Your Name: Sachini Ranasinghe

Manuscript Title: Association of Abnormal Electrocardiography Response on Dobutamine Stress Echocardiogram with

Longer-term Major Adverse Cardiovascular Events in Women with Symptoms of Ischemic Heart 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.

The following questions apply to the author's relationships/activities/interests as they relate to the <u>current manuscript only</u>.

The author's relationships/activities/interests should be <u>defined broadly</u>. For example, if your manuscript pertains to the epidemiology of hypertension, you should declare all relationships with manufacturers of antihypertensive medication, even if that medication is not mentioned in the manuscript.

		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
1	All support for the present	_xNone	
	manuscript (e.g., funding,		
	provision of study materials,		
	medical writing, article processing charges, etc.)		
	No time limit for this item.		
	No time limit for this item.		
		Time frame: past	26 months
2	Grants or contracts from	•	30 months
2	any entity (if not indicated	_xNone	
	in item #1 above).		
3	Royalties or licenses	x None	
	1112,4111111111111111111111111111111111		
4	Consulting fees	xNone	

5	Payment or honoraria for	xNone	
	lectures, presentations,		
	speakers bureaus,		
	manuscript writing or		
	educational events		
6	Payment for expert	_xNone	
	testimony		
-	6 16 11 1:	N	
7	Support for attending meetings and/or travel	xNone	
	_		
8	Patents planned, issued or	x None	
	pending		
9	Participation on a Data	_xNone	
	Safety Monitoring Board or		
	Advisory Board		
10	Leadership or fiduciary role	x_None	
	in other board, society,		
	committee or advocacy		
	group, paid or unpaid		
11	Stock or stock options	_xNone	
12	Descipt of agricument	v. Nana	
12	Receipt of equipment, materials, drugs, medical	_xNone	
	writing, gifts or other		
	services		
13	Other financial or non-	x None	
	financial interests		
Plea	se summarize the above co	nflict of interest in the fol	owing box:

Date: 07/09/2023
Your Name: Benita Tjoe
Manuscript Title: Association of Abnormal Electrocardiography Response on Dobutamine Stress Echocardiogram with

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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)
	T		planning of the work
1	All support for the present	_xNone	
	manuscript (e.g., funding,		
	provision of study materials,		
	medical writing, article		
	processing charges, etc.)  No time limit for this item.		
	No time limit for this item.		
		Time frame: past	36 months
2	Grants or contracts from	_xNone	
	any entity (if not indicated		
	in item #1 above).		
3	Royalties or licenses	_xNone	
4	Consulting fees	xNone	

5	Payment or honoraria for	xNone	
	lectures, presentations,		
	speakers bureaus,		
	manuscript writing or		
	educational events		
6	Payment for expert	_xNone	
	testimony		
-	6 16 11 1:	N	
7	Support for attending meetings and/or travel	xNone	
	_		
8	Patents planned, issued or	x None	
	pending		
9	Participation on a Data	_xNone	
	Safety Monitoring Board or		
	Advisory Board		
10	Leadership or fiduciary role	x_None	
	in other board, society,		
	committee or advocacy		
	group, paid or unpaid		
11	Stock or stock options	_xNone	
12	Descipt of agricument	v. Nana	
12	Receipt of equipment, materials, drugs, medical	_xNone	
	writing, gifts or other		
	services		
13	Other financial or non-	x None	
	financial interests		
Plea	se summarize the above co	nflict of interest in the fol	owing box:

Date: 07/05/2023
------------------

Your Name: Chrisandra Shufelt

Manuscript Title: Association of Abnormal Electrocardiography Response on Dobutamine Stress Echocardiogram with

Longer-term Major Adverse Cardiovascular Events in Women with Symptoms of Ischemic Heart Disease

Manuscript number (if known) :\_\_\_\_\_

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		Time frame: Since the initial	planning of the work
1	All support for the present manuscript (e.g., funding, provision of study materials,	_xNone	
	medical writing, article		
	processing charges, etc.)		
	No time limit for this item.		
		Time frame: past	36 months
2	Grants or contracts from	_xNone	
	any entity (if not indicated		
	in item #1 above).		
3	Royalties or licenses	_xNone	
4	Consulting fees	x_None	

