Your Name: Jun-Yu Chen

Manuscript Title: Modification of m6A mediates tissue immune microenvironment in calcific aortic valve disease

Manuscript number (if known):_____

In the interest of transparency, we ask you to disclose all relationships/activities/interests listed below that are related to the content of your manuscript. "Related" means any relation with for-profit or not-for-profit third parties whose interests may be affected by the content of the manuscript. Disclosure represents a commitment to transparency and does not necessarily indicate a bias. If you are in doubt about whether to list a relationship/activity/interest, it is preferable that you do so.

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		Name all entities with whom you have this relationship or indicate none (add rows as needed) Time frame: Since the initial	Specifications/Comments (e.g., if payments were made to you or to your institution) planning of the work
1	All support for the present manuscript (e.g., funding, provision of study materials, medical writing, article processing charges, etc.) No time limit for this item.	None	
2	Grants or contracts from any entity (if not indicated in item #1 above).	None	36 months
3	Royalties or licenses	None	
4	Consulting fees	None	

-	5		
5	Payment or honoraria for	None	
	lectures, presentations,		
	speakers bureaus, manuscript writing or		
	educational events		
6	Payment for expert	None	
	testimony		
	•		
7	Support for attending meetings and/or travel	None	
8	Patents planned, issued or	None	
	pending		
9	Participation on a Data	None	
	Safety Monitoring Board or Advisory Board		
10	Leadership or fiduciary role	None	
10	in other board, society,	None	
	committee or advocacy		
	group, paid or unpaid		
11	Stock or stock options	None	
12	Receipt of equipment,	None	
	materials, drugs, medical writing, gifts or other		
	services		
13	Other financial or non-	None	
	financial interests		
	ease summarize the above c	onflict of interest in the fo	lowing box:

None.			

ICMJE DISCLOSURE FORM

Date: 2022.07.18 Your Name: Tao Xiong

Manuscript Title: Modification of m6A mediates tissue immune microenvironment in calcific aortic valve disease

Manuscript number (if known):

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3	Royalties or licenses	None	
4	Consulting fees	None	

5	Payment or honoraria for lectures, presentations,	None	
	speakers bureaus,		
	manuscript writing or		
	educational events		
6	Payment for expert	None	
	testimony		
7	Support for attending meetings and/or travel	None	
8	Patents planned, issued or	None	
	pending		
9	Participation on a Data	None	
	Safety Monitoring Board or		
	Advisory Board		
10	Leadership or fiduciary role	None	
	in other board, society, committee or advocacy		
	group, paid or unpaid		
11	Stock or stock options	None	
12	Receipt of equipment,	None	
	materials, drugs, medical		
	writing, gifts or other services		
13	Other financial or non-	None	
	financial interests		

Please summarize the above conflict of interest in the following box:

No	one.		

Please place an "X" next to the following statement to indicate your agreement:

Your Name: Ya-Ru Sun

Manuscript Title: Modification of m6A mediates tissue immune microenvironment in calcific aortic valve disease

Manuscript number (if known):______

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3	Royalties or licenses	None	
4	Consulting fees	None	

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5	Payment or honoraria for	None	
	lectures, presentations,		
	speakers bureaus, manuscript writing or		
	educational events		
6	Payment for expert	None	
	testimony		
	•		
7	Support for attending meetings and/or travel	None	
8	Patents planned, issued or	None	
	pending		
9	Participation on a Data	None	
	Safety Monitoring Board or Advisory Board		
10	Leadership or fiduciary role	None	
10	in other board, society,	None	
	committee or advocacy		
	group, paid or unpaid		
11	Stock or stock options	None	
12	Receipt of equipment,	None	
	materials, drugs, medical writing, gifts or other		
	services		
13	Other financial or non-	None	
	financial interests		
	ease summarize the above c	onflict of interest in the fo	lowing box:

None.			

Your Name: Juan Cong

Manuscript Title: Modification of m6A mediates tissue immune microenvironment in calcific aortic valve disease

Manuscript number (if known):______

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4	Consulting fees	None	

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5	Payment or honoraria for	None	
	lectures, presentations,		
	speakers bureaus, manuscript writing or		
	educational events		
6	Payment for expert	None	
	testimony		
	•		
7	Support for attending meetings and/or travel	None	
8	Patents planned, issued or	None	
	pending		
9	Participation on a Data	None	
	Safety Monitoring Board or Advisory Board		
10	Leadership or fiduciary role	None	
10	in other board, society,	None	
	committee or advocacy		
	group, paid or unpaid		
11	Stock or stock options	None	
12	Receipt of equipment,	None	
	materials, drugs, medical writing, gifts or other		
	services		
13	Other financial or non-	None	
	financial interests		
	ease summarize the above c	onflict of interest in the fo	lowing box:

None.			

