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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4. Intellectual Property.

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

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

Shi
# ICMJE Form for Disclosure of Potential Conflicts of Interest

## Section 1. Identifying Information

1. **Given Name (First Name)**
   - Rui

2. **Surname (Last Name)**
   - Shi

3. **Date**
   - 19-March-2020

4. **Are you the corresponding author?**
   - No

   **Corresponding Author’s Name**
   - Jean-Louis Teboul

5. **Manuscript Title**
   - Vasopressors in septic shock: which, when, and how much?

6. **Manuscript Identifying Number (if you know it)**
   - ATM-2019-HDM-11(ATM-19-4684)

## 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.

Place a check in the appropriate boxes in the table to indicate whether you have financial relationships (regardless of amount of compensation) with entities as described in the instructions. Use one line for each entity; add as many lines as you need by clicking the “Add +” box. You should report relationships that were present during the 36 months prior to publication. 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
Section 5. Relationships not covered above

Are there other relationships or activities that readers could perceive to have influenced, or that give the appearance of potentially influencing, what you wrote in the submitted work?

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☐ No other relationships/conditions/circumstances that present a potential conflict of interest

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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. Shi has nothing to disclose.

Evaluation and Feedback

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)  Olfa
2. Surname (Last Name)  Hamzaoui
3. Date  19-March-2020
4. Are you the corresponding author?  Yes  No  ✔
   Corresponding Author's Name  Jean-Louis Teboul
5. Manuscript Title
   Vasopressors in septic shock: which, when, and how much?
6. Manuscript Identifying Number (if you know it)
   ATM-2019-HDM-11(ATM-19-4684)

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.

Place a check in the appropriate boxes in the table to indicate whether you have financial relationships (regardless of amount of compensation) with entities as described in the instructions. Use one line for each entity; add as many lines as you need by clicking the “Add +” box. You should report relationships that were present during the 36 months prior to publication.

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         |
|------------------|--------|----------------|------------------------|--------|------------------|
| Cheetah Medical  |        | ✔              |                        |        | Lecture fees     |

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

Are there other relationships or activities that readers could perceive to have influenced, or that give the appearance of potentially influencing, what you wrote in the submitted work?

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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. Hamzaoui reports personal fees from Cheetah Medical, outside the submitted work; .

Evaluation and Feedback

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**Other:** Anything not covered under the previous three boxes

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De Vita
ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)  
   Nello

2. Surname (Last Name)  
   De Vita

3. Date  
   19-March-2020

4. Are you the corresponding author?  
   Yes  ✔  No

   Corresponding Author’s Name  
   Jean-Louis Teboul

5. Manuscript Title  
   Vasopressors in septic shock: which, when, and how much?

6. Manuscript Identifying Number (if you know it)  
   ATM-2019-HDM-11(ATM-19-4684)

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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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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?  
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Dr. De Vita has nothing to disclose.

Evaluation and Feedback

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)  Xavier
2. Surname (Last Name)  Monnet
3. Date  19-March-2020
4. Are you the corresponding author?  Yes  No
5. Manuscript Title
Vasopressors in septic shock: which, when, and how much?

6. Manuscript Identifying Number (if you know it)
ATM-2019-HDM-11(ATM-19-4684)

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If yes, please fill out the appropriate information below.

| Name of Entity        | Grant? | Personal Fees? | Non-Financial Support? | Other? | Comments                                      |
|-----------------------|--------|----------------|------------------------|--------|-----------------------------------------------|
| Getinge/Pulsion       | ☐      | ☑              | ☐                      | ☐      | member of the medical advisory board         |
| Cheetah Medical       | ☐      | ☑              | ☐                      | ☐      | lectures fees                                 |

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. Monnet reports personal fees from Getinge/Pulsion, personal fees from Cheetah Medical, outside the submitted work.

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Section 1. Identifying Information

1. Given Name (First Name)  Jean-Louis
2. Surname (Last Name)     Teboul
3. Date                    19-March-2020
4. Are you the corresponding author?  Yes ☑ No

5. Manuscript Title
   Vasopressors in septic shock: which, when, and how much?

6. Manuscript Identifying Number (if you know it)
   ATM-2019-HDM-11(ATM-19-4684)

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| Name of Entity     | Grant? | Personal Fees? | Non-Financial Support? | Other? | Comments                           |
|--------------------|--------|-----------------|-------------------------|--------|------------------------------------|
| Getinge/Pulsion    | ☐      | ☑               | ☐                       | ☐      | member of the medical advisory board |

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. Teboul reports personal fees from Getinge/Pulsion, outside the submitted work;

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