

ICMJE Form for Disclosure of Potential Conflicts of Interest

Instructions

The purpose of this form is to provide readers of your manuscript with information about your other interests that could influence how they receive and understand your work. The form is designed to be completed electronically and stored electronically. It contains programming that allows appropriate data display. Each author should submit a separate form and is responsible for the accuracy and completeness of the submitted information. The form is in six parts.

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Section 1. Identifying Information

| | | |
|---|--------------------------------|--|
| 1. Given Name (First Name) Ka Man | 2. Surname (Last Name) Fong | 3. Date 07-September-2020 |
| 4. Are you the corresponding author? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | | Corresponding Author's Name Shek Yin Au |
| 5. Manuscript Title The value of Doppler assessment in transthoracic echocardiography in critically ill patients | | |
| 6. Manuscript Identifying Number (if you know it) JECCM-20-109 | | |

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Are there any relevant conflicts of interest? ☐ Yes ☒ No

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Dr. Fong has nothing to disclose.

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Section 1. Identifying Information

1. Given Name (First Name)
Shek Yin

2. Surname (Last Name)
Au

3. Date
07-September-2020

4. Are you the corresponding author? ☒ Yes ☐ No

5. Manuscript Title
The value of Doppler assessment in transthoracic echocardiography in critically ill patients

6. Manuscript Identifying Number (if you know it)
JECCM-20-109

Section 2. The Work Under Consideration for Publication

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Dr. Au has nothing to disclose.

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Section 1. Identifying Information

1. Given Name (First Name)
Sai Kwong

2. Surname (Last Name)
Yung

3. Date
07-September-2020

4. Are you the corresponding author?

☐ Yes ☒ No

Corresponding Author's Name
Shek Yin Au

5. Manuscript Title
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| | | |
|---|------------------------------|--|
| 1. Given Name (First Name) Hiu Lam Helen | 2. Surname (Last Name) Wu | 3. Date 07-September-2020 |
| 4. Are you the corresponding author? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | | Corresponding Author's Name Shek Yin Au |
| 5. Manuscript Title The value of Doppler assessment in transthoracic echocardiography in critically ill patients | | |
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Dr. Ng has nothing to disclose.

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