

## ICMJE DISCLOSURE FORM

**Date:** 7/15/2022

**Your Name:** Alex Hubbard

**Manuscript Title:** Low-Dose Lipid Emulsion for Pediatric Vasoplegic Shock due to Quetiapine and Fluvoxamine Overdose: A Case Report

**Manuscript Number (if known):** JECCM-22-53-CL

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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12	Receipt of equipment, materials, drugs, medical writing, gifts or other services	<input checked="" type="checkbox"/> None	
13	Other financial or non-financial interests	<input checked="" type="checkbox"/> None	

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

I certify that I have answered every question and have not altered the wording of any of the questions on this form.

# ICMJE DISCLOSURE FORM

**Date:** 7/11/2022

**Your Name:** Lauren House

**Manuscript Title:** Low-Dose Lipid Emulsion for Pediatric Vasoplegic Shock due to Quetiapine and Fluvoxamine Overdose: A Case Report

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