Date:2021-8-6_		
Your Name:	Yiyun Zhu	
Manuscript Title:P	redictive value o	f blood pressure variability for organ dysfunction in patients with sepsis
Manuscript numb	er (if known):	

In the interest of transparency, we ask you to disclose all relationships/activities/interests listed below that are related to the content of your manuscript. "Related" means any relation with for-profit or not-for-profit third parties whose interests may be affected by the content of the manuscript. Disclosure represents a commitment to transparency and does not necessarily indicate a bias. If you are in doubt about whether to list a relationship/activity/interest, it is preferable that you do so.

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		Name all entities with whom you have this relationship or indicate none (add rows as needed)	Specifications/Comments (e.g., if payments were made to you or to your institution)
		Time frame: Since the initial	planning of the work
1	All support for the present	None	
	manuscript (e.g., funding,		
	provision of study materials,		
	medical writing, article		
	processing charges, etc.)		
	No time limit for this item.		
		Time frame: past	36 months
2	Grants or contracts from	None	
	any entity (if not indicated		
_	in item #1 above).		
3	Royalties or licenses	None	
4	Consulting fees	None	

5	Payment or honoraria for	None	
	lectures, presentations,		
	speakers bureaus,		
	manuscript writing or		
	educational events		
6	Payment for expert	None	
	testimony		
7	Support for attending meetings and/or travel	None	
8	Patents planned, issued or	None	
	pending		
9	Participation on a Data	None	
	Safety Monitoring Board or		
	Advisory Board		
10	Leadership or fiduciary role	None	
	in other board, society, committee or advocacy		
	group, paid or unpaid		
11	Stock or stock options	None	
12	Receipt of equipment,	None	
	materials, drugs, medical		
	writing, gifts or other		
	services		
13	Other financial or non-	None	
	financial interests		

No conflict of interest exits in the submission of this manuscript

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

Date:2021-8-6_	
Your Name:	_Yunfei Li
Manuscript Title:	Predictive value of blood pressure variability for organ dysfunction in patients with sepsis
Manuscript numb	er (if known):

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	writing, gifts or other		
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13	Other financial or non-	None	
	financial interests		

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

Date:2021-8-6_		
Your Name:	Weiwei Cai	
Manuscript Title:	Predictive value o	f blood pressure variability for organ dysfunction in patients with sepsis
Manuscript numb	er (if known):	

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Date:2021-8-6_	Date:2021-8-6		
Your Name:	Chunmei Zhang		
Manuscript Title:	edictive value of blood pressure variability for organ dysfunction in patients with sepsis		
Manuscript numb	r (if known):		

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