

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) Peifei	2. Surname (Last Name) Gu	3. Date 03-December-2020
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Xin'an Zhang
5. Manuscript Title Effects of post-exercise recovery methods on exercise-induced hormones and blood fatigue factors: a systematic review and meta-analysis		
6. Manuscript Identifying Number (if you know it)		

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Dr. Gu has nothing to disclose.

Evaluation and Feedback

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Section 1. Identifying Information

1. Given Name (First Name)
Linhuan

2. Surname (Last Name)
Zhang

3. Date
03-December-2020

4. Are you the corresponding author?

Yes No

Corresponding Author's Name
Xin'an Zhang

5. Manuscript Title

Effects of post-exercise recovery methods on exercise-induced hormones and blood fatigue factors: a systematic review and meta-analysis

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