

ICMJE Form for Disclosure of Potential Conflicts of Interest

Instructions

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Section 1. Identifying Information

1. Given Name (First Name) Nan	2. Surname (Last Name) Zhang	3. Date 19-March-2020
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Yu Li and Zhonghua Sun
5. Manuscript Title Spontaneous Interventricular Septum Dissecting Hematoma with Endocardial Fibroelastosis: Imaging, Diagnosis, Surgical therapy and 6 year follow-up Outcomes		
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Yu

2. Surname (Last Name)

Li

3. Date

19-March-2020

4. Are you the corresponding author?

Yes No

5. Manuscript Title

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Section 1. Identifying Information

1. Given Name (First Name)

Zhonghua

2. Surname (Last Name)

Sun

3. Date

19-March-2020

4. Are you the corresponding author?

Yes No

5. Manuscript Title

Spontaneous Interventricular Septum Dissecting Hematoma with Endocardial Fibroelastosis: Imaging, Diagnosis, Surgical therapy and 6 year follow-up Outcomes

6. Manuscript Identifying Number (if you know it)

QIMS-20-344

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.)?

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