

ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name) Wei-jie	2. Surname (Last Name) Guan	3. Date 07-May-2020
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Nan-shan Zhong
5. Manuscript Title Hydrogen/oxygen mixed gas inhalation for Coronavirus disease 2019: A multicenter, open-label clinical trial		
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

ADD

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

ADD

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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Section 5. Relationships not covered above

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Section 6. Disclosure Statement

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Dr. Guan has nothing to disclose.

Evaluation and Feedback

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Section 1. Identifying Information

1. Given Name (First Name) Chun-hua	2. Surname (Last Name) Wei	3. Date 14-May-2020
4. Are you the corresponding author? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Corresponding Author's Name Nan-shan Zhong
5. Manuscript Title Hydrogen/oxygen mixed gas inhalation for Coronavirus disease 2019: A multicenter, open-label clinical trial		
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Dr. Wei has nothing to disclose.

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Section 1. Identifying Information

1. Given Name (First Name) Ai-lan	2. Surname (Last Name) chen	3. Date 14-May-2020
4. Are you the corresponding author? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
Corresponding Author's Name Nan-shan Zhong		
5. Manuscript Title Hydrogen/oxygen mixed gas inhalation for Coronavirus disease 2019: A multicenter, open-label clinical trial		
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Dr. chen has nothing to disclose.

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name) Xiao-cong	2. Surname (Last Name) Sun	3. Date 12-May-2020
4. Are you the corresponding author? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Corresponding Author's Name Nan-shan Zhong
5. Manuscript Title Hydrogen/oxygen mixed gas inhalation for Coronavirus disease 2019: A multicenter, open-label clinical trial		
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Are there any relevant conflicts of interest? Yes No

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Dr. Sun has nothing to disclose.

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name) Guang-yun	2. Surname (Last Name) Guo	3. Date 12-May-2020
4. Are you the corresponding author? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Nan-shan Zhong	
5. Manuscript Title Hydrogen/oxygen mixed gas inhalation for Coronavirus disease 2019: A multicenter, open-label clinical trial		
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Are there any relevant conflicts of interest? Yes No

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Dr. Guo has nothing to disclose.

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1. Given Name (First Name)	2. Surname (Last Name)	3. Date
Xu	Zou	12-May-2020
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name
		Nan-shan Zhong
5. Manuscript Title	Hydrogen/oxygen mixed gas inhalation for Coronavirus disease 2019: A multicenter, open-label clinical trial	
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Dr. Zou has nothing to disclose.

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Section 1. Identifying Information

1. Given Name (First Name) Jin-dong	2. Surname (Last Name) Shi	3. Date 12-May-2020
4. Are you the corresponding author? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Corresponding Author's Name Nan-shan Zhong
5. Manuscript Title Hydrogen/oxygen mixed gas inhalation for Coronavirus disease 2019: A multicenter, open-label clinical trial		
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Dr. Shi has nothing to disclose.

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Section 1. Identifying Information

1. Given Name (First Name) Pei-zhen	2. Surname (Last Name) Lai	3. Date 12-May-2020
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Nan-shan Zhong
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Dr. Lai 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) Ze-guang	2. Surname (Last Name) Zheng	3. Date 12-May-2020
4. Are you the corresponding author? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Corresponding Author's Name Nan-shan Zhong
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Dr. Zheng has nothing to disclose.

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Section 1. Identifying Information

1. Given Name (First Name)

Nan-shan

2. Surname (Last Name)

Zhong

3. Date

05-May-2020

4. Are you the corresponding author?

Yes No

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