

ICMJE Form for Disclosure of Potential Conflicts of Interest

Instructions

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2. The work under consideration for publication.

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4. Intellectual Property.

This section asks about patents and copyrights, whether pending, issued, licensed and/or receiving royalties.

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)

Joshua

2. Surname (Last Name)

Bederson

3. Date

17-April-2020

4. Are you the corresponding author?

Yes No

Corresponding Author's Name

Thomas Oxley

5. Manuscript Title

Large Vessel Stroke as a Presenting Feature of COVID-19 in the Young

6. Manuscript Identifying Number (if you know it)

20-09787

Section 2. The Work Under Consideration for Publication

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Dr. Bederson has nothing to disclose.

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Section 1. Identifying Information

1. Given Name (First Name) Neha	2. Surname (Last Name) Dangayach	3. Date 17-April-2020
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Thomas Oxley
5. Manuscript Title Large Vessel Stroke as a Presenting Feature of COVID-19 in the Young		
6. Manuscript Identifying Number (if you know it) 20-09787		

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Dr. Dangayach has nothing to disclose.

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Section 1. Identifying Information

1. Given Name (First Name) Reade	2. Surname (Last Name) De Leacy	3. Date 17-April-2020
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Thomas Oxley
5. Manuscript Title Large Vessel Stroke as a Presenting Feature of COVID-19 in the Young		
6. Manuscript Identifying Number (if you know it) 20-09787		

Section 2. The Work Under Consideration for Publication

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Section 1. Identifying Information

1. Given Name (First Name)
Johanna

2. Surname (Last Name)
Fifi

3. Date
17-April-2020

4. Are you the corresponding author?

Yes No

Corresponding Author's Name
Thomas Oxley

5. Manuscript Title
Large Vessel Stroke as a Presenting Feature of COVID-19 in the Young

6. Manuscript Identifying Number (if you know it)
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1. Given Name (First Name) Christopher	2. Surname (Last Name) Kellner	3. Date 17-April-2020
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Travis

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Ladner

3. Date
17-April-2020

4. Are you the corresponding author?

Yes No

Corresponding Author's Name
Thomas Oxley

5. Manuscript Title
Large Vessel Stroke as a Presenting Feature of COVID-19 in the Young

6. Manuscript Identifying Number (if you know it)
20-09787

Section 2. The Work Under Consideration for Publication

Did you or your institution **at any time** receive payment or services from a third party (government, commercial, private foundation, etc.) for any aspect of the submitted work (including but not limited to grants, data monitoring board, study design, manuscript preparation, statistical analysis, etc.)?

Are there any relevant conflicts of interest? Yes No

Section 3. Relevant financial activities outside the submitted work.

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Are there any relevant conflicts of interest? Yes No

Section 4. Intellectual Property -- Patents & Copyrights

Do you have any patents, whether planned, pending or issued, broadly relevant to the work? Yes No

ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 5. Relationships not covered above

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Section 6. Disclosure Statement

Based on the above disclosures, this form will automatically generate a disclosure statement, which will appear in the box below.

Dr. Ladner has nothing to disclose.

Evaluation and Feedback

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Royalties: Funds are coming in to you or your institution due to your patent



ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)
Shahram

2. Surname (Last Name)
Majidi

3. Date
17-April-2020

4. Are you the corresponding author? Yes No

Corresponding Author's Name
Thomas Oxley

5. Manuscript Title
Large Vessel Stroke as a Presenting Feature of COVID-19 in the Young

6. Manuscript Identifying Number (if you know it)
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Are there any relevant conflicts of interest? Yes No

Section 3. Relevant financial activities outside the submitted work.

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Dr. Majidi has nothing to disclose.

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name) J

2. Surname (Last Name) Mocco

3. Date 17-April-2020

4. Are you the corresponding author? Yes No Corresponding Author's Name Thomas Oxley

5. Manuscript Title Large Vessel Stroke as a Presenting Feature of COVID-19 in the Young

6. Manuscript Identifying Number (if you know it) 20-09787

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Are there any relevant conflicts of interest? Yes No

If yes, please fill out the appropriate information below.