5	Payment or honoraria for	xNone	
	lectures, presentations,		
	speakers bureaus,		
	manuscript writing or		
	educational events		
6	Payment for expert	_xNone	
	testimony		
-	6 16 11 1:	N	
7	Support for attending meetings and/or travel	xNone	
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8	Patents planned, issued or	x None	
	pending		
9	Participation on a Data	_xNone	
	Safety Monitoring Board or		
	Advisory Board		
10	Leadership or fiduciary role	x_None	
	in other board, society,		
	committee or advocacy		
	group, paid or unpaid		
11	Stock or stock options	_xNone	
12	Descipt of agricument	v. Nana	
12	Receipt of equipment, materials, drugs, medical	_xNone	
	writing, gifts or other		
	services		
13	Other financial or non-	x None	
	financial interests		
Plea	se summarize the above co	nflict of interest in the fol	owing box:

Date:7/5/2023
Your Name:Janet Wei
Manuscript Title: Association of Abnormal Electrocardiography Response on Dobutamine Stress
Echocardiogram with Longer-term Major Adverse Cardiovascular Events in Women with
Symptoms of Ischemic Heart 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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		Time frame: Since the initial	planning of the work
1	All support for the present	None	
	manuscript (e.g., funding,		
	provision of study materials,		
	medical writing, article		
	processing charges, etc.)		
	No time limit for this item.		
		Time frame: past	36 months
2	Grants or contracts from	None	
	any entity (if not indicated		
	in item #1 above).		
3	Royalties or licenses	None	
4	Consulting fees	None	

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

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

I received honoraria to participate in a Coronary Microvascular Dysfunction Advisory Board for Abbott Vascular, paid to institution.

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

X_ I certify that I have answered every question and have not altered the wording of a form.	any of the questions on this

Your Name: Marie Lauzon

Manuscript Title: Association of Abnormal Electrocardiography Response on Dobutamine Stress Echocardiogram with

Longer-term Major Adverse Cardiovascular Events in Women with Symptoms of Ischemic Heart Disease

Manuscript number (if known) :\_\_\_\_\_\_

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		Time frame: Since the initial	planning of the work
1	All support for the present manuscript (e.g., funding, provision of study materials,	_xNone	
	medical writing, article		
	processing charges, etc.)		
	No time limit for this item.		
		Time frame: past	36 months
2	Grants or contracts from	_xNone	
	any entity (if not indicated		
	in item #1 above).		
3	Royalties or licenses	_xNone	
4	Consulting fees	x_None	

5	Payment or honoraria for	xNone	
	lectures, presentations,		
	speakers bureaus,		
	manuscript writing or		
	educational events		
6	Payment for expert	_xNone	
	testimony		
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7	Support for attending meetings and/or travel	xNone	
	_		
8	Patents planned, issued or	x None	
	pending		
9	Participation on a Data	_xNone	
	Safety Monitoring Board or		
	Advisory Board		
10	Leadership or fiduciary role	x_None	
	in other board, society,		
	committee or advocacy		
	group, paid or unpaid		
11	Stock or stock options	_xNone	
12	Descipt of agricument	v. Nana	
12	Receipt of equipment,	_xNone	
	materials, drugs, medical writing, gifts or other services		
13	Other financial or non-	x None	
	financial interests		
Plea	se summarize the above co	nflict of interest in the fol	owing box:

Date:July 5, 2023
Your Name:Judy Luu
Manuscript Title: Association of Abnormal Electrocardiography Response on Dobutamine Stress Echocardiogram
with Longer-term Major Adverse Cardiovascular Events in Women with Symptoms of Ischemic Heart Disease
Manuscript number (if known):

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		Time frame: Since the initial	planning of the work
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		Time frame: past	36 months
2	Grants or contracts from any entity (if not indicated in item #1 above).	XNone	
3	Royalties or licenses	_X_None	
4	Consulting fees	XNone	

