ICMJE Form for Disclosure of Potential Conflicts of Interest

**Instructions**

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1. **Identifying information.**
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.

5. **Relationships not covered above.**
   
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# ICMJE Form for Disclosure of Potential Conflicts of Interest

## Section 1. Identifying Information

1. Given Name (First Name)  
   Anxin  

2. Surname (Last Name)  
   Wang  

3. Date  
   29-January-2021  

4. Are you the corresponding author?  
   - Yes  
   - No  
   ✅ No  

   Corresponding Author’s Name  
   Yongjun Wang  

5. Manuscript Title  
   Leukocyte Subtypes and Adverse Clinical Outcomes in Patients with Acute Ischemic Cerebrovascular Events  

6. Manuscript Identifying Number (if you know it)  
   ATM-20-7931  

## 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  
   ✅ 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  
   ✅ No  

## Section 4. Intellectual Property -- Patents & Copyrights

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   - Yes  
   - No  
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Dr. Wang has nothing to disclose.

Evaluation and Feedback

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Quan
ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)  Kehua
2. Surname (Last Name)  Quan
3. Date  28-January-2021
4. Are you the corresponding author?  Yes ☐  No ☑  
   Corresponding Author’s Name  Yongjun Wang
5. Manuscript Title
   Leukocyte Subtypes and Adverse Clinical Outcomes in Patients with Acute Ischemic Cerebrovascular Events
6. Manuscript Identifying Number (if you know it)
   ATM-20-7931

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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. Quan has nothing to disclose.

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1. Given Name (First Name)  
   Xue

2. Surname (Last Name)  
   Tian

3. Date  
   29-January-2021

4. Are you the corresponding author?  
   Yes  ☑ No

   Corresponding Author’s Name  
   Yongjun Wang

5. Manuscript Title  
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Dr. Tian has nothing to disclose.

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Section 1. Identifying Information

1. Given Name (First Name)  
Yingting

2. Surname (Last Name)  
Zuo

3. Date  
29-January-2021

4. Are you the corresponding author?  

☐ Yes  
✔ No

Corresponding Author’s Name  
Yongjun Wang

5. Manuscript Title  
Leukocyte Subtypes and Adverse Clinical Outcomes in Patients with Acute Ischemic Cerebrovascular Events

6. Manuscript Identifying Number (if you know it)  
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Dr. Zuo has nothing to disclose.

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   Xia

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   Meng

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   ✔ No

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Dr. Meng has nothing to disclose.

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4. **Intellectual Property.**

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

5. **Relationships not covered above.**

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- **Royalties:** Funds are coming in to you or your institution due to your patent
## Section 1. Identifying Information

| 1. Given Name (First Name) | 2. Surname (Last Name) | 3. Date |
|---------------------------|------------------------|---------|
| Pan                       | Chen                   | 29-January-2021 |

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

   Corresponding Author’s Name  
   Yongjun Wang

5. Manuscript Title  
   Leukocyte Subtypes and Adverse Clinical Outcomes in Patients with Acute Ischemic Cerebrovascular Events

6. Manuscript Identifying Number (if you know it)  
   ATM-20-7931

## 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
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Dr. Chen has nothing to disclose.

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1. Identifying information.

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ICMJE Form for Disclosure of Potential Conflicts of Interest

**Section 1. Identifying Information**

1. Given Name (First Name)  Hao  
2. Surname (Last Name)  Li  
3. Date  29-January-2021  
4. Are you the corresponding author?  Yes  ✔  No  
   Corresponding Author’s Name  Yongjun Wang  
5. Manuscript Title  Leukocyte Subtypes and Adverse Clinical Outcomes in Patients with Acute Ischemic Cerebrovascular Events  
6. Manuscript Identifying Number (if you know it)  ATM-20-7931  

**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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ICMJE Form for Disclosure of Potential Conflicts of Interest

**Section 1. Identifying Information**

1. Given Name (First Name)  
   Yongjun

2. Surname (Last Name)  
   Wang

3. Date  
   29-January-2021

4. Are you the corresponding author?  
   ☑ Yes  ☐ No

5. Manuscript Title  
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