

#### **Instructions**

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Uziębło-Życzkowska 1



Section 1. Identifying Inform	nation	
Given Name (First Name)  Beata	2. Surname (Last Name) Uziębło-Życzkowska	3. Date 01-November-2020
4. Are you the corresponding author?	Yes ✓ No	Corresponding Author's Name Iwona Gorczyca
<ol> <li>Manuscript Title</li> <li>Antithrombotic therapy in patients with compliance with current guidelines – D</li> <li>Manuscript Identifying Number (if you kn CDT-20-839</li> </ol>	ata from the POLish Atrial	ing percutaneous coronary intervention, including Fibrillation (POL-AF) Registry
Section 2. The Work Under Co	onsideration for Public	ration
Did you or your institution at any time recei	ive payment or services from but not limited to grants, da	a third party (government, commercial, private foundation, etc.) for ta monitoring board, study design, manuscript preparation,
Section 3. Relevant financial	activities outside the s	ubmitted work.
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Section 4. Intellectual Proper	rty Patents & Copyrig	hts
Do you have any patents, whether plant		

Uziębło-Życzkowska 2



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Section 6. Disclosure Statement
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Dr. Uziębło-Życzkowska has nothing to disclose.

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patent

Krzesiński 1



Section 1. Identifying Inform	nation		
Given Name (First Name)  Paweł	2. Surname (Last Name) Krzesiński	3. Date 01-November-2020	
4. Are you the corresponding author?	☐ Yes ✓ No	Corresponding Author's Name Iwona Gorczyca	
5. Manuscript Title Antithrombotic therapy in patients with compliance with current guidelines – D 6. Manuscript Identifying Number (if you kr CDT-20-839	ata from the POLish Atrial	oing percutaneous coronary intervention, including Fibrillation (POL-AF) Registry	-
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Krzesiński 2



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Maciorowska 1



Section 1. Identifying Inform	nation	
1. Given Name (First Name) Małgorzata	2. Surname (Last Name) Maciorowska	3. Date 01-November-2020
4. Are you the corresponding author?	☐ Yes 🗸 No	Corresponding Author's Name Iwona Gorczyca
5. Manuscript Title Antithrombotic therapy in patients witl compliance with current guidelines – D		ping percutaneous coronary intervention, including Fibrillation (POL-AF) Registry
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Maciorowska 2



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Gorczyca 1



Section 1.	Identifying Inform	ation				
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1. Given Name (Fir	st Name)	2. Surname (Last Nam	e)		3. Date	
lwona		Gorczyca			24-September-2020	
4. Are you the corr	responding author?	✓ Yes No				
					ary intervention, including	
6. Manuscript Ider CDT-20-839	itifying Number (if you kn	ow it)				
Section 2.	The Work Under Co	onsideration for Pu	blication			
any aspect of the si statistical analysis, Are there any rele If yes, please fill o	ubmitted work (including etc.)? evant conflicts of intere	but not limited to grantest? Yes Normation below. If you	s, data monitorin Io	g board, study o	commercial, private foundation, etc.) fo design, manuscript preparation, ress the "ADD" button to add a row	
Name of Institut	ion/Company	Grant? Personal Fees?	Non-Financial Support?	Other? Co	omments	
Bayer						_
Boehringer Ingelheim	1					
Section 3.	Relevant financial	activities outside t	he submitted	work.		
of compensation clicking the "Add Are there any rele	) with entities as descri	bed in the instruction oort relationships that	s. Use one line f were <b>present c</b>	or each entity;	elationships (regardless of amount; add as many lines as you need by <b>months prior to publication</b> .	
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Do you have any	patents, whether plant	ned, pending or issue	d, broadly releva	ant to the wor	k? ☐ Yes 🗸 No	

Gorczyca 2



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Dr. Gorczyca rep	ports personal fees from Bayer and Boehringer Ingelheim.				

