

ICMJE Form for Disclosure of Potential Conflicts of Interest

Instructions

The purpose of this form is to provide readers of your manuscript with information about your other interests that could influence how they receive and understand your work. The form is designed to be completed electronically and stored electronically. It contains programming that allows appropriate data display. Each author should submit a separate form and is responsible for the accuracy and completeness of the submitted information. The form is in six parts.

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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) Stanley | 2. Surname (Last Name) Franklin | 3. Date 21-August-2019 |
| 4. Are you the corresponding author? | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | Corresponding Author's Name Jan A. Staessen, MD, PhD |
| 5. Manuscript Title Loose Definitions of White-Coat Hypertension Are Misleading | | |
| 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

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Dr. Franklin 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)

Jan

2. Surname (Last Name)

Staessen

3. Date

09-August-2019

4. Are you the corresponding author?

Yes No

5. Manuscript Title

Loose Definitions of White-Coat Hypertension Are Misleading

6. Manuscript Identifying Number (if you know it)

L19-0523

Section 2. The Work Under Consideration for Publication

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Dr. Staessen has nothing to disclose.

Evaluation and Feedback

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Section 1. Identifying Information

| | | |
|--|---|--------------------------------------|
| 1. Given Name (First Name) Lutgarde | 2. Surname (Last Name) Thijs | 3. Date 09-August-2019 |
| 4. Are you the corresponding author? | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | Corresponding Author's Name _____ |
| 5. Manuscript Title Loose Definitions of White-Coat Hypertension Are Misleading | | |
| 6. Manuscript Identifying Number (if you know it) Comment on Cohen M19-0223 | | |

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Dr. Thijs has nothing to disclose.

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Section 1. Identifying Information

| | | |
|--|---|--|
| 1. Given Name (First Name) Kei | 2. Surname (Last Name) Asayama | 3. Date 15-August-2019 |
| 4. Are you the corresponding author? | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | Corresponding Author's Name Jan A. Staessen |
| 5. Manuscript Title Loose Definition of White-Coat Hypertension Is Misleading | | |
| 6. Manuscript Identifying Number (if you know it) L19-0523 | | |

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Dr. Asayama has nothing to disclose.

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Section 1. Identifying Information

| | | |
|--|---|--|
| 1. Given Name (First Name) Zhen-Yu | 2. Surname (Last Name) Zhang | 3. Date 28-August-2019 |
| 4. Are you the corresponding author? | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | Corresponding Author's Name Jan A. Staessen |
| 5. Manuscript Title Loose Definition of White-Coat Hypertension Is Misleading | | |
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Dr. Zhang has nothing to disclose.

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