		1	
5	Payment or honoraria for	XNone	
	lectures, presentations,		
	speakers bureaus,		
	manuscript writing or		
	educational events		
6	Payment for expert testimony	XNone	
7	Support for attending meetings and/or travel	XNone	
	G ,		
8	Patents planned, issued or	XNone	
	pending		
9	Participation on a Data Safety Monitoring Board or Advisory Board	XNone	
10	10 Leadership or fiduciary role in other board, society, committee or advocacy	XNone	
	group, paid or unpaid		
11	Stock or stock options	XNone	
12	Receipt of equipment,	XNone	
	materials, drugs, medical		
	writing, gifts or other services		
13	Other financial or non-	XNone	
	financial interests		
		•	•

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

NA			

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

Date: 07/07/2023
Your Name: Anum Asif
Manuscript Title: Association of Abnormal Electrocardiography Response on Dobutamine Stress Echocardiogram with
Longer-term Major Adverse Cardiovascular Events in Women with Symptoms of Ischemic Heart Disease

Manuscript number (if known) :\_\_\_\_\_

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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)
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.	_xNone	
		Time frame: past	36 months
2	Grants or contracts from any entity (if not indicated in item #1 above).	_xNone	
3	Royalties or licenses	_xNone	
4	Consulting fees	xNone	

5	Payment or honoraria for	xNone	
	lectures, presentations,		
	speakers bureaus,		
	manuscript writing or		
	educational events		
6	Payment for expert	_xNone	
	testimony		
-	6 16 11 1:	N	
7	Support for attending meetings and/or travel	xNone	
	_		
8	Patents planned, issued or	x None	
	pending		
9	Participation on a Data	_xNone	
	Safety Monitoring Board or		
	Advisory Board		
10	Leadership or fiduciary role	x_None	
	in other board, society,		
	committee or advocacy		
	group, paid or unpaid		
11	Stock or stock options	_xNone	
12	Descipt of agricument	v. Nana	
12	Receipt of equipment,	_xNone	
	materials, drugs, medical writing, gifts or other services		
13	Other financial or non-	x None	
	financial interests		
Plea	se summarize the above co	nflict of interest in the fol	owing box:

Date:07/06/2023
Your Name:Jannet F. Lewis
Manuscript Title: Association of Abnormal Electrocardiography Response on Dobutamine Stress
Echocardiogram with Longer-term Major Adverse Cardiovascular Events in Women with Symptoms of
Ischemic Heart Disease
Manuscript number (if known):

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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)
1	All support for the present	I	planning of the work
1	All support for the present manuscript (e.g., funding,	XNone	
	provision of study materials,		
	medical writing, article		
	processing charges, etc.)		
	No time limit for this item.		
		Time frame: past	36 months
2	Grants or contracts from	X None	50 months
	any entity (if not indicated		
	in item #1 above).		
3	Royalties or licenses	_XNone	
	0 111 6	, , , , , , , , , , , , , , , , , , ,	
4	Consulting fees	_XNone	

5	Payment or honoraria for	_XNone			
	lectures, presentations,				
	speakers bureaus,				
	manuscript writing or				
	educational events				
6	Payment for expert	_XNone			
	testimony				
7	Support for attending meetings and/or travel	_XNone			
8	Patents planned, issued or	_XNone			
	pending				
9	Participation on a Data	_XNone			
	Safety Monitoring Board or				
	Advisory Board				
10	Leadership or fiduciary role	XNone			
	in other board, society,				
	committee or advocacy				
	group, paid or unpaid				
11	Stock or stock options	XNone			
12	Receipt of equipment,	XNone			
	materials, drugs, medical				
	writing, gifts or other				
12	services	V Nove			
13	Other financial or non- financial interests	XNone			
	ilianciai interests				
DI.			fall and a han		
PIE	Please summarize the above conflict of interest in the following box:				

I have no conflicts of interest.		