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Jelonek 1



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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

WÓJCIK 1



Section 1. Identifying Inform	nation	
Given Name (First Name)     MACIEJ	2. Surname (Last Name) WÓJCIK	3. Date 28-September-2020
4. Are you the corresponding author?	Yes ✓ No	Corresponding Author's Name IWONA GORCZYCA
5. Manuscript Title Antithrombotic therapy in patients with compliance with current guidelines – D 6. Manuscript Identifying Number (if you kr CDT-20-839	ata from the POLish Atrial	ing percutaneous coronary intervention, including Fibrillation (POL-AF) Registry
Section 2. The Work Under Co	onsideration for Public	ation
	but not limited to grants, da	a third party (government, commercial, private foundation, etc.) for ta monitoring board, study design, manuscript preparation,
Section 3. Relevant financial	activities outside the s	ubmitted 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 e present during the 36 months prior to publication.
Section 4. Intellectual Proper	rty Patents & Copyrig	hts
Do you have any patents, whether plan	ned, pending or issued, br	oadly relevant to the work? Yes V No

WÓJCIK 2



Section 5. Polotionaking not governed above
Relationships not covered above
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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. Disclosure Statement
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Dr. WÓJCIK has nothing to disclose.

#### **Evaluation and Feedback**

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WÓJCIK 3



#### **Instructions**

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Błaszczyk 1



Section 1. Identifying Inforn	nation		
1. Given Name (First Name) Robert	2. Surname (Last Name) Błaszczyk	3. Date 01-November-2020	
4. Are you the corresponding author?	☐ Yes ✓ No	Corresponding Author's Name Iwona Gorczyca	
5. Manuscript Title Antithrombotic therapy in patients wit compliance with current guidelines – D		ping percutaneous coronary intervention, including Fibrillation (POL-AF) Registry	
6. Manuscript Identifying Number (if you ki CDT-20-839	now it)		
Section 2. The Work Under C	onsideration for Public	cation	
Did you or your institution <b>at any time</b> 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 inter-	est?		
Section 3. Relevant financial	activities outside the	submitted work.	
of compensation) with entities as descr	ibed in the instructions. Us	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.	
Are there any relevant conflicts of interest	est? Yes Vo		
Section 4. Intellectual Prope	rty Patents & Copyri	ghts	
Do you have any patents, whether plan	ned, pending or issued, br	roadly relevant to the work? Yes V No	

Błaszczyk 2



Section 5. Polationships not sovered above
Relationships not covered above
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Yes, the following relationships/conditions/circumstances are present (explain below):
✓ No other relationships/conditions/circumstances that present a potential conflict of interest
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Section 6. Disclosure Statement
Disclosure Statement
Based on the above disclosures, this form will automatically generate a disclosure statement, which will appear in the box below.
Dr. Błaszczyk has nothing to disclose.

#### **Evaluation and Feedback**

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Błaszczyk 3



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earning royalties or not

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

patent

Kapłon-Cieślicka 1



Section 1.	Identifying Inforn	nation		
1. Given Name (Fi	rst Name)	2. Surname (Last Name Kapłon-Cieślicka	)	3. Date 25-September-2020
4. Are you the cor	responding author?	☐ Yes ✓ No	Corresponding Author's lwona Gorczyca	Name
5. Manuscript Title CDT-20-839	2			
6. Manuscript Ider CDT-20-839	ntifying Number (if you k	now it)		
	l			
Section 2.	The Work Under C	onsideration for Puk	olication	
any aspect of the s statistical analysis, Are there any rel	ubmitted work (including	g but not limited to grants,	data monitoring board, study	commercial, private foundation, etc.) for design, manuscript preparation,
Section 3.	Relevant financial	activities outside th	e submitted work.	
of compensation clicking the "Add Are there any rel	) with entities as descr	ribed in the instructions.  port relationships that vector is the port of the	Use one line for each entity vere <b>present during the 3</b> 6	relationships (regardless of amount y; add as many lines as you need by 6 months prior to publication.
Name of Entity		Grant? Personal Fees?	Support? Other?	Comments
Bayer				
	1			
Section 4.	Intellectual Prope	rty Patents & Copy	rights	
Do you have any	patents, whether plan	nned, pending or issued,	broadly relevant to the wo	rk? Yes 🗸 No

