

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.

Identifying information.

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Zhu 1



Section 1. Identifying Inforr	nation		
Given Name (First Name) Pengxiong	2. Surname (Last Name) Zhu	3. Date 09-June-2020	
4. Are you the corresponding author?	Yes 🗸 No	Corresponding Author's Name Dr Jun Liu and Dr Qiang Zhao	
5. Manuscript Title Prognostic implications of left ventricu	llar geometry in coronary a	rtery bypass grafting patients	
6. Manuscript Identifying Number (if you k QIMS-19-926	now it)		
Section 2. The Week Under C			
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Dai 1



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Given Name (First Name) Yanan	2. Surname (Last Name) Dai	3. Date 09-June-2020
4. Are you the corresponding author?	☐ Yes ✓ No	Corresponding Author's Name Dr Jun Liu and Dr Qiang Zhao
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Qiu 1



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1. Given Name (First Name) Jiapei	2. Surname (Last Name) Qiu	3. Date 09-June-2020
4. Are you the corresponding author?	Yes 🗸 No	Corresponding Author's Name Dr Jun Liu and Dr Qiang Zhao
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Xu 1



Section 1. Identifying Inform	nation		
1. Given Name (First Name) Hong	2. Surname (Last Name) Xu	3. Date 09-June-2020	
4. Are you the corresponding author?	Yes ✓ No	Corresponding Author's Name Dr Jun Liu and Dr Qiang Zhao	
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Section 3. Relevant financial	activities outside the submitted work.		
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Section 5. Polationships not sovered phase
Relationships not covered above
Are there other relationships or activities that readers could perceive to have influenced, or that give the appearance of potentially influencing, what you wrote in the submitted work?
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Dr. Zhao has nothing to disclose.

Evaluation and Feedback

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