Name of Entity	Grant?	Personal Fees?	Non-Financial Support?	Other?	Comments
Imperative Care	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Stock options only

Section 4. Intellectual Property -- Patents & Copyrights

Do you have any patents, whether planned, pending or issued, broadly relevant to the work? Yes No

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Dr. Mocco reports personal fees from Imperative Care, outside the submitted work.

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Royalties: Funds are coming in to you or your institution due to your patent



ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)
Thomas

2. Surname (Last Name)
Oxley

3. Date
22-April-2020

4. Are you the corresponding author? Yes No

5. Manuscript Title
Large Vessel Stroke as a Presenting Feature of COVID-19 in the Young

6. Manuscript Identifying Number (if you know it)
20-09787

Section 2. The Work Under Consideration for Publication

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Section 4. Intellectual Property -- Patents & Copyrights

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Dr. Oxley has nothing to disclose.

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name) Tomoyoshi	2. Surname (Last Name) Shigematsu	3. Date 16-April-2020
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Thomas Oxley
5. Manuscript Title Large Vessel Stroke as a Presenting Feature of COVID-19 in the Young		
6. Manuscript Identifying Number (if you know it) 20-09787		

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name) Hazem	2. Surname (Last Name) Shoirah	3. Date 17-April-2020
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Thomas Oxley
5. Manuscript Title Large Vessel Stroke as a Presenting Feature of COVID-19 in the Young		
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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name) I. Paul	2. Surname (Last Name) Singh	3. Date 17-April-2020
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Thomas Oxley
5. Manuscript Title Large Vessel Stroke as a Presenting Feature of COVID-19 in the Young		
6. Manuscript Identifying Number (if you know it) 20-09787		

Section 2. The Work Under Consideration for Publication

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Are there any relevant conflicts of interest? Yes No

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Are there any relevant conflicts of interest? Yes No

Section 4. Intellectual Property -- Patents & Copyrights

Do you have any patents, whether planned, pending or issued, broadly relevant to the work? Yes No

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Dr. Singh has nothing to disclose.

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name) Maryna	2. Surname (Last Name) Skliut	3. Date 17-April-2020
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Thomas Oxley
5. Manuscript Title Large Vessel Stroke as a Presenting Feature of COVID-19 in the Young		
6. Manuscript Identifying Number (if you know it) 20-09787		

Section 2. The Work Under Consideration for Publication

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Are there any relevant conflicts of interest? Yes No

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Are there any relevant conflicts of interest? Yes No

Section 4. Intellectual Property -- Patents & Copyrights

Do you have any patents, whether planned, pending or issued, broadly relevant to the work? Yes No

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Dr. Skliut has nothing to disclose.

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)
Stanley

2. Surname (Last Name)
Tuhrim

3. Date
17-April-2020

4. Are you the corresponding author?

Yes No

Corresponding Author's Name
Thomas Oxley

5. Manuscript Title
Large Vessel Stroke as a Presenting Feature of COVID-19 in the Young

6. Manuscript Identifying Number (if you know it)
20-09787

Section 2. The Work Under Consideration for Publication

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Section 4. Intellectual Property -- Patents & Copyrights

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Dr. Tuhim has nothing to disclose.

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)

Jesse

2. Surname (Last Name)

Weinberger

3. Date

17-April-2020

4. Are you the corresponding author?

Yes No

Corresponding Author's Name

Thomas Oxley

5. Manuscript Title

Large Vessel Stroke as a Presenting Feature of COVID-19 in the Young

6. Manuscript Identifying Number (if you know it)

20-09787

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Dr. Weinberger has nothing to disclose.

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name) Kurt	2. Surname (Last Name) Yaeger	3. Date 17-April-2020
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Thomas Oxley
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