_X I certify that I have answered every question and har form.	ve not altered the wording of any of the questions on this

Date:	7/06/2023
Your Name:	Carl J. Pepine
Manuscript Title:_	Association of Abnormal Electrocardiography Response on Dobutamine Stress Echocardiogram
with Longer-term	Major Adverse Cardiovascular Events in Women with Symptoms of Ischemic Heart Disease
Manuscript numb	er (if known):

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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)
1	All support for the present	X_None	promissing of the north
	manuscript (e.g., funding,		
	provision of study materials,		
	medical writing, article processing charges, etc.)		
	No time limit for this item.		
		Time frame: past	36 months
2	Grants or contracts from	XNone	
	any entity (if not indicated in item #1 above).		
3	Royalties or licenses	X None	
3	Noyanics of ficefises	NONE	
4	Consulting fees	XNone	

5	Payment or honoraria for	XNone	
	lectures, presentations,		
	speakers bureaus,		
	manuscript writing or		
	educational events		
6	Payment for expert	XNone	
	testimony		
7	Support for attending meetings and/or travel	XNone	
	-		
8	Patents planned, issued or	XNone	
	pending		
9	Participation on a Data	XNone	
	Safety Monitoring Board or		
	Advisory Board		
10	Leadership or fiduciary role	XNone	
	in other board, society,		
	committee or advocacy		
	group, paid or unpaid		
11	Stock or stock options	XNone	
12	Receipt of equipment,	XNone	
	materials, drugs, medical		
	writing, gifts or other		
40	services		
13	Other financial or non-	XNone	
	financial interests		

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

None declared			

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

0= /0= /0000

Date:0//05/202	3
Your Name:	_Leslee J. Shaw
Manuscript Title:	_ Association of Abnormal Electrocardiography Response on Dobutamine
Stress Echocard	iogram with Longer-term Major Adverse Cardiovascular Events in Women with
Symptoms of Iso	hemic Heart
Disease	
Manuscript number	(if known):

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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	
		Time frame: past	36 months
2	Grants or contracts from any entity (if not indicated in item #1 above).	None	
3	Royalties or licenses	None	

	Ι	1	T	
4	Consulting fees	None		
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		
	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			
Plea	ase summarize the above co	nflict of interest in the foll	owing box:	
1	have nothing to declare.			

_x I certify that I have form.	e answered every questi	on and have not altere	d the wording of any of	the questions on this

Date:	7/06/2023		
Your Name:	Eileen M. Handberg		
Manuscript Title:_	Association of Abnormal Electrocardiography Response on Dobutamine Stress Echocardiogram		
with Longer-term Major Adverse Cardiovascular Events in Women with Symptoms of Ischemic Heart Disease			
Manuscript number	er (if known):		

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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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		Time frame: past	36 months
2	Grants or contracts from any entity (if not indicated in item #1 above).	XNone	
3	Royalties or licenses	XNone	
4	Consulting fees	XNone	

5	lectures, presentations,	XNone	
	speakers bureaus,		
	manuscript writing or		
	educational events		
6	Payment for expert	XNone	
	testimony		
7	Support for attending meetings and/or travel	XNone	
8	Patents planned, issued or	XNone	
	pending		
9	Participation on a Data	XNone	
	Safety Monitoring Board or		
	Advisory Board		
10	Leadership or fiduciary role	XNone	
	in other board, society,		
	committee or advocacy		
	group, paid or unpaid		
11	Stock or stock options	XNone	
12	Receipt of equipment, materials, drugs, medical	XNone	
	writing, gifts or other services		
13	Other financial or non-	XNone	
	financial interests		
	ase summarize the above co	onflict of interest in the fol	lowing box:

None declared			

Date:	07/12/23
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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)
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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.	_XNone	
		Time frame: past	36 months
2	Grants or contracts from any entity (if not indicated in item #1 above).	_XNone	
3	Royalties or licenses	XNone	
4	Consulting fees	XNone	

5	Payment or honoraria for lectures, presentations,	x	serves as Board of Director for iRhythm, fees paid through CSMC from Abbott Diagnostics and Sanofi
	speakers bureaus,		
	manuscript writing or educational events		
6	Payment for expert	XNone	
	testimony		
7	Support for attending	X_None	
,	meetings and/or travel		
8	Patents planned, issued or	XNone	
	pending		
0	Double institute on a Data	V. Nene	
9	Participation on a Data Safety Monitoring Board or	XNone	
	Advisory Board		
10	Leadership or fiduciary role	XNone	
	in other board, society,		
	committee or advocacy		
11	group, paid or unpaid Stock or stock options	X None	
	Stock of Stock options	_XNone	
12	Receipt of equipment,	XNone	
	materials, drugs, medical		
	writing, gifts or other services		
13	Other financial or non-	X None	
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