

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)

Lihua

2. Surname (Last Name)

Dong

3. Date

01-June-2020

4. Are you the corresponding author?

Yes No

5. Manuscript Title

1 Are you using the third definition to diagnose sepsis in clinic?-A Survey among
2 Chinese Intensivists

6. Manuscript Identifying Number (if you know it)

APM-20-412

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Dr. Dong has nothing to disclose.

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Section 1. Identifying Information

1. Given Name (First Name)

Qiyu

2. Surname (Last Name)

Zhang

3. Date

01-June-2020

4. Are you the corresponding author?

Yes

No

Corresponding Author's Name

Lihua Dong

5. Manuscript Title

1 Are you using the third definition to diagnose sepsis in clinic?-A Survey among
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APM-20-412

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Section 1. Identifying Information

1. Given Name (First Name) Ningnig	2. Surname (Last Name) Di	3. Date 01-June-2020
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Lihua Dong
5. Manuscript Title 1 Are you using the third definition to diagnose sepsis in clinic?-A Survey among 2 Chinese Intensivists		
6. Manuscript Identifying Number (if you know it) APM-20-412		

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Qiuli

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Xue

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01-June-2020

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Corresponding Author's Name

Lihua Dong

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Yajie

2. Surname (Last Name)

Liu

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01-June-2020

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Corresponding Author's Name

Lihua Dong

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