

ICMJE DISCLOSURE FORM

Date: 10/31/2023

Your Name: RuiC Wang

Manuscript Title: Effects of percutaneous closure of atrial septal defects via the right internal jugular vein

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Your Name: Yong Wang

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Your Name: HuL Piao

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ICMJE DISCLOSURE FORM

Date: 11/21/2023

Your Name: Huiying Wu

Manuscript Title: Effects of percutaneous closure of atrial septal defects via the right internal jugular vein

Manuscript Number (if known): [\[Click or tap here to enter text.\]](#)

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Date: 10/31/2023

Your Name: KeX Liu

Manuscript Title: Effects of percutaneous closure of atrial septal defects via the right internal jugular vein

Manuscript Number (if known): [Click or tap here to enter text.](#)

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Your Name: TianC Wang

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Manuscript Number (if known): [Click or tap here to enter text.](#)

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