Date:2021/2/24	
Your Name: Xiaolan Chen	
Manuscript Title: Venous thromboembolism risk factors and prophylaxis of elderly intensive care unit patients in a	
Chinese general hospital	
Manuscript number (if known):	

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4	Consulting fees	None	

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	speakers bureaus,		
	manuscript writing or		
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6	Payment for expert	None	
	testimony		
7	Support for attending	None	
	meetings and/or travel		
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9	Participation on a Data	None	
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	Advisory Board		
10	Leadership or fiduciary role	None	
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11	Stock or stock options	None	
	Stock of Stock options		
12	Receipt of equipment,	None	
12	materials, drugs, medical	None	
	writing, gifts or other		
	services		
13	Other financial or non-	None	
13	financial interests	140116	
	manda micresis		

Dr. Xiaolan Chen has nothing to disclose	

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Date:2021/2/24	
Your Name:_ Jiali Huang	
Manuscript Title: Venous thromboembolism risk factors and prophylaxis of elderly intensive care unit patients in a	
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Manuscript number (if known):	

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	writing, gifts or other		
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13	Other financial or non-	None	
13	financial interests	140116	
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Dr. Jiali Huang has nothing to disclose		

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Date:	2021/2/24
Your Name:	_ Jingxuan Liu
Manuscript	Title:_ Venous thromboembolism risk factors and prophylaxis of elderly intensive care unit patients in a
Chinese gen	eral hospital
Manuscript	number (if known):

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Dr.J	ingxuan Liu has nothing to disclose			

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12	materials, drugs, medical	None	
	writing, gifts or other		
	services		
13	Other financial or non-	None	
13	financial interests	140116	
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Dr. Hui Deng has nothing to disclose		

Please place an "X" next to the following statement to indicate your agreement:

Date:2	2021/2/24
Your Name:_	Lei Pan
Manuscript T	itle:_ Venous thromboembolism risk factors and prophylaxis of elderly intensive care unit patients in a
Chinese gene	ral hospital
Manuscript n	umber (if known):

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2	Grants or contracts from	None	
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3	,	None	
3	Royalties or licenses	None	
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12	materials, drugs, medical	None	
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