Kapłon-Cieślicka 2



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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?
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Kapłon-Cieślicka 3



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Gawałko 1



Section 1. Identifying Inform	nation		
1. Given Name (First Name) Monika	2. Surname (Last Name) Gawałko	3. Date 01-November-2020	
4. Are you the corresponding author?	Yes ✓ No	Corresponding Author's Name Iwona Gorczyca	
5. Manuscript Title Antithrombotic therapy in patients witl compliance with current guidelines – D		oing percutaneous coronary intervention, including Fibrillation (POL-AF) Registry	
6. Manuscript Identifying Number (if you kr CDT-20-839	now it)		
Continue 2			
Section 2. The Work Under Co	onsideration for Public	cation	
Did you or your institution <b>at any time</b> 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	est?		
Section 3. Relevant financial	activities outside the	submitted work.	
of compensation) with entities as descr	ibed in the instructions. Us	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.	
Are there any relevant conflicts of interest	est? Yes Vo		
Section 4. Intellectual Proper	rty Patents & Copyri	ghts	
Do you have any patents, whether plan	ned, pending or issued, br	roadly relevant to the work? Yes V No	

Gawałko 2



Section 5. Polotionships not sovered above
Relationships not covered above
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Dr. Gawałko has nothing to disclose.

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Gawałko 3



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Tokarek 1



Section 1. Identifying Inform	nation	
identifying inform	iation	
Given Name (First Name)  Tomasz	2. Surname (Last Name) Tokarek	3. Date 27-September-2020
4. Are you the corresponding author?	☐ Yes ✓ No	Corresponding Author's Name Iwona Gorczyca
5. Manuscript Title Antithrombotic therapy in patients witl compliance with current guidelines – D 6. Manuscript Identifying Number (if you kr CDT-20-839	ata from the POLish Atrial	ping percutaneous coronary intervention, including Fibrillation (POL-AF) Registry
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any aspect of the submitted work (including statistical analysis, etc.)? Are there any relevant conflicts of interest.	g but not limited to grants, da	a third party (government, commercial, private foundation, etc.) for ata monitoring board, study design, manuscript preparation,
Section 3. Relevant financial	activities outside the	ubmitted work.
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Intellectual Proper	rty Patents & Copyri	ghts
Do you have any patents, whether plan	ned, pending or issued, bı	roadly relevant to the work? Yes V No

Tokarek 2



Section 5. Polationships not sovered above
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Dr. Tokarek has nothing to disclose.

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Rajtar-Salwa 1



Section 1. Identifying Inforn	nation	
1. Given Name (First Name) Renata	2. Surname (Last Name) Rajtar-Salwa	3. Date 27-September-2020
4. Are you the corresponding author?	☐ Yes 🗸 No	Corresponding Author's Name Iwona Gorczyca
5. Manuscript Title Antithrombotic therapy in patients wit compliance with current guidelines – D		oing percutaneous coronary intervention, including Fibrillation (POL-AF) Registry
6. Manuscript Identifying Number (if you ki CDT-20-839	now it)	_
Section 2. The Work Under C	onsideration for Public	cation
	g 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	submitted work.
Place a check in the appropriate boxes of compensation) with entities as descr	in the table to indicate wh ibed in the instructions. Us port relationships that we	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 Brone		
Intellectual Prope	rty Patents & Copyri	ghts
Do you have any patents, whether plan	ned, pending or issued, br	oadly relevant to the work? Yes Vo

Rajtar-Salwa 2



Section 5. Polationships not sovered above
Relationships not covered above
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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

