

ICMJE Form for Disclosure of Potential Conflicts of Interest

Instructions

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

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

ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name) yongtai	2. Surname (Last Name) liu	3. Date 29-November-2020
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Shu-Yang Zhang
5. Manuscript Title Right Ventricular Systolic Function Is Associated with Health-Related Quality of Life: A Cross-Sectional Study in Community-Dwelling Populations		
6. Manuscript Identifying Number (if you know it) ATM-20-6845		

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Dr. liu has nothing to disclose.

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4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Shu-Yang Zhang
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4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Shu-Yang Zhang
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lixin

2. Surname (Last Name)

zhou

3. Date

29-November-2020

4. Are you the corresponding author?

Yes No

Corresponding Author's Name

Shu-Yang Zhang

5. Manuscript Title

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

ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name) jun	2. Surname (Last Name) ni	3. Date 29-November-2020
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Shu-Yang Zhang
5. Manuscript Title Right Ventricular Systolic Function Is Associated with Health-Related Quality of Life: A Cross-Sectional Study in Community-Dwelling Populations		
6. Manuscript Identifying Number (if you know it) ATM-20-6845		

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Are there any relevant conflicts of interest? Yes No

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Are there any relevant conflicts of interest? Yes No

Section 4. Intellectual Property -- Patents & Copyrights

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

ICMJE Form for Disclosure of Potential Conflicts of Interest

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Dr. ni has nothing to disclose.

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ICMJE Form for Disclosure of Potential Conflicts of Interest

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1. Given Name (First Name) ming	2. Surname (Last Name) yao	3. Date 29-November-2020
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Shu-Yang Zhang
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Dr. yao has nothing to disclose.

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name) zhuang	2. Surname (Last Name) tian	3. Date 29-November-2020
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Shu-Yang Zhang
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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name) yanlin	2. Surname (Last Name) zhu	3. Date 29-November-2020
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Shu-Yang Zhang
5. Manuscript Title Right Ventricular Systolic Function Is Associated with Health-Related Quality of Life: A Cross-Sectional Study in Community-Dwelling Populations		
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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

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wei

2. Surname (Last Name)

chen

3. Date

29-November-2020

4. Are you the corresponding author?

Yes No

Corresponding Author's Name

Shu-Yang Zhang

5. Manuscript Title

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6. Manuscript Identifying Number (if you know it)

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1. Given Name (First Name) hua	2. Surname (Last Name) bai	3. Date 29-November-2020
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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name) hui	2. Surname (Last Name) wang	3. Date 29-November-2020
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Shu-Yang Zhang
5. Manuscript Title Right Ventricular Systolic Function Is Associated with Health-Related Quality of Life: A Cross-Sectional Study in Community-Dwelling Populations		
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Dr. wang has nothing to disclose.

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name) liying	2. Surname (Last Name) cui	3. Date 29-November-2020
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Shu-Yang Zhang
5. Manuscript Title Right Ventricular Systolic Function Is Associated with Health-Related Quality of Life: A Cross-Sectional Study in Community-Dwelling Populations		
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1. Given Name (First Name) zhengyu	2. Surname (Last Name) jin	3. Date 29-November-2020
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1. Given Name (First Name)
shuyang

2. Surname (Last Name)
zhang

3. Date
29-November-2020

4. Are you the corresponding author? Yes No

5. Manuscript Title
Right Ventricular Systolic Function Is Associated with Health-Related Quality of Life: A Cross-Sectional Study in Community-Dwelling Populations

6. Manuscript Identifying Number (if you know it)
ATM-20-6845

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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Dr. zhang has nothing to disclose.

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