

ICMJE Form for Disclosure of Potential Conflicts of Interest

Instructions

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Section 1. Identifying Information

1. Given Name (First Name) Sha	2. Surname (Last Name) Luo	3. Date 14-December-2020
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Sheng Tang
5. Manuscript Title Application of ultrasound-guided external jugular vein puncture in intensive care unit (ICU) patients with severe sepsis		
6. Manuscript Identifying Number (if you know it) APM-20-2500		

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Are there any relevant conflicts of interest? Yes No

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Dr. Luo has nothing to disclose.

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Section 1. Identifying Information

1. Given Name (First Name) Yunna	2. Surname (Last Name) Xue	3. Date 14-December-2020
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Sheng Tang
5. Manuscript Title Application of ultrasound-guided external jugular vein puncture in intensive care unit (ICU) patients with severe sepsis		
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Dr. Xue has nothing to disclose.

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Section 1. Identifying Information

1. Given Name (First Name)
Sheng

2. Surname (Last Name)
Tang

3. Date
14-December-2020

4. Are you the corresponding author? Yes No

5. Manuscript Title
Application of ultrasound-guided external jugular vein puncture in intensive care unit (ICU) patients with severe sepsis

6. Manuscript Identifying Number (if you know it)
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1. Given Name (First Name) Shujuan	2. Surname (Last Name) Hou	3. Date 14-December-2020
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Sheng Tang
5. Manuscript Title Application of ultrasound-guided external jugular vein puncture in intensive care unit (ICU) patients with severe sepsis		
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