Bil 1



Section 1. Identifying Inform	ation	
1. Given Name (First Name) Jacek	2. Surname (Last Name) Bil	3. Date 20-September-2020
4. Are you the corresponding author?	Yes ✓ No	Corresponding Author's Name Iwona Gorczyca
compliance with current guidelines – D	ata from the POLish Atrial	oing percutaneous coronary intervention, including Fibrillation (POL-AF) Registry
6. Manuscript Identifying Number (if you kn CDT-20-839	ow it)	_
Section 2. The Work Under Co	onsideration for Public	ration
Did you or your institution <b>at any time</b> recei any aspect of the submitted work (including statistical analysis, etc.)? Are there any relevant conflicts of intere	ive payment or services from but not limited to grants, daest?	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	bed 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	ty Patents & Copyric	ghts
Do you have any patents, whether plant	ned, pending or issued, br	roadly relevant to the work? Yes Vo

Bil 2



Section 5. Polationships not solvered above
Relationships not covered above
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Yes, the following relationships/conditions/circumstances are present (explain below):
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Wojewodzki 1



Section 1. Identifying Inform	nation	
1. Given Name (First Name) Michal	2. Surname (Last Name) Wojewodzki	3. Date 20-September-2020
4. Are you the corresponding author?	☐ Yes 🗸 No	Corresponding Author's Name Iwona Gorczyca
5. Manuscript Title Antithrombotic therapy in patients witl compliance with current guidelines – D		oing percutaneous coronary intervention, including Fibrillation (POL-AF) Registry
6. Manuscript Identifying Number (if you kr CDT-20-839	now it)	_
Section 2. The Work Under C	onsideration for Public	cation
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of compensation) with entities as descr clicking the "Add +" box. You should re	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.
Are there any relevant conflicts of interest	est?	
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Intellectual Proper	rty Patents & Copyri	ghts
Do you have any patents, whether plan	ned, pending or issued, br	roadly relevant to the work? Yes V No

Wojewodzki 2



Section 5. Relationships not covered above
Relationships not covered above
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Royalties: Funds are coming in to you or your institution due to your

patent

1 Szpotowicz



Section 1. Identifying Inform	nation		
1. Given Name (First Name) Anna	Surname (Last Name)     Szpotowicz	3. Date 01-November-2020	
4. Are you the corresponding author?	☐ Yes ✓ No	Corresponding Author's Name Iwona Gorczyca	
5. Manuscript Title Antithrombotic therapy in patients with compliance with current guidelines – D	9	oing percutaneous coronary intervention, including Fibrillation (POL-AF) Registry	
6. Manuscript Identifying Number (if you kr CDT-20-839	now it)		
Section 2. The Work Under C			
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.)?  Are there any relevant conflicts of interest? Yes Volume No			
Section 3. Belowert financial			
Relevant financial	activities outside the s	ubmitted work.	
of compensation) with entities as descri	ibed in the instructions. Us	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.	
Are there any relevant conflicts of intere	est?		
Section 4. Intellectual Proper	rty Patents & Copyric	ghts	
Do you have any patents, whether plan	ned, pending or issued, br	roadly relevant to the work? Yes Vo	

Szpotowicz 2



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Krzciuk 1



Section 1. Identifying Inform	nation	
1. Given Name (First Name) Małgorzata	2. Surname (Last Name) Krzciuk	3. Date 01-November-2020
4. Are you the corresponding author?	☐ Yes ✓ No	Corresponding Author's Name Iwona Gorczyca
5. Manuscript Title Antithrombotic therapy in patients with compliance with current guidelines – D 6. Manuscript Identifying Number (if you kr CDT-20-839	ata from the POLish Atria	oing percutaneous coronary intervention, including I Fibrillation (POL-AF) Registry
Section 2. The Work Under Co	onsideration for Publi	cation
any aspect of the submitted work (including statistical analysis, etc.)? Are there any relevant conflicts of intere	but not limited to grants, do	n a third party (government, commercial, private foundation, etc.) for ata monitoring board, study design, manuscript preparation,
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Section 4. Intellectual Proper	rty Patents & Copyri	ahts
Do you have any patents, whether plan		

Krzciuk 2



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Dr. Krzciuk has nothing to disclose.

