

ICMJE Form for Disclosure of Potential Conflicts of Interest

Instructions

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Section 1. Identifying Information

1. Given Name (First Name) Naiwu	2. Surname (Last Name) Wang	3. Date 24-August-2020
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Bo Gao
5. Manuscript Title Cerebrovascular disease in pregnancy and puerperium: perspectives from neuroradiologists		
6. Manuscript Identifying Number (if you know it) QIMS-20-830		

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Section 1. Identifying Information

1. Given Name (First Name)
Xudong

2. Surname (Last Name)
Shen

3. Date
24-August-2020

4. Are you the corresponding author?

Yes No

Corresponding Author's Name
Bo Gao

5. Manuscript Title
Cerebrovascular disease in pregnancy and puerperium: perspectives from neuroradiologists

6. Manuscript Identifying Number (if you know it)
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Bo

2. Surname (Last Name)
Gao

3. Date
07-April-2020

4. Are you the corresponding author? Yes No

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