Date:20/07/2023
Your Name: Hao Ling
Manuscript Title: _Effects of Ranolazine on Coronary Microvascular Function in Patients with Nonobstructive Coronar
Artery Disease: A Meta-analysis with Trial Sequential Analysis of Randomized Controlled Trials
Manuscript number (if known): QIMS-23-1029

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.

The following questions apply to the author's relationships/activities/interests as they relate to the <u>current manuscript only</u>.

The author's relationships/activities/interests should be <u>defined broadly</u>. For example, if your manuscript pertains to the epidemiology of hypertension, you should declare all relationships with manufacturers of antihypertensive medication, even if that medication is not mentioned in the manuscript.

		Name all entities with	Specifications/Comments
		whom you have this	(e.g., if payments were made to you or to your
		relationship or indicate	institution)
		none (add rows as	
		needed)	
		Time frame: Since the initial	planning of the work
1	All support for the present	None	
	manuscript (e.g., funding,	All authors have	No payment has been made to us yet.
	provision of study materials,	completed the ICMJE	
	medical writing, article	uniform disclosure form.	
	processing charges, etc.)	All authors reported that	
	No time limit for this item.	this work was supported	
		by grants from the Beijing	
		Municipal Natural Science	
		Foundation [grant number	
		7212068]; and the	
		National Natural Science	
		Foundation of China [grant	
		number 81900747]. The	
		authors have no other	
		conflicts of interest to	
		declare.	

		Time frame: past	36 months
2	Grants or contracts from any entity (if not indicated in item #1 above).	_ X _None	
3	Royalties or licenses	X _None	
4	Consulting fees	X _None	
5	Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or educational events	_ X _None	
6	Payment for expert testimony	X_None	
7	Support for attending meetings and/or travel	_X_None	
8	Patents planned, issued or pending	X _None	
9	Participation on a Data Safety Monitoring Board or Advisory Board	X _None	
10	Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid	X_None	
11	Stock or stock options	X_None	
12	Receipt of equipment, materials, drugs, medical writing, gifts or other services	X_None	
13	Other financial or non- financial interests	X _None	

Please place an "X" next to the following statement to indicate your agreement:		
_ X _ I certify that I have answered every question and have not altered the wording of any of the questions on this form.		

Date:20/07/2023
Your Name: Sunjing Fu
Manuscript Title: _Effects of Ranolazine on Coronary Microvascular Function in Patients with Nonobstructive Coronar
Artery Disease: A Meta-analysis with Trial Sequential Analysis of Randomized Controlled Trials
Manuscript number (if known): QIMS-23-1029

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.

The following questions apply to the author's relationships/activities/interests as they relate to the <u>current manuscript only</u>.

The author's relationships/activities/interests should be <u>defined broadly</u>. For example, if your manuscript pertains to the epidemiology of hypertension, you should declare all relationships with manufacturers of antihypertensive medication, even if that medication is not mentioned in the manuscript.

		Name all entities with	Specifications/Comments
		whom you have this	(e.g., if payments were made to you or to your
		relationship or indicate	institution)
		none (add rows as	
		needed)	
		Time frame: Since the initial	planning of the work
1	All support for the present	None	
	manuscript (e.g., funding,	All authors have	No payment has been made to us yet.
	provision of study materials,	completed the ICMJE	
	medical writing, article	uniform disclosure form.	
	processing charges, etc.)	All authors reported that	
	No time limit for this item.	this work was supported	
		by grants from the Beijing	
		Municipal Natural Science	
		Foundation [grant number	
		7212068]; and the	
		National Natural Science	
		Foundation of China [grant	
		number 81900747]. The	
		authors have no other	
		conflicts of interest to	
		declare.	

		Time frame: past	36 months
2	Grants or contracts from any entity (if not indicated in item #1 above).	_ X _None	
3	Royalties or licenses	X _None	
4	Consulting fees	X _None	
5	Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or educational events	_ X _None	
6	Payment for expert testimony	X_None	
7	Support for attending meetings and/or travel	_X_None	
8	Patents planned, issued or pending	X _None	
9	Participation on a Data Safety Monitoring Board or Advisory Board	X _None	
10	Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid	X_None	
11	Stock or stock options	X_None	
12	Receipt of equipment, materials, drugs, medical writing, gifts or other services	X_None	
13	Other financial or non- financial interests	X _None	

Please place an "X" next to the following statement to indicate your agreement:		
_ X _ I certify that I have answered every question and have not altered the wording of any of the questions on this form.		

Date:20/07/2023
Your Name: Mengting Xu
Manuscript Title: _Effects of Ranolazine on Coronary Microvascular Function in Patients with Nonobstructive Coronar
Artery Disease: A Meta-analysis with Trial Sequential Analysis of Randomized Controlled Trials
Manuscript number (if known): QIMS-23-1029

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.

The following questions apply to the author's relationships/activities/interests as they relate to the <u>current manuscript only</u>.