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BEDNARSKI 1



Section 1. Identifying Inform	nation	
1. Given Name (First Name) JANUSZ	2. Surname (Last Name) BEDNARSKI	3. Date 01-October-2020
4. Are you the corresponding author?	☐ Yes 🗸 No	Corresponding Author's Name Iwona Gorczyca
5. Manuscript Title Antithrombotic therapy in patients witl compliance with current guidelines – D		oing percutaneous coronary intervention, including Fibrillation (POL-AF) Registry
6. Manuscript Identifying Number (if you kr CDT-20-839	now it)	
Continue 2		
Section 2. The Work Under C	onsideration for Public	cation
any aspect of the submitted work (including statistical analysis, etc.)?	g but not limited to grants, da	a third party (government, commercial, private foundation, etc.) for ata monitoring board, study design, manuscript preparation,
Are there any relevant conflicts of interest	est?	
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Section 4. Intellectual Proper	rty Patents & Copyric	ghts
Do you have any patents, whether plan		

BEDNARSKI 2



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Dr. BEDNARSKI has nothing to disclose.

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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

Bakuła-Ostalska 1



Section 1. Identifying Inform	ation	
identifying inform	lation	
Given Name (First Name)  Elwira	2. Surname (Last Name) Bakuła-Ostalska	3. Date 01-October-2020
4. Are you the corresponding author?	☐ Yes ✓ No	Corresponding Author's Name Iwona Gorczyca
5. Manuscript Title Antithrombotic therapy in patients with compliance with current guidelines – D	9	ping percutaneous coronary intervention, including Fibrillation (POL-AF) Registry
6. Manuscript Identifying Number (if you kn CDT-20-839	now it)	_
Section 2. The Work Under Co	onsideration for Public	cation
		a third party (government, commercial, private foundation, etc.) for ata monitoring board, study design, manuscript preparation,
Are there any relevant conflicts of intere	est? Yes ✓ No	
Section 3. Relevant financial	activities outside the s	submitted work.
of compensation) with entities as descri	ibed in the instructions. Us	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.
Are there any relevant conflicts of intere	est? Yes No	
Section 4		
Section 4. Intellectual Proper	ty Patents & Copyric	ghts
Do you have any patents, whether plant	ned, pending or issued, br	roadly relevant to the work? Yes No

Bakuła-Ostalska 2



Section 5. Polotionships not sovered 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. Disclosure Statement
Based on the above disclosures, this form will automatically generate a disclosure statement, which will appear in the box below.
Dr. Bakuła-Ostalska has nothing to disclose.

#### **Evaluation and Feedback**

Please visit <a href="http://www.icmje.org/cgi-bin/feedback">http://www.icmje.org/cgi-bin/feedback</a> to provide feedback on your experience with completing this form.

Bakuła-Ostalska 3



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Tomaszuk-Kazberuk 1



Section 1. Identifying Inform	ation		
1. Given Name (First Name) Anna	2. Surname (Last Name) Tomaszuk-Kazberuk		3. Date 01-November-2020
4. Are you the corresponding author?	Yes ✓ No	Corresponding Author's N	lame
5. Manuscript Title Antithrombotic therapy in patients with compliance with current guidelines – D			
6. Manuscript Identifying Number (if you kn CDT-20-839	ow it)	_	
Section 2. The Work Under Co	onsideration for Public	cation	
Did you or your institution <b>at any time</b> recei any aspect of the submitted work (including statistical analysis, etc.)? Are there any relevant conflicts of intere	but not limited to grants, da		
Section 3. Relevant financial	activities outside the s	uhmittad wark	
Place a check in the appropriate boxes in of compensation) with entities as descriclicking the "Add +" box. You should rep	n the table to indicate wh bed in the instructions. U	ether you have financial r se one line for each entity	; add as many lines as you need by
Are there any relevant conflicts of intered in the second			
Name of Entity	Grant•	n-Financial Other? Co	omments
Boehringer-Ingelheim	<b>✓</b>		
Boehringer-Ingelheim			sultant for it
Boehringer-Ingelheim		<b>✓</b> spe	aker for it
Bayer		Con	sultant for it

Tomaszuk-Kazberuk 2



Section 4. Intellectual Property Patents & Copyrights				
Do you have any patents, whether planned, pending or issued, broadly relevant to the work? Yes Vo				
Section 5. 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				
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Section 6. Disclosure Statement				
Based on the above disclosures, this form will automatically generate a disclosure statement, which will appear in the box below.				
Dr. Tomaszuk-Kazberuk reports grants from Boehringer-Ingelheim, other from Boehringer-Ingelheim, other from Boehringer-Ingelheim, other from Bayer, outside the submitted work; .				

