

## ICMJE Form for Disclosure of Potential Conflicts of Interest

### Instructions

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#### 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.

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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) Birkan	2. Surname (Last Name) İlhan	3. Date 31-May-2017
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Gülistan Bahat
5. Manuscript Title Treatment of hypertension in frail, functionally limited older adults		
6. Manuscript Identifying Number (if you know it) L17-0287		

### 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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Dr. İlhan 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)

Gülistan

2. Surname (Last Name)

bahat

3. Date

31-May-2017

4. Are you the corresponding author?

Yes  No

5. Manuscript Title

Treatment of hypertension in frail, functionally limited older adults

6. Manuscript Identifying Number (if you know it)

L17-0287

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Dr. bahat has nothing to disclose.

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1. Given Name (First Name)  
aslı

2. Surname (Last Name)  
tufan

3. Date

4. Are you the corresponding author?

Yes  No

Corresponding Author's Name

5. Manuscript Title  
Comment on Weiss

6. Manuscript Identifying Number (if you know it)

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### Section 1. Identifying Information

1. Given Name (First Name) Mehmet Akif	2. Surname (Last Name) Karan	3. Date 14-June-2017
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Gulistan Bahat
5. Manuscript Title Treatment of hypertension in frail, functionally limited older adults		
6. Manuscript Identifying Number (if you know it)		

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