ICMJE Form for Disclosure of Potential Conflicts of Interest

Instructions

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<thead>
<tr>
<th>1. Given Name (First Name)</th>
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<tr>
<td>2. Surname (Last Name)</td>
<td>Zhu</td>
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<tr>
<td>3. Date</td>
<td>19-March-2020</td>
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<tr>
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<td>Yes [x] No</td>
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<tr>
<td>Corresponding Author's Name</td>
<td>Rong Zhang</td>
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<td>5. Manuscript Title</td>
<td>The effects of occupational noise exposure on the cardiovascular system: a review</td>
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## Section 4. Intellectual Property -- Patents & Copyrights

Do you have any patents, whether planned, pending or issued, broadly relevant to the work? [x] Yes No
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Dr. Zhu has nothing to disclose.

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Section 1. Identifying Information

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

Corresponding Author’s Name Rong Zhang

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Dr. Liu has nothing to disclose.

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## Section 1. Identifying Information

1. Given Name (First Name)  
   Liping  

2. Surname (Last Name)  
   Pan  

3. Date  
   19-March-2020  

4. Are you the corresponding author?  
   [ ] Yes  
   ✔ No  

   Corresponding Author’s Name  
   Rong Zhang  

5. Manuscript Title  
   The effects of occupational noise exposure on the cardiovascular system: a review  

6. Manuscript Identifying Number (if you know it)  
   JPHE-20-20-R1  

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Dr. Pan has nothing to disclose.

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1. Given Name (First Name)  Qing
2. Surname (Last Name)  Xia
3. Date  19-March-2020
4. Are you the corresponding author?  Yes  No  ✔

Corresponding Author’s Name  Rong Zhang

5. Manuscript Title  The effects of occupational noise exposure on the cardiovascular system: a review

6. Manuscript Identifying Number (if you know it)  JPHE-20-20-R1

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   Xiaoqing

2. Surname (Last Name)  
   Ji

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4. Are you the corresponding author?  
   Yes  ☑️  No

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Other: Anything not covered under the previous three boxes
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### Section 1. Identifying Information

<table>
<thead>
<tr>
<th>1. Given Name (First Name)</th>
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<tbody>
<tr>
<td>Youhong</td>
<td>Bao</td>
<td>19-March-2020</td>
</tr>
</tbody>
</table>

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

5. Manuscript Title
   The effects of occupational noise exposure on the cardiovascular system: a review

6. Manuscript Identifying Number (if you know it)
   JPHE-20-20-R1

### 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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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?  
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Do you have any patents, whether planned, pending or issued, broadly relevant to the work?  
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   ✔️ No
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Dr. Bao has nothing to disclose.

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1. Identifying information.

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## Section 1. Identifying Information

1. Given Name (First Name)  
   Yi  
2. Surname (Last Name)  
   Lin  
3. Date  
   19-March-2020  
4. Are you the corresponding author?  
   ✔ No  
   Corresponding Author’s Name  
   Rong Zhang  
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<td>Zhang</td>
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