

#### **Instructions**

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Zhang 1



Section 1. Identifying Inform	nation	
Given Name (First Name)  Xiaohui	Surname (Last Name)     Zhang	3. Date 29-December-2020
4. Are you the corresponding author?	☐ Yes ✓ No	Corresponding Author's Name Shaoru He
disease in newborns		diagnosis-postnatal treatment for critical congenital heart
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Section 2. The Week Under C	onsideration for Publi	
	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 :	submitted work.
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Do you have any patents, whether plan	nned, pending or issued, bi	roadly relevant to the work? Yes V No

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He 1



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Zhong 1



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Sun 1



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6. Manuscript Identifying Number (if you ki CDT-20-892	now it)	_
Section 2. The Work Under C	onsideration for Publi	
Did you or your institution <b>at any time</b> rece any aspect of the submitted work (including statistical analysis, etc.)? Are there any relevant conflicts of inter	eive payment or services from g but not limited to grants, da est? Yes 🗸 No	a third party (government, commercial, private foundation, etc.) for ata monitoring board, study design, manuscript preparation,
Place a check in the appropriate boxes of compensation) with entities as descr	ribed in the instructions. Use port relationships that we	submitted work.  The sether you have financial relationships (regardless of amount see one line for each entity; add as many lines as you need by the present during the 36 months prior to publication.
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

Zheng 2



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Gui 1



Section 1. Identifying Inform	nation	
Given Name (First Name)  Juan	2. Surname (Last Name) Gui	3. Date 29-December-2020
4. Are you the corresponding author?	☐ Yes ✓ No	Corresponding Author's Name Shaoru He
disease in newborns		diagnosis-postnatal treatment for critical congenital heart
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Do you have any patents, whether plan	ined, pending or issued, br	roadly relevant to the work? Yes No

Gui 2



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1 Wang



Section 1. Identifying Inform		
Identifying Inform	nation	
1. Given Name (First Name) Ruixi	2. Surname (Last Name) Wang	3. Date 29-December-2020
4. Are you the corresponding author?	☐ Yes ✓ No	Corresponding Author's Name Shaoru He
5. Manuscript Title The significance of an integrated mana disease in newborns	gement mode of prenatal	diagnosis–postnatal treatment for critical congenital heart
6. Manuscript Identifying Number (if you kr CDT-20-892	now it)	
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Section 1. Identifying Inform	nation	
1. Given Name (First Name) Bowen	2. Surname (Last Name) Feng	3. Date 29-December-2020
4. Are you the corresponding author?	☐ Yes ✓ No	Corresponding Author's Name Shaoru He
<ol><li>Manuscript Title</li><li>The significance of an integrated mana disease in newborns</li></ol>	gement mode of prenatal	diagnosis-postnatal treatment for critical congenital heart
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Do you have any patents, whether plan	ned, pending or issued, bi	roadly relevant to the work? Yes Vo

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1 Mo



Section 1. Identifying Inform	nation	
Given Name (First Name)  Jianling	Surname (Last Name)     Mo	3. Date 29-December-2020
4. Are you the corresponding author?	Yes 🗸 No	Corresponding Author's Name Shaoru He
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1 Jian



Section 1. Identifying Inform	nation	
1. Given Name (First Name) Minqiao	2. Surname (Last Name) Jian	3. Date 29-December-2020
4. Are you the corresponding author?	☐ Yes ✓ No	Corresponding Author's Name Shaoru He
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Jian 2



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### 3. Relevant financial activities outside the submitted work.

This section asks about your financial relationships with entities in the bio-medical arena that could be perceived to influence, or that give the appearance of potentially influencing, what you wrote in the submitted work. You should disclose interactions with ANY entity that could be considered broadly relevant to the work. For example, if your article is about testing an epidermal growth factor receptor (EGFR) antagonist in lung cancer, you should report all associations with entities pursuing diagnostic or therapeutic strategies in cancer in general, not just in the area of EGFR or lung cancer.

Report all sources of revenue paid (or promised to be paid) directly to you or your institution on your behalf over the 36 months prior to submission of the work. This should include all monies from sources with relevance to the submitted work, not just monies from the entity that sponsored the research. Please note that your interactions with the work's sponsor that are outside the submitted work should also be listed here. If there is any question, it is usually better to disclose a relationship than not to do so.

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



Section 1. Identifying Inform	nation	
1. Given Name (First Name) Caisheng	2. Surname (Last Name) Liu	3. Date 29-December-2020
4. Are you the corresponding author?	Yes  ✓ No	Corresponding Author's Name Shaoru He
5. Manuscript Title The significance of an integrated mana- disease in newborns	gement mode of prenatal	diagnosis–postnatal treatment for critical congenital heart
6. Manuscript Identifying Number (if you kr CDT-20-892	now it)	_
Section 2. The World Under C		
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, da	n a third party (government, commercial, private foundation, etc.) for ata monitoring board, study design, manuscript preparation,
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 V		
Section 4. Intellectual Proper	rty Patents & Copyri	ahts
Do you have any patents, whether plan		
20 , ou have any paterns, whether plan	nea, penanty of 133aca, bi	v ito



Section 5.		
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 follo	wing relationships/conditions/circumstances are present (explain below):	
✓ No other rela	tionships/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 abo	ove disclosures, this form will automatically generate a disclosure statement, which will appear in the box	
Dr. Liu has nothi	ng 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.



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

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Section 1. Identifying Inform		
Identifying Inform	nation	
Given Name (First Name)     Yijing	2. Surname (Last Name) Liang	3. Date 29-December-2020
4. Are you the corresponding author?	☐ Yes ✓ No	Corresponding Author's Name Shaoru He
5. Manuscript Title The significance of an integrated management mode of prenatal diagnosis–postnatal treatment for critical congenital heart disease in newborns		
6. Manuscript Identifying Number (if you ki CDT-20-892	now it)	_
Section 2. The Week Under C		
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 interest?  Yes  No		
Section 3. Relevant financial	activities outside the	submitted work.
of compensation) with entities as descr	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 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

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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?
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
Disclosure Statement
Based on the above disclosures, this form will automatically generate a disclosure statement, which will appear in the box below.
Dr. Liang 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.

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