The author's relationships/activities/interests should be <u>defined broadly</u>. For example, if your manuscript pertains to the epidemiology of hypertension, you should declare all relationships with manufacturers of antihypertensive medication, even if that medication is not mentioned in the manuscript.

		Name all entities with	Specifications/Comments
		whom you have this	(e.g., if payments were made to you or to your
		relationship or indicate	institution)
		none (add rows as	
		needed)	
		Time frame: Since the initial	planning of the work
1	All support for the present	None	
	manuscript (e.g., funding,	All authors have	No payment has been made to us yet.
	provision of study materials,	completed the ICMJE	
	medical writing, article	uniform disclosure form.	
	processing charges, etc.)	All authors reported that	
	No time limit for this item.	this work was supported	
		by grants from the Beijing	
		Municipal Natural Science	
		Foundation [grant number	
		7212068]; and the	
		National Natural Science	
		Foundation of China [grant	
		number 81900747]. The	
		authors have no other	
		conflicts of interest to	
		declare.	

		Time frame: past	36 months
2	Grants or contracts from any entity (if not indicated in item #1 above).	_ X _None	
3	Royalties or licenses	X _None	
4	Consulting fees	X _None	
5	Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or educational events	X_None	
6	Payment for expert testimony	X_None	
7	Support for attending meetings and/or travel	_X_None	
8	Patents planned, issued or pending	_ X _None	
9	Participation on a Data Safety Monitoring Board or Advisory Board	_ X _None	
10	Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid	X_None	
11	Stock or stock options	X_None	
12	Receipt of equipment, materials, drugs, medical writing, gifts or other services	X_None	
13	Other financial or non- financial interests	X _None	

Please place an "X" next to the following statement to indicate your agreement:		
_ X _ I certify that I have answered every question and have not altered the wording of any of the questions on this form.		

Date:20/07/2023
Your Name: Bing Wang
Manuscript Title: _Effects of Ranolazine on Coronary Microvascular Function in Patients with Nonobstructive Coronar
Artery Disease: A Meta-analysis with Trial Sequential Analysis of Randomized Controlled Trials
Manuscript number (if known): QIMS-23-1029

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.

The following questions apply to the author's relationships/activities/interests as they relate to the <u>current manuscript only</u>.

The author's relationships/activities/interests should be <u>defined broadly</u>. For example, if your manuscript pertains to the epidemiology of hypertension, you should declare all relationships with manufacturers of antihypertensive medication, even if that medication is not mentioned in the manuscript.

		Name all entities with	Specifications/Comments
		whom you have this	(e.g., if payments were made to you or to your
		relationship or indicate	institution)
		none (add rows as	
		needed)	
		Time frame: Since the initial	planning of the work
1	All support for the present	None	
	manuscript (e.g., funding,	All authors have	No payment has been made to us yet.
	provision of study materials,	completed the ICMJE	
	medical writing, article	uniform disclosure form.	
	processing charges, etc.)	All authors reported that	
	No time limit for this item.	this work was supported	
		by grants from the Beijing	
		Municipal Natural Science	
		Foundation [grant number	
		7212068]; and the	
		National Natural Science	
		Foundation of China [grant	
		number 81900747]. The	
		authors have no other	
		conflicts of interest to	
		declare.	

		Time frame: past	36 months
2	Grants or contracts from any entity (if not indicated in item #1 above).	_ X _None	
3	Royalties or licenses	X _None	
4	Consulting fees	X _None	
5	Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or educational events	X_None	
6	Payment for expert testimony	X_None	
7	Support for attending meetings and/or travel	_X_None	
8	Patents planned, issued or pending	_ X _None	
9	Participation on a Data Safety Monitoring Board or Advisory Board	_ X _None	
10	Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid	X_None	
11	Stock or stock options	X_None	
12	Receipt of equipment, materials, drugs, medical writing, gifts or other services	X_None	
13	Other financial or non- financial interests	X _None	

Please place an "X" next to the following statement to indicate your agreement:		
_ X _ I certify that I have answered every question and have not altered the wording of any of the questions on this form.		

Date:20/07/2023
Your Name: Bingwei Li
Manuscript Title: _Effects of Ranolazine on Coronary Microvascular Function in Patients with Nonobstructive Coronar
Artery Disease: A Meta-analysis with Trial Sequential Analysis of Randomized Controlled Trials
Manuscript number (if known): QIMS-23-1029

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.

The following questions apply to the author's relationships/activities/interests as they relate to the <u>current manuscript only</u>.

The author's relationships/activities/interests should be <u>defined broadly</u>. For example, if your manuscript pertains to the epidemiology of hypertension, you should declare all relationships with manufacturers of antihypertensive medication, even if that medication is not mentioned in the manuscript.

		Name all entities with	Specifications/Comments
		whom you have this	(e.g., if payments were made to you or to your
		relationship or indicate	institution)
		none (add rows as	
		needed)	
		Time frame: Since the initial	planning of the work
1	All support for the present	None	
	manuscript (e.g., funding,	All authors have	No payment has been made to us yet.
	provision of study materials,	completed the ICMJE	
	medical writing, article	uniform disclosure form.	
	processing charges, etc.)	All authors reported that	
	No time limit for this item.	this work was supported	
		by grants from the Beijing	
		Municipal Natural Science	
		Foundation [grant number	
		7212068]; and the	
		National Natural Science	
		Foundation of China [grant	
		number 81900747]. The	
		authors have no other	
		conflicts of interest to	
		declare.	