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Tomaszuk-Kazberuk 3



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Szyszkowska 1



Section 1.	Identifying Inform	nation				
1. Given Name (First Name) Anna		2. Surname (Last Name) Szyszkowska		3. Date 01-November-2020		
4. Are you the corresponding author?		Yes No Corresponding Author's Na Iwona Gorczyca		ne		
5. Manuscript Title Antithrombotic therapy in patients with atrial fibrillation undergoing percutaneous coronary intervention, including compliance with current guidelines – Data from the POLish Atrial Fibrillation (POL-AF) Registry						
6. Manuscript Ider CDT-20-839	6. Manuscript Identifying Number (if you know it)					
	I					
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Did you or your institution <b>at any time</b> 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.)?						
The there any res	Are there any relevant conflicts of interest?					
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 <b>present during the 36 months prior to publication</b> .  Are there any relevant conflicts of interest? Yes Vo						
Section 4.		D. 1. 0. C.	*.14.			
	Intellectual Proper	rty Patents & Copyr	ignts			
Do you have any	patents, whether plan	ned, pending or issued,	oroadly relevant to the work?	Yes 🗸 No		

Szyszkowska 2



Section 5. Polationships not solvered above
Relationships not covered above
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Section 6. Disclosure Statement
Based on the above disclosures, this form will automatically generate a disclosure statement, which will appear in the box below.
Dr. Szyszkowska has nothing to disclose.

#### **Evaluation and Feedback**

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Wełnicki 1



Section 1. Identifying Inform	nation				
1. Given Name (First Name) Marcin	2. Surname (Last Name) Wełnicki	3. Date 01-November-2020			
4. Are you the corresponding author?	Yes 🗸 No	Corresponding Author's Name Iwona Gorczyca			
5. Manuscript Title Antithrombotic therapy in patients with atrial fibrillation undergoing percutaneous coronary intervention, including compliance with current guidelines – Data from the POLish Atrial Fibrillation (POL-AF) Registry 6. Manuscript Identifying Number (if you know it) CDT-20-839					
Section 2. The Work Under Co	onsideration for Publi	cation			
any aspect of the submitted work (including statistical analysis, etc.)? Are there any relevant conflicts of intere	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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Section 4. Intellectual Proper	rty Patents & Copyri	ghts			
Do you have any patents, whether plan	ned, pending or issued, b	roadly relevant to the work? Yes V No			

Wełnicki 2



Section 5. Polationships not sovered 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?					
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Section 6. Disclosure Statement					
Disclosure Statement					
Based on the above disclosures, this form will automatically generate a disclosure statement, which will appear in the box below.					
Dr. Wełnicki has nothing to disclose.					

#### **Evaluation and Feedback**

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Wełnicki 3



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Mamcarz 1



Section 1. Identifying Inform	nation			
1. Given Name (First Name) Artur	2. Surname (Last Name) Mamcarz	3. Date 01-November-2020		
4. Are you the corresponding author?	☐ Yes 🗸 No	Corresponding Author's Name Iwona Gorczyca		
5. Manuscript Title Antithrombotic therapy in patients with atrial fibrillation undergoing percutaneous coronary intervention, including compliance with current guidelines – Data from the POLish Atrial Fibrillation (POL-AF) Registry				
6. Manuscript Identifying Number (if you kr CDT-20-839	now it)	_		
Section 2. The Work Under C	onsideration for Public	cation		
, ,	g but not limited to grants, da	a third party (government, commercial, private foundation, etc.) for ata monitoring board, study design, manuscript preparation,		
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Intellectual Proper	rty Patents & Copyric	ghts		
Do you have any patents, whether plan	ned, pending or issued, br	roadly relevant to the work? ☐ Yes ✓ No		

Mamcarz 2



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Dr. Mamcarz has nothing to disclose.					

