and/or travel	<input checked="" type="checkbox"/> None	
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9	Participation on a Data Safety Monitoring Board or Advisory Board	<input checked="" type="checkbox"/> None	
10	Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid	<input checked="" type="checkbox"/> None	
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Please summarize the above conflict of interest in the following box:

None.

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

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

ICMJE DISCLOSURE FORM

Date: 2022-11-22
 Your Name: Ning Ma
 Manuscript Title: Predictors of hyperperfusion syndrome after stent implantation in symptomatic intracranial atherosclerotic stenosis
 Manuscript number (if known): QIMS-22-682

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