		Time frame: past	36 months
2	Grants or contracts from any entity (if not indicated in item #1 above).	_ X _None	
3	Royalties or licenses	X _None	
4	Consulting fees	X _None	
5	Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or educational events	X_None	
6	Payment for expert testimony	X_None	
7	Support for attending meetings and/or travel	_X_None	
8	Patents planned, issued or pending	_ X _None	
9	Participation on a Data Safety Monitoring Board or Advisory Board	_ X _None	
10	Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid	X_None	
11	Stock or stock options	X_None	
12	Receipt of equipment, materials, drugs, medical writing, gifts or other services	X_None	
13	Other financial or non- financial interests	X _None	

Please place an "X" next to the following statement to indicate your agreement:		
_ X _ I certify that I have answered every question and have not altered the wording of any of the questions on this form.		

Date:20/07/2023
Your Name: Yuan Li
Manuscript Title: _Effects of Ranolazine on Coronary Microvascular Function in Patients with Nonobstructive Coronary
Artery Disease: A Meta-analysis with Trial Sequential Analysis of Randomized Controlled Trials
Manuscript number (if known): QIMS-23-1029

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.

The following questions apply to the author's relationships/activities/interests as they relate to the <u>current manuscript only</u>.

The author's relationships/activities/interests should be <u>defined broadly</u>. For example, if your manuscript pertains to the epidemiology of hypertension, you should declare all relationships with manufacturers of antihypertensive medication, even if that medication is not mentioned in the manuscript.

		Name all entities with	Specifications/Comments
		whom you have this	(e.g., if payments were made to you or to your
		relationship or indicate	institution)
		none (add rows as	
		needed)	
		Time frame: Since the initial	planning of the work
1	All support for the present	None	
	manuscript (e.g., funding,	All authors have	No payment has been made to us yet.
	provision of study materials,	completed the ICMJE	
	medical writing, article	uniform disclosure form.	
	processing charges, etc.)	All authors reported that	
	No time limit for this item.	this work was supported	
		by grants from the Beijing	
		Municipal Natural Science	
		Foundation [grant number	
		7212068]; and the	
		National Natural Science	
		Foundation of China [grant	
		number 81900747]. The	
		authors have no other	
		conflicts of interest to	
		declare.	

		Time frame: past	36 months
2	Grants or contracts from any entity (if not indicated in item #1 above).	_ X _None	
3	Royalties or licenses	X _None	
4	Consulting fees	X _None	
5	Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or educational events	X_None	
6	Payment for expert testimony	X_None	
7	Support for attending meetings and/or travel	_X_None	
8	Patents planned, issued or pending	_ X _None	
9	Participation on a Data Safety Monitoring Board or Advisory Board	_ X _None	
10	Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid	X_None	
11	Stock or stock options	X_None	
12	Receipt of equipment, materials, drugs, medical writing, gifts or other services	X_None	
13	Other financial or non- financial interests	X _None	

Please place an "X" next to the following statement to indicate your agreement:		
_ X _ I certify that I have answered every question and have not altered the wording of any of the questions on this form.		

Date:20/07/2023
Your Name: Xueting Liu
Manuscript Title: _Effects of Ranolazine on Coronary Microvascular Function in Patients with Nonobstructive Coronar
Artery Disease: A Meta-analysis with Trial Sequential Analysis of Randomized Controlled Trials
Manuscript number (if known): QIMS-23-1029

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.

The following questions apply to the author's relationships/activities/interests as they relate to the <u>current manuscript only</u>.

The author's relationships/activities/interests should be <u>defined broadly</u>. For example, if your manuscript pertains to the epidemiology of hypertension, you should declare all relationships with manufacturers of antihypertensive medication, even if that medication is not mentioned in the manuscript.

		Name all entities with whom you have this relationship or indicate none (add rows as needed)	Specifications/Comments (e.g., if payments were made to you or to your institution)
		Time frame: Since the initial	planning of the work
1	All support for the present manuscript (e.g., funding, provision of study materials, medical writing, article processing charges, etc.)  No time limit for this item.	None All authors have completed the ICMJE uniform disclosure form. All authors reported that this work was supported by grants from the Beijing Municipal Natural Science Foundation [grant number 7212068]; and the National Natural Science	No payment has been made to us yet.
		Foundation of China [grant number 81900747]. The authors have no other conflicts of interest to declare.	

	Time frame: past 36 months			
2	Grants or contracts from any entity (if not indicated in item #1 above).	_ X _None		
3	Royalties or licenses	X _None		
4	Consulting fees	X _None		
5	Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or educational events	_ X _None		
6	Payment for expert testimony	X_None		
7	Support for attending meetings and/or travel	_