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For grants you have received for work outside the submitted work, you should disclose support ONLY from entities that could be perceived to be affected financially by the published work, such as drug companies, or foundations supported by entities that could be perceived to have a financial stake in the outcome. Public funding sources, such as government agencies, charitable foundations or academic institutions, need not be disclosed. For example, if a government agency sponsored a study in which you have been involved and drugs were provided by a pharmaceutical company, you need only list the pharmaceutical company.

# 4. Intellectual Property.

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

# Relationships not covered above.

Use this section to report 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.

#### Definitions.

**Entity:** government agency, foundation, commercial sponsor, academic institution, etc.

**Grant:** A grant from an entity, generally [but not always] paid to your organization

**Personal Fees:** Monies paid to you for services rendered, generally honoraria, royalties, or fees for consulting, lectures, speakers bureaus, expert testimony, employment, or other affiliations

**Non-Financial Support:** Examples include drugs/equipment supplied by the entity, travel paid by the entity, writing assistance, administrative support, etc.

**Other:** Anything not covered under the previous three boxes

**Pending:** The patent has been filed but not issued **Issued:** The patent has been issued by the agency

**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

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Section 1.	Identifying Inform	ation						
1. Given Name (First Name) Beata		2. Surname (Last Name) Wożakowska-Kapłon		3. Date 24-September-2020				
4. Are you the corresponding author?		Yes	✓ No	Corresponding Author's Name Iwona Gorczyca				
5. Manuscript Title Antithrombotic therapy in patients with atrial fibrillation undergoing percutaneous coronary intervention, including compliance with current guidelines – Data from the POLish Atrial Fibrillation (POL-AF) Registry								
6. Manuscript Idea CDT-20-839	ntifying Number (if you kr	ow it)						
Continue 2								
Section 2.	The Work Under Co	onsiderat	ion for Publi	cation				
any aspect of the s statistical analysis,	stitution <b>at any time</b> rece ubmitted work (including etc.)? evant conflicts of intere	but not lim	ited to grants, d					c.) for
If yes, please fill o	out the appropriate info be removed by pressin	rmation b	elow. If you ha	ve more thai	n one entit	y press the "AD[	D" button to add a	row.
Name of Institut	ion/Company	Grant?	_	n-Financial Support	Other?	Comments		
Bayer			✓					
Boehringer Ingelhein	n		<b>✓</b>					
Pfizer			$\checkmark$					
Section 3.	Relevant financial	activities	outside the	submitted	work.			
of compensation	the appropriate boxes i a) with entities as descri I +" box. You should rep	bed in the	instructions. U	se one line f	or each ent	tity; add as many	y lines as you need	d by
Are there any rel	evant conflicts of intere	est? Y	'es ✓ No					
Section 4.	Intellectual Proper	ty Pate	nts & Copyri	ghts				
Do you have any	patents, whether plan	ned, pendi	ng or issued, b	roadly releva	ant to the v	vork? Yes	✓ No	

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Section 5.	Relationships not covered above
	elationships or activities that readers could perceive to have influenced, or that give the appearance of encing, what you wrote in the submitted work?
Yes, the follow	wing relationships/conditions/circumstances are present (explain below):
✓ No other rela	tionships/conditions/circumstances that present a potential conflict of interest
	anuscript acceptance, journals will ask authors to confirm and, if necessary, update their disclosure statements rnals may ask authors to disclose further information about reported relationships.
Section 6.	Disclosure Statement
Based on the abo	ove disclosures, this form will automatically generate a disclosure statement, which will appear in the box
Prof. Wożakowsk	ka-Kapłon reports personal fees from Bayer, Boehringer Ingelheim and Pfizer, outside the submitted work.

#### **Evaluation and Feedback**

Please visit <a href="http://www.icmje.org/cgi-bin/feedback">http://www.icmje.org/cgi-bin/feedback</a> to provide feedback on your experience with completing this form.

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