

Instructions

The purpose of this form is to provide readers of your manuscript with information about your other interests that could influence how they receive and understand your work. The form is designed to be completed electronically and stored electronically. It contains programming that allows appropriate data display. Each author should submit a separate form and is responsible for the accuracy and completeness of the submitted information. The form is in six parts.

1. Identifying information.

2. The work under consideration for publication.

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earning royalties or not

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

patent

Huntgeburth 1



Section 1. Identifying Inform	nation		
1. Given Name (First Name) Michael	2. Surname (Last Name) Huntgeburth	3. Date 08-October-2020	
4. Are you the corresponding author?	✓ Yes No		
5. Manuscript Title Implantable Loop Recorder for Monitor	ring Patients with Congenital Heart Disease		
6. Manuscript Identifying Number (if you ki	now it)		
Section 2. The Work Under C	onsideration 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.)? Are there any relevant conflicts of interest? Yes Vo			
Section 3. Relevant financial	activities outside the submitted work.		
of compensation) with entities as descr	in the table to indicate whether you have financial relibed in the instructions. Use one line for each entity; port relationships that were present during the 36 est? Yes No	add as many lines as you need by	
Section 4. Intellectual Prope	rty Patents & Copyrights		
Do you have any patents, whether plan	ned, pending or issued, broadly relevant to the wor	k? ☐ Yes ✓ No	

Huntgeburth 2



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Dr. Huntgeburth has nothing to disclose.

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Hohmann 1



Section 1. Identifying Inform	mation	
Given Name (First Name) Christopher	2. Surname (Last Name) Hohmann	3. Date 04-October-2020
4. Are you the corresponding author?	☐ Yes ✓ No	Corresponding Author's Name Michael Huntgeburth
5. Manuscript Title Implantable Loop Recorder for Monito	ring Patients with Congen	ital Heart Disease
6. Manuscript Identifying Number (if you k CDT-20-677	now it)	
Section 2. The Work Under C	Consideration for Publi	cation
any aspect of the submitted work (includin statistical analysis, etc.)? Are there any relevant conflicts of inter	g but not limited to grants, d	n a third party (government, commercial, private foundation, etc.) for ata monitoring board, study design, manuscript preparation,
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Hohmann 2



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Ewert 1



Section 1. Identifying Inform	mation		
1. Given Name (First Name) Peter	2. Surname (Last Name) Ewert	3. Date 13-October-2020	
4. Are you the corresponding author?	0 Yes 1 No	Corresponding Author's Name Michael Huntgeburth	
5. Manuscript Title Implantable Loop Recorder for Monito	oring Patients with Congeni	ital Heart Disease	
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Do you have any patents, whether plan			

Ewert 2



Relationships not covered above

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Are there other relationships or activities that readers could perceive to have influenced, or that give the appearance of potentially influencing, what you wrote in the submitted work?
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Dr. Ewert has nothing to disclose.

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Freilinger 1



Section 1. Identifying Inforn	nation	
1. Given Name (First Name) Sebastian	2. Surname (Last Name) Freilinger	3. Date 08-October-2020
4. Are you the corresponding author?	☐ Yes ✓ No	Corresponding Author's Name Michael Huntgeburth
5. Manuscript Title Implantable Loop Recorder for Monitor	ring Patients with Congen	ital Heart Disease
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Freilinger 2



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Nagdyman 1



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Nagdyman 2



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Neidenbach 1



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any aspect of the submitted work (including statistical analysis, etc.)? Are there any relevant conflicts of intere	but not limited to grants, da	a third party (government, commercial, private foundation, etc.) for ita monitoring board, study design, manuscript preparation,
Section 3. Relevant financial	activities outside the s	submitted work.
of compensation) with entities as descri	ibed in the instructions. Us port relationships that wer	ether you have financial relationships (regardless of amount se one line for each entity; add as many lines as you need by re present during the 36 months prior to publication.
Section 4. Intellectual Proper	rty Patents & Copyrig	ghts
Do you have any patents, whether plan	ned, pending or issued, br	roadly relevant to the work? Yes V No

Neidenbach 2



Section 5. Polotionskips not solvered above
Relationships not covered above
Are there other relationships or activities that readers could perceive to have influenced, or that give the appearance of potentially influencing, what you wrote in the submitted work?
Yes, the following relationships/conditions/circumstances are present (explain below):
✓ No other relationships/conditions/circumstances that present a potential conflict of interest
At the time of manuscript acceptance, journals will ask authors to confirm and, if necessary, update their disclosure statements On occasion, journals may ask authors to disclose further information about reported relationships.
Section 6. Disabella Statement
Disclosure Statement
Based on the above disclosures, this form will automatically generate a disclosure statement, which will appear in the box below.
Dr. Neidenbach has nothing to disclose.

Evaluation and Feedback

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Neidenbach 3



Instructions

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4. Intellectual Property.