Your Name: Jing-Shuai Gong

In the interest of transparency, we ask you to disclose all relationships/activities/interests listed below that are related to the content of your manuscript. "Related" means any relation with for-profit or not-for-profit third parties whose interests may be affected by the content of the manuscript. Disclosure represents a commitment to transparency and does not necessarily indicate a bias. If you are in doubt about whether to list a relationship/activity/interest, it is preferable that you do so.

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3	Royalties or licenses	None	
4	Consulting fees	None	

5	Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or educational events Payment for expert	None			
J	testimony	Tronc			
7	Support for attending meetings and/or travel	None			
8	Patents planned, issued or pending	None			
9	Participation on a Data Safety Monitoring Board or Advisory Board	None			
10	Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid	None			
11	Stock or stock options	None			
12	Receipt of equipment, materials, drugs, medical writing, gifts or other services	None			
13	Other financial or non- financial interests	None			
Ple	Please summarize the above conflict of interest in the following box:				

None.		

Date: <u>2022.07.18</u> Your Name: <u>Lei Peng</u>

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3	Royalties or licenses	None	
4	Consulting fees	None	

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5	Payment or honoraria for	None	
	lectures, presentations,		
	speakers bureaus, manuscript writing or		
	educational events		
6	Payment for expert	None	
	testimony		
	•		
7	Support for attending meetings and/or travel	None	
8	Patents planned, issued or	None	
	pending		
9	Participation on a Data	None	
	Safety Monitoring Board or Advisory Board		
10	Leadership or fiduciary role	None	
10	in other board, society,	None	
	committee or advocacy		
	group, paid or unpaid		
11	Stock or stock options	None	
12	Receipt of equipment,	None	
	materials, drugs, medical writing, gifts or other		
	services		
13	Other financial or non-	None	
	financial interests		
	ease summarize the above c	onflict of interest in the fo	lowing box:

None.			

Your Name: Yu-Wang Rong

Manuscript Title: Modification of m6A mediates tissue immune microenvironment in calcific aortic valve disease

Manuscript number (if known):______

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6	Payment for expert	None	
	testimony		
	•		
7	Support for attending meetings and/or travel	None	
8	Patents planned, issued or	None	
	pending		
9	Participation on a Data	None	
	Safety Monitoring Board or Advisory Board		
10	Leadership or fiduciary role	None	
10	in other board, society,	None	
	committee or advocacy		
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11	Stock or stock options	None	
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	materials, drugs, medical writing, gifts or other		
	services		
13	Other financial or non-	None	
	financial interests		
	ease summarize the above c	onflict of interest in the fo	lowing box:

None.			

Your Name: Zi-Yao Wang

Manuscript Title: Modification of m6A mediates tissue immune microenvironment in calcific aortic valve disease

Manuscript number (if known):_____

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3	Royalties or licenses	None	
4	Consulting fees	None	

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5	Payment or honoraria for	None	
	lectures, presentations,		
	speakers bureaus, manuscript writing or		
	educational events		
6	Payment for expert	None	
	testimony		
	•		
7	Support for attending meetings and/or travel	None	
8	Patents planned, issued or	None	
	pending		
9	Participation on a Data	None	
	Safety Monitoring Board or Advisory Board		
10	Leadership or fiduciary role	None	
10	in other board, society,	None	
	committee or advocacy		
	group, paid or unpaid		
11	Stock or stock options	None	
12	Receipt of equipment,	None	
	materials, drugs, medical writing, gifts or other		
	services		
13	Other financial or non-	None	
	financial interests		
	ease summarize the above c	onflict of interest in the fo	lowing box:

None.			

Your Name: Qing Chang

Manuscript Title: Modification of m6A mediates tissue immune microenvironment in calcific aortic valve disease

Manuscript number (if known):______

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4	Consulting fees	None	

-							
5	Payment or honoraria for lectures, presentations, speakers bureaus,	None					
	manuscript writing or						
	educational events						
6	Payment for expert testimony	None					
7	Support for attending meetings and/or travel	None					
8	Patents planned, issued or pending	None					
•		A1					
9	Participation on a Data	None					
	Safety Monitoring Board or Advisory Board						
10	Leadership or fiduciary role	None					
	in other board, society,						
	committee or advocacy						
	group, paid or unpaid						
11	Stock or stock options	None					
12	Receipt of equipment,	None					
12	materials, drugs, medical	None					
	writing, gifts or other						
	services						
13	Other financial or non- financial interests	None					
	Please summarize the above conflict of interest in the following box:						

None.			