

ICMJE Form for Disclosure of Potential Conflicts of Interest

Instructions

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Section 1. Identifying Information

1. Given Name (First Name) Lin	2. Surname (Last Name) Zhu	3. Date 19-August-2020
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Zhishui Chen and Bo Yang
5. Manuscript Title Protective effect of hydrogen sulfide on endothelial cells through Sirt1-FoxO1-mediated autophagy		
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Dr. Zhu has nothing to disclose.

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Wu

2. Surname (Last Name)

Duan

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19-August-2020

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Zhishui Chen and Bo Yang

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Guangjie

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Wu

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19-August-2020

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Yes No

Corresponding Author's Name

Zhishui Chen and Bo Yang

5. Manuscript Title

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4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Zhishui Chen and Bo Yang
5. Manuscript Title Protective effect of hydrogen sulfide on endothelial cells through Sirt1-FoxO1-mediated autophagy		
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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Are there any relevant conflicts of interest? Yes No

Section 4. Intellectual Property -- Patents & Copyrights

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Dr. Chen has nothing to disclose.

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Other: Anything not covered under the previous three boxes

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

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Zhishui

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19-August-2020

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Bo

2. Surname (Last Name)

Yang

3. Date

19-August-2020

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5. Manuscript Title

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