

ICMJE DISCLOSURE FORM

Date 25 April 2022

Your Name: Attila Nemes

Manuscript Title Left ventricular rotational abnormalities in patients with transposition of the great arteries late after atrial switch operation - Detailed analysis from the three-dimensional speckle-tracking echocardiographic MAGYAR-Path Study

Manuscript number (if known): CDT-22-207

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)	Specifications/Comments (e.g., if payments were made to you or to your institution)
Time frame: Since the initial planning of the work			
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3	Royalties or licenses	x None	
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5	Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or educational events	<input checked="" type="checkbox"/> None	
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12	Receipt of equipment, materials, drugs, medical writing, gifts or other services	<input checked="" type="checkbox"/> None	
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Your Name: Árpád Kormányos

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Your Name: Zoltán Ruzsa

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Your Name: Nóra Ambrus

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