

Instructions

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Goddet 1



| Section 1. | Identifying Inform | ation | | | | |
|---|--|---------------------------------------|-------------------------|--------------------|-------------------------|----------------------|
| 1. Given Name (Fir Nathalie-Sybille | rst Name) | 2. Surname (La Goddet | st Name) | | 3. Date 01-April-201 | 17 |
| 4. Are you the corresponding author? | | ✓ Yes | No | | | |
| 5. Manuscript Title Elevated D-dime | r in patient with acute | aortic dissectio | า | | | |
| 6. Manuscript lder JXYM-17-40 | ntifying Number (if you kn | ow it) | | | | |
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| any aspect of the si statistical analysis, | titution at any time receiubmitted work (including etc.)? evant conflicts of intere | but not limited t | | | | |
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| Section 4. | Intellectual Proper | ty Patents a | & Copyrights | | | |
| Do you have any | patents, whether plan | ned, pending o | rissued, broadly relev | ant to the work? | Yes | ✓ No |

Goddet 2



| Section 5. | |
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| | elationships or activities that readers could perceive to have influenced, or that give the appearance of ncing, what you wrote in the submitted work? |
| Yes, the follow | wing relationships/conditions/circumstances are present (explain below): |
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| | anuscript acceptance, journals will ask authors to confirm and, if necessary, update their disclosure statements rnals may ask authors to disclose further information about reported relationships. |
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| Dr. Goddet has n | nothing to disclose. |

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Fayard 1



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|--|----------------------------|---|--|
| 1. Given Name (Fi Maxime | rst Name) | 2. Surname (Last Name) Fayard | 3. Date 01-April-2017 |
| 4. Are you the cor | responding author? | ☐ Yes 🗸 No | Corresponding Author's Name Nathalie-Sybille Goddet |
| 5. Manuscript Title Elevated D-dime | er in patient with acute | aortic dissection | |
| 6. Manuscript Ide | ntifying Number (if you kr | now it) | |
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| Do you have any | patents, whether plan | ned, pending or issued, br | roadly relevant to the work? Yes V No |

Fayard 2



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| Based on the abo | ove disclosures, this form will automatically generate a disclosure statement, which will appear in the box | | | | |
| Dr. Fayard has n | othing to disclose. | | | | |

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Bouchot 1



| Section 1. | Identifying Inform | nation | |
|--|----------------------------|--|--|
| 1. Given Name (Fir Olivier | rst Name) | 2. Surname (Last Name) Bouchot | 3. Date 01-April-2017 |
| 4. Are you the corresponding author? | | Yes ✓ No | Corresponding Author's Name Nathalie-Sybille Goddet |
| 5. Manuscript Title Elevated D-dime | r in patient with acute | aortic dissection | |
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| Do you have any | patents, whether plan | ned, pending or issued, br | oadly relevant to the work? Yes V No |

Bouchot 2



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| Dr. Bouchot has | nothing to disclose. | | | | |

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| 4. Are you the corresponding author? | | Yes ✓ No | Corresponding Author's Name Nathalie-Sybille Goddet | |
| 5. Manuscript Title Elevated D-dime | e er in patient with acute | aortic dissection | | |
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| Place a check in the appropriate boxes in the table to indicate whether you have financial relationships (regardless of amount of compensation) with entities as described in the instructions. Use one line for each entity; add as many lines as you need by clicking the "Add +" box. You should report relationships that were present during the 36 months prior to publication . Are there any relevant conflicts of interest? Yes Vo | | | | |
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| Do you have any patents, whether planned, pending or issued, broadly relevant to the work? Yes Vo | | | | |

Bete 2



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Decrouy 2



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For grants you have received for work outside the submitted work, you should disclose support ONLY from entities that could be perceived to be affected financially by the published work, such as drug companies, or foundations supported by entities that could be perceived to have a financial stake in the outcome. Public funding sources, such as government agencies, charitable foundations or academic institutions, need not be disclosed. For example, if a government agency sponsored a study in which you have been involved and drugs were provided by a pharmaceutical company, you need only list the pharmaceutical company.

Intellectual Property.

This section asks about patents and copyrights, whether pending, issued, licensed and/or receiving royalties.

Relationships not covered above.

Use this section to report 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.

Definitions.

Entity: government agency, foundation, commercial sponsor, academic institution, etc.

Grant: A grant from an entity, generally [but not always] paid to your organization

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.

Other: Anything not covered under the previous three boxes

Pending: The patent has been filed but not issued **Issued:** The patent has been issued by the agency

Licensed: The patent has been licensed to an entity, whether

earning royalties or not

Royalties: Funds are coming in to you or your institution due to your

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| Section 1. Identifying Inform | nation | |
|--|--|--|
| 1. Given Name (First Name) David | 2. Surname (Last Name) Corege | 3. Date 01-April-2017 |
| 4. Are you the corresponding author? | ☐ Yes ✓ No | Corresponding Author's Name Nathalie-Sybille Goddet |
| 5. Manuscript Title Elevated D-dimer in patient with acute aortic dissection | | |
| 6. Manuscript Identifying Number (if you k JXYM-17-40 | now it) | _ |
| | | |
| Section 2. The Work Under C | onsideration for Public | cation |
| | g but not limited to grants, da | a third party (government, commercial, private foundation, etc.) for ata monitoring board, study design, manuscript preparation, |
| Section 3. Relevant financial | activities outside the s | submitted work. |
| of compensation) with entities as descr | ribed in the instructions. Us port relationships that wer | ether you have financial relationships (regardless of amount se one line for each entity; add as many lines as you need by re present during the 36 months prior to publication . |
| Section 4. Intellectual Prope | rty Patents & Copyri | ghts |
| Do you have any patents, whether plan | nned, pending or issued, br | roadly relevant to the work? Yes V No |

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| Section 5. | | |
|---|--|--|
| Section 5. | Relationships not covered above | |
| | elationships or activities that readers could perceive to have influenced, or that give the appearance of ncing, what you wrote in the submitted work? | |
| Yes, the follow | wing relationships/conditions/circumstances are present (explain below): | |
| ✓ No other rela | tionships/conditions/circumstances that present a potential conflict of interest | |
| At the time of manuscript acceptance, journals will ask authors to confirm and, if necessary, update their disclosure statements. On occasion, journals may ask authors to disclose further information about reported relationships. | | |
| Section 6. | Disclosure Statement | |
| Based on the abo | ove disclosures, this form will automatically generate a disclosure statement, which will appear in the box | |
| Dr. Corege has n | othing to disclose. | |

Evaluation and Feedback

Please visit http://www.icmje.org/cgi-bin/feedback to provide feedback on your experience with completing this form.

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