

ICMJE Form for Disclosure of Potential Conflicts of Interest

Instructions

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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

ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name) Rickard	2. Surname (Last Name) Zeijlon	3. Date 30-April-2015
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Pieter Cohen
5. Manuscript Title Hemorrhagic stroke probably caused by exercise combined with a sports supplement containing β -methylphenylethylamine (BMPEA)		
6. Manuscript Identifying Number (if you know it)		

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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Are there any relevant conflicts of interest? Yes No

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Do you have any patents, whether planned, pending or issued, broadly relevant to the work? Yes No

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Dr. Zeijlon 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)
Pieter

2. Surname (Last Name)
Cohen

3. Date
01-May-2015

4. Are you the corresponding author? Yes No

5. Manuscript Title
Hemorrhagic stroke probably caused by exercise combined with a sports supplement containing beta-methylphenylethylamine (BMPEA)"

6. Manuscript Identifying Number (if you know it)
L15-0106

Section 2. The Work Under Consideration for Publication

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Dr. Cohen 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) Rachel	2. Surname (Last Name) Nardin	3. Date 02-May-2015
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Pieter Cohen
5. Manuscript Title Hemorrhagic stroke probably caused by exercise combined with a sports supplement containing β -methylphenylethylamine (BMPEA)		
6. Manuscript Identifying Number (if you know it) L15-0106		

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Section 1. Identifying Information

1. Given Name (First Name) Bastiaan	2. Surname (Last Name) Venhuis	3. Date 01-May-2015
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Pieter Cohen
5. Manuscript Title Hemorrhagic stroke probably caused by exercise combined with a sports supplement containing beta-methylphenylethylamine (BMPEA)		
6. Manuscript Identifying Number (if you know it) L15-0106		

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Peter

2. Surname (Last Name)
Keizers

3. Date
01-May-2015

4. Are you the corresponding author?

Yes No

Corresponding Author's Name
Pieter Cohen

5. Manuscript Title
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