

ICMJE Form for Disclosure of Potential Conflicts of Interest

Instructions

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Royalties: Funds are coming in to you or your institution due to your patent

ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)

Yan

2. Surname (Last Name)

Yang

3. Date

10-November-2020

4. Are you the corresponding author?

Yes No

5. Manuscript Title

Observation of the effect of a 7-day gradual early functional exercise program in middle-aged and young patients with acute myocardial infarction after percutaneous coronary intervention

6. Manuscript Identifying Number (if you know it)

APM-20-2243

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Are there any relevant conflicts of interest? Yes No

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Section 6. Disclosure Statement

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Dr. Yang has nothing to disclose.

Evaluation and Feedback

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Section 1. Identifying Information

1. Given Name (First Name)

Lixing

2. Surname (Last Name)

Sun

3. Date

10-November-2020

4. Are you the corresponding author?

Yes No

5. Manuscript Title

Observation of the effect of a 7-day gradual early functional exercise program in middle-aged and young patients with acute myocardial infarction after percutaneous coronary intervention

6. Manuscript Identifying Number (if you know it)

APM-20-2243

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Dr. Sun has nothing to disclose.

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1. Given Name (First Name)

Weijiao

2. Surname (Last Name)

Feng

3. Date

10-November-2020

4. Are you the corresponding author?

Yes No

5. Manuscript Title

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Dan

2. Surname (Last Name)

Sun

3. Date

10-November-2020

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Yes No

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