

ICMJE DISCLOSURE FORM

Date: 2023.09.22

Your Name: [Signature]

Manuscript Title: In vitro and clinical validation of different correction algorithms to two-dimensional proximal isovelocity surface area method for low velocity flow field in tricuspid regurgitation quantitation

Manuscript number (if known): QIMS_22_1311_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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Time frame: past 36 months			
2	Grants or contracts from any entity (if not indicated in item #1 above).	<u>None</u>	
3	Royalties or licenses	<u>None</u>	
4	Consulting fees	<u>None</u>	

5	Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or educational events	___ None	
6	Payment for expert testimony	___ None	
7	Support for attending meetings and/or travel	___ None	
8	Patents planned, issued or pending	___ None	
9	Participation on a Data Safety Monitoring Board or Advisory Board	___ None	
10	Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid	___ None	
11	Stock or stock options	___ None	
12	Receipt of equipment, materials, drugs, medical writing, gifts or other services	___ None	
13	Other financial or non-financial interests	___ None	

Please summarize the above conflict of interest in the following box:

None

Please place an "X" next to the following statement to indicate your agreement:

I certify that I have answered every question and have not altered the wording of any of the questions on this form.

ICMJE DISCLOSURE FORM

Date: 2023.09.22
 Your Name: Liu Li
 Manuscript Title: In vitro and clinical validation of different correction algorithms to two-dimensional proximal isovelocity surface area method for low velocity flow field in tricuspid regurgitation quantitation
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ICMJE DISCLOSURE FORM

Date: 2023.09.22
 Your Name: Chen Beiqi
 Manuscript Title: In vitro and clinical validation of different correction algorithms to two-dimensional proximal isovelocity surface area method for low velocity flow field in tricuspid regurgitation quantitation
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Beiqi Chen

X

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ICMJE DISCLOSURE FORM

Date: 2023.09.22
 Your Name: Zhao Rui
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Date: 2023.09.22
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Date: 2023.09.22
 Your Name: 李 松
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Date: 2023.09.22

Your Name: Alvaro Fajardo

Manuscript Title: In vitro and clinical validation of different correction algorithms to two-dimensional proximal isovelocity surface area method for low velocity flow field in tricuspid regurgitation quantitation

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Manuscript Title: In vitro and clinical validation of different correction algorithms to two-dimensional proximal isovelocity surface area method for low velocity flow field in tricuspid regurgitation quantitation

Manuscript number (if known): QIMS_22_1311_R2

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