

ICMJE Form for Disclosure of Potential Conflicts of Interest

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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4. Intellectual Property.

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

ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)

Othman

2. Surname (Last Name)

Abdul-Malak

3. Date

08-May-2020

4. Are you the corresponding author?

Yes No

Corresponding Author's Name

Efthymios avgerinos

5. Manuscript Title

Adjunct procedures formal perfusion syndrome in complicated acute type B aortic dissection

6. Manuscript Identifying Number (if you know it)

Section 2. The Work Under Consideration for Publication

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Are there any relevant conflicts of interest? Yes No

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Are there any relevant conflicts of interest? Yes No

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Section 6. Disclosure Statement

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Dr. Abdul-Malak has nothing to disclose.

Evaluation and Feedback

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name) Nathan	2. Surname (Last Name) Liang	3. Date 08-May-2020
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Efthymios D. Avgerinos
5. Manuscript Title Adjunct procedures for malperfusion syndrome in complicated acute type B aortic dissection		
6. Manuscript Identifying Number (if you know it) JOVS-2020-AD-04		

Section 2. 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 No

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Section 4. Intellectual Property -- Patents & Copyrights

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Dr. Liang has nothing to disclose.

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1. Given Name (First Name)

Michel

2. Surname (Last Name)

Makaroun

3. Date

13-May-2020

4. Are you the corresponding author?

Yes No

Corresponding Author's Name

Efthymios Avgerinos

5. Manuscript Title

Adjunct procedures for malperfusion syndrome in complicated acute type B aortic dissection

6. Manuscript Identifying Number (if you know it)

JOVS-20-81

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Dr. Makaroun has nothing to disclose.

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2. Surname (Last Name) Avgerinos

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Are there any relevant conflicts of interest? Yes No

If yes, please fill out the appropriate information below.

Name of Entity	Grant?	Personal Fees?	Non-Financial Support?	Other?	Comments
Boston Scientific	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Speakers Bureau
Gore Medical	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Speakers Bureau

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Dr. Avgerinos reports personal fees from Boston Scientific, personal fees from Gore Medical, outside the submitted work; .

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