

#### 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.

#### 1. Identifying information.

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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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Section 1.	Identifying Inform	ation				
1. Given Name (First Name) Zengxiang		2. Surname (Last Name) Dong			3. Date 21-May-2020	
4. Are you the corresponding author?		Yes 🖌 No Corresponding Author's Nar Xin Hai			me	
5. Manuscript Title The correlation b		level and hea	rt failure clas	ssification in northern Chine	ese patients	
6. Manuscript Ider APM-20-296	ntifying Number (if you kn	ow it)		-		
Section 2.						
Did you or your institution <b>at any time</b> 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 V No						
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Section 4. Intellectual Property Patents & Copyrights						

Do you have any patents, whether planned, pending or issued, broadly relevant to the work? Yes 🗸 No



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## Section 6. Disclosure Statement

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Dr. Dong has nothing to disclose.

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1. Given Name (First Name) Zhaoguang		2. Surname (Last Name) Liang			3. Date 21-May-2020	
4. Are you the corresponding author?		Yes 🖌 No Corresponding Author's Nat Xin Hai		Corresponding Author's Nar Xin Hai	me	
5. Manuscript Title The correlation b		level and h	eart failure clas	sification in northern Chine	ese patients	
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Dr. Liang has nothing to disclose.

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1. Given Name (First Name) Xinyu		2. Surname (Last Name) Wang		3. Date 21-May-2020			
4. Are you the corresponding author?		Yes 🖌 No Corresponding Author's Na Xin Hai		me			
5. Manuscript Title The correlation between plasma TMAO level and heart failure classification in northern Chinese patients							
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1. Given Name (First Name) Wensheng		2. Surname (Last Name) Liu	3. Date 21-May-2020	)		
4. Are you the corresponding author?		Yes 🖌 No	Corresponding Author's Name Xin Hai			
5. Manuscript Title The correlation b		level and heart failure cla	sification in northern Chinese patients			
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5. Manuscript Title The correlation between plasma TMAO level and heart failure classification in northern Chinese patients						
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Report all sources of revenue paid (or promised to be paid) directly to you or your institution on your behalf over the 36 months prior to submission of the work. This should include all monies from sources with relevance to the submitted work, not just monies from the entity that sponsored the research. Please note that your interactions with the work's sponsor that are outside the submitted work should also be listed here. If there is any question, it is usually better to disclose a relationship than not to do so.

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**Personal Fees:** Monies paid to you for services rendered, generally honoraria, royalties, or fees for consulting , lectures, speakers bureaus, expert testimony, employment, or other affiliations

**Non-Financial Support:** Examples include drugs/equipment supplied by the entity, travel paid by the entity, writing assistance, administrative support, etc.



Section 1. Identifying Inform	nation					
1. Given Name (First Name) Xin	2. Surname (Last Name) Hai	3. Date 22-May-2020				
4. Are you the corresponding author?	✓ Yes No					
5. Manuscript Title The correlation between plasma TMAC	level and heart failure classification in northern Chin	lese patients				
6. Manuscript Identifying Number (if you ki APM-20-296	now it)					
Section 2. The Work Under C	onsideration for Publication					
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Section 3. Belovent financial						
Relevant financial	activities outside the submitted work.					
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Section 4. Intellectual Prope	rty Patents & Copyrights					
Do you have any patents, whether planned, pending or issued, broadly relevant to the work? 🗌 Yes 🖌 No						



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Section 1.							
ldentifying	Identifying Information						
1. Given Name (First Name) Kaijiang	2. Surname (Last Name) Yu	3. Date 22-May-2020					
4. Are you the corresponding auth	or? 🖌 Yes 🗌 No						
5. Manuscript Title The correlation between plasm	a TMAO level and heart failure classificatior	n in northern Chinese patients					
6. Manuscript Identifying Number APM-20-296	(if you know it)						
Section 2. The Work U	nder Consideration for Publication						
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Do you have any patents, whether planned, pending or issued, broadly relevant to the work? Yes 🖌 No							



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Dr. Yu has nothing to disclose.

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