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

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Licensed: The patent has been licensed to an entity, whether earning royalties or not

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

Pieper 1



Section 1. Identifying Inform	nation					
1. Given Name (First Name) Lars	2. Surname (Last Name) Pieper	3. Date 08-October-2020				
4. Are you the corresponding author?	☐ Yes ✓ No	Corresponding Author's Name Michael Huntgeburth				
5. Manuscript Title Implantable Loop Recorder for Monito	ring Patients with Congen	ital Heart Disease				
6. Manuscript Identifying Number (if you k CDT-2020-ACHD-16(CDT-20-677)	now it)	_				
Section 2. The Week Under C						
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.)? Are there any relevant conflicts of interest? Yes V No						
Section 3. Relevant financial	activities outside the	submitted work.				
Place a check in the appropriate boxes in the table to indicate whether you have financial relationships (regardless of amount of compensation) with entities as described in the instructions. Use one line for each entity; add as many lines as you need by clicking the "Add +" box. You should report relationships that were present during the 36 months prior to publication .						
Are there any relevant conflicts of inter	est?					
Section 4. Intellectual Prope	rty Patents & Copyri	ahts				
Do you have any patents, whether plan						

Pieper 2



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earning royalties or not

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

patent

Pieringer 1



Section 1. Identifying Inform	mation					
1. Given Name (First Name) Felix	2. Surname (Last Name) Pieringer	3. Date 13-October-2020				
4. Are you the corresponding author?	0 Yes 1 No	Corresponding Author's Name Michael Huntgeburth				
5. Manuscript Title Implantable Loop Recorder for Monito	oring Patients with Congeni	tal Heart Disease				
6. Manuscript Identifying Number (if you learn to CDT-2020-ACHD-16(CDT-20-677)	know it)	_				
Section 2. The Work Under 0	Consideration for Public	cation				
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Section 3. Polovant financia	l activities outside the s	ubmitted work				
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Section 4. Intellectual Prope	erty Patents & Copyric	ahts				
Do you have any patents, whether planned, pending or issued, broadly relevant to the work? Yes 2 No						

Pieringer 2



Relationships not covered above

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

Lennerz 1



Section 1. Identifying Inform	nation				
1. Given Name (First Name) Carsten	2. Surname (Last Name) Lennerz	3. Date 10-October-2020			
4. Are you the corresponding author?	Yes ✓ No	Corresponding Author's Name Michael Huntgeburth			
5. Manuscript Title Implantable Loop Recorder for Monitor	ing Patients with Congeni	tal Heart Disease			
6. Manuscript Identifying Number (if you kn CDT-2020-ACHD-16(CDT-20-677)	now it)	_			
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Do you have any patents, whether plant	ned, pending or issued, br	oadly relevant to the work? Yes V No			

Lennerz 2



Section 5. Polotionships not severed above					
Relationships not covered above					
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Section 6. Disclosure Statement					
Disciosure statement					
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Dr. Lennerz has nothing to disclose.					

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patent

Kaemmerer 1



Section 1. Identifying Inform	nation					
1. Given Name (First Name) Harald	2. Surname (Last Name) Kaemmerer	3. Date 10-October-2020				
4. Are you the corresponding author?	☐ Yes ✓ No	Corresponding Author's Name Michael Huntgeburth				
5. Manuscript Title Implantable Loop Recorder for Monito	ring Patients with Congen	ital Heart Disease				
6. Manuscript Identifying Number (if you k CDT-2020-ACHD-16(CDT-20-677)	now it)	_				
Section 2						
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	,,,					
Do you have any patents, whether plan	nned, pending or issued, bi	roadly relevant to the work? Yes No				

Kaemmerer 2



Section 5. Polotionskips not sovered above
Relationships not covered above
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Kaemmerer 3



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Section 1. Identifying Inform	ation					
Given Name (First Name) Christof	2. Surnar Kolb	ne (Last Nar	ne)		3. Date 12-October-2020	
4. Are you the corresponding author?	Yes ✓ No Corresponding Author's Name Huntgeburth				or's Name	
5. Manuscript Title Implantable Loop Recorder for Monitori	ng Patien	ts with Cor	ngenital Heart Dis	ease		
6. Manuscript Identifying Number (if you known CDT-20-677	ow it)					
Section 2. The West Lindon Co			1.0			
The Work Under Co	nsidera	tion for P	ublication			
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Name of Entity	Grant?	Personal Fees?	Non-Financial Support?	Other?	Comments	
Abbott Medical			√		travel support	
Biotronik		✓	√		travel support and lecture honorary	
Bristol-Myers-Squibb		✓			lecture honorary	
Microport		√			advisory board	
Novartis		√			lecture honorary	
Philips		✓			lecture honorary	
Abbott Medical				✓	compensation for study participation	
Biotronik					compensation for study participation	



Name of Entity	Grant? Personal Fees?	Non-Financial Support?	Other?	Comments		
Boston Scientific			✓	compensation for study participation		
Microport			✓	compensation for study participation		
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Dr. Kolb reports non-financial support from personal fees from Bristol-Myers-Squibb, Philips, other from Abbott Medical, from submitted work; .	, personal fees from	Microport, perso	nal fees fr	om Novartis, personal fees from		



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