

ICMJE Form for Disclosure of Potential Conflicts of Interest

Instructions

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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) Xiaohui	2. Surname (Last Name) Xia	3. Date 08-June-2020
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Xiaochuan Sun
5. Manuscript Title The relationship between estrogen-induced phenotypic transformation and proliferation of vascular smooth muscle and hypertensive intracerebral hemorrhage		
6. Manuscript Identifying Number (if you know it)		

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Are there any relevant conflicts of interest? Yes No

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Dr. Xia has nothing to disclose.

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1. Given Name (First Name) Changlong	2. Surname (Last Name) Zhou	3. Date 08-June-2020
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Xiaochuan Sun
5. Manuscript Title The relationship between estrogen-induced phenotypic transformation and proliferation of vascular smooth muscle and hypertensive intracerebral hemorrhage		
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1. Given Name (First Name) Xuenong	2. Surname (Last Name) He	3. Date 08-June-2020
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Xiaochuan Sun
5. Manuscript Title The relationship between estrogen-induced phenotypic transformation and proliferation of vascular smooth muscle and hypertensive intracerebral hemorrhage		
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Section 1. Identifying Information

1. Given Name (First Name)

Guanyu

2. Surname (Last Name)

Wang

3. Date

08-June-2020

4. Are you the corresponding author?

Yes

No

Corresponding Author's Name

Xiaochuan Sun

5. Manuscript Title

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2. Surname (Last Name)

Sun

3. Date

08-June-2020

4. Are you the corresponding author?

Yes No

5. Manuscript Title

The relationship between estrogen-induced phenotypic transformation and proliferation of vascular smooth muscle and hypertensive intracerebral hemorrhage

6. Manuscript Identifying Number (if you know it)

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

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