

ICMJE DISCLOSURE FORM

Date: **Jan 1, 2023**

Your Name: **Turki B. Albacker**

Manuscript Title: **Does Preoperative Screening with Computed Tomography of the Chest Decrease Risk of Stroke in Patients Undergoing Coronary Artery Bypass Grafting**

Manuscript number (if known): **QIMS-22-1047-R2**

In the interest of transparency, we ask you to disclose all relationships/activities/interests listed below that are related to the content of your manuscript. "Related" means any relation with for-profit or not-for-profit third parties whose interests may be affected by the content of the manuscript. Disclosure represents a commitment to transparency and does not necessarily indicate a bias. If you are in doubt about whether to list a relationship/activity/interest, it is preferable that you do so.

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Date: **Jan 1, 2023**

Your Name: **Abdulaziz M. Alhothali**

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Date: **Jan 1, 2023**

Your Name: **Majid Alhomeidan**

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Your Name: **Amr A. Arafat**

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Your Name: **Khaled D. Algarni**

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Your Name: **Ahmed Eldemerdash**

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Your Name: **Bakir Bakir**

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