

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)

Matias

2. Surname (Last Name)

Noll

3. Date

25-September-2020

4. Are you the corresponding author?

Yes No

5. Manuscript Title

Narrative review of the influence of high-intensity interval training on adolescents' bone health: commentary and perspectives

6. Manuscript Identifying Number (if you know it)

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Dr. Noll has nothing to disclose.

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Section 1. Identifying Information

1. Given Name (First Name)

Carolina

2. Surname (Last Name)

Mendonça

3. Date

25-September-2020

4. Are you the corresponding author?

Yes No

Corresponding Author's Name

Matias Noll

5. Manuscript Title

Narrative review of the influence of high-intensity interval training on adolescents' bone health: commentary and perspectives

6. Manuscript Identifying Number (if you know it)

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Dr. Mendonça has nothing to disclose.

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Section 1. Identifying Information

1. Given Name (First Name)

Ana

2. Surname (Last Name)

Rodrigues

3. Date

25-September-2020

4. Are you the corresponding author?

Yes No

Corresponding Author's Name

Matias Noll

5. Manuscript Title

Narrative review of the influence of high-intensity interval training on adolescents' bone health: commentary and perspectives

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1. Given Name (First Name)

Alexandre

2. Surname (Last Name)

Aparecido

3. Date

25-September-2020

4. Are you the corresponding author?

Yes No

Corresponding Author's Name

Matias Noll

5. Manuscript Title

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Priscilla

2. Surname (Last Name)

Noll

3. Date

25-September-2020

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Yes No

Corresponding Author's Name

Matias Noll

5. Manuscript Title

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