

#### **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.

## Identifying information.

### 2. The work under consideration for publication.

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## 4. Intellectual Property.

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

## 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

Nayyar 1



Section 1.		
Identifying Inform	nation	
1. Given Name (First Name) Dhruv	2. Surname (Last Name) Nayyar	3. Date 14-December-2020
4. Are you the corresponding author?	☐ Yes 🗸 No	Corresponding Author's Name James Otton
5. Manuscript Title Cardiac magnetic resonance derived le indicator	ft atrial strain after ST-elev	ration myocardial infarction: An independent prognostic
6. Manuscript Identifying Number (if you kr CDT-20-879	now it)	_
Section 2. The Work Under C		
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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Section 3. Relevant financial	activities outside the s	submitted work.
of compensation) with entities as descr	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 & Copyric	ghts
Do you have any patents, whether plan	ned, pending or issued, br	roadly relevant to the work? Yes Vo

Nayyar 2



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Disclosure Statement
Based on the above disclosures, this form will automatically generate a disclosure statement, which will appear in the box below.
Dr. Nayyar has nothing to disclose.

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Nayyar 3



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Nguyen 1



Section 1. Identifying Inform		
Identifying Inform	nation	
1. Given Name (First Name) Tuan	2. Surname (Last Name) Nguyen	3. Date 14-December-2020
4. Are you the corresponding author?	☐ Yes ✓ No	Corresponding Author's Name James Otton
<ol><li>Manuscript Title Cardiac magnetic resonance derived le indicator</li></ol>	ft atrial strain after ST-elev	ration myocardial infarction: An independent prognostic
6. Manuscript Identifying Number (if you ki CDT-20-879	now it)	_
C. No. 2		
Section 2. The Work Under C	onsideration for Public	cation
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patent

Pathan 1



Section 1. Identifying Inform	nation	
1. Given Name (First Name) Faraz	2. Surname (Last Name) Pathan	3. Date 14-December-2020
4. Are you the corresponding author?	Yes Vo	Corresponding Author's Name James Otton
<ol><li>Manuscript Title Cardiac magnetic resonance derived le indicator</li></ol>	ft atrial strain after ST-elev	vation myocardial infarction: An independent prognostic
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Section 2. The Work Under C	onsideration for Publi	cation
Did you or your institution <b>at any time</b> rece	eive payment or services from g but not limited to grants, da	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		

Pathan 2



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Vo 1



Section 1. Identifying Inform	nation	
1. Given Name (First Name) Giau	2. Surname (Last Name) Vo	3. Date 14-December-2020
4. Are you the corresponding author?	Yes ✓ No	Corresponding Author's Name James Otton
<ol> <li>Manuscript Title Cardiac magnetic resonance derived let indicator</li> </ol>	ft atrial strain after ST-elev	vation myocardial infarction: An independent prognostic
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Do you have any patents, whether plan		

Vo 2



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Vo 3



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Richards 1



Section 1.		
Identifying Inform	nation	
Given Name (First Name)  David	2. Surname (Last Name) Richards	3. Date 14-December-2020
4. Are you the corresponding author?	☐ Yes 🗸 No	Corresponding Author's Name James Otton
indicator		ation myocardial infarction: An independent prognostic
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Richards 2



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Thomas 1



Section 1.		
Identifying Inform	nation	
1. Given Name (First Name) Liza	2. Surname (Last Name) Thomas	3. Date 14-December-2020
4. Are you the corresponding author?	☐ Yes ✓ No	Corresponding Author's Name James Otton
<ol> <li>Manuscript Title Cardiac magnetic resonance derived le indicator</li> </ol>	ft atrial strain after ST-elev	ation myocardial infarction: An independent prognostic
6. Manuscript Identifying Number (if you kr CDT-20-879	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,
Section 3. Relevant financial	activities outside the s	ubmitted work.
of compensation) with entities as descr	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 & Copyric	ghts
Do you have any patents, whether plan	ned, pending or issued, br	roadly relevant to the work? Yes V No

Thomas 2



Section 5. Polationships not sovered shows
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
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Dr. Thomas has nothing to disclose.

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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.

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**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

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**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

Dimitri 1



Section 1. Identifying Inforn	nation			
1. Given Name (First Name) Hany	2. Surname (Last Name) Dimitri	3. Date 14-December-2020		
4. Are you the corresponding author?	Yes 🗸 No	Corresponding Author's Name James Otton		
5. Manuscript Title Cardiac magnetic resonance derived left atrial strain after ST-elevation myocardial infarction: An independent prognostic indicator				
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Did you or your institution <b>at any time</b> rece	eive payment or services from g 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.		
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Section 4. Intellectual Prope	rty Patents & Copyri	ahts		
Do you have any patents, whether plan				

Dimitri 2



Section 5. Polationships not sovered above			
Relationships not covered above			
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Disclosure Statement			
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Otton 1



Section 1. Identifying Inf	ormation			
1. Given Name (First Name) James	2. Surname (Last Name) Otton	3. Date 14-December-2020		
4. Are you the corresponding author?	✓ Yes No			
5. Manuscript Title Cardiac magnetic resonance derived left atrial strain after ST-elevation myocardial infarction: An independent prognostic indicator				
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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.)?				
Are there any relevant conflicts of interest? Yes V No				
Section 3. Relevant finance	cial activities outside the submitted	work.		
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Section 4. Intellectual Pro	perty Patents & Copyrights			
Do you have any patents, whether p	planned, pending or issued, broadly releva	ant to the work?		

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