ICMJE Form for Disclosure of Potential Conflicts of Interest

Instructions

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)  Zhen
2. Surname (Last Name)      Xu
3. Date                     18-April-2020
4. Are you the corresponding author?  ✔ Yes    ☐ No

5. Manuscript Title
   Electrical stimulation scheme optimization for retinal prosthesis: considerations from biological perspective

6. Manuscript Identifying Number (if you know it)
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Dr. Xu has nothing to disclose.

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Section 1. Identifying Information

1. Given Name (First Name)  
Yijie

2. Surname (Last Name)  
Lu

3. Date  
18-April-2020

4. Are you the corresponding author?  
[ ] Yes  [✓] No  
Corresponding Author’s Name  
Zhen Xu

5. Manuscript Title  
Electrical stimulation scheme optimization for retinal prosthesis: considerations from biological perspective

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Dr. Lu has nothing to disclose.

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- No  

Corresponding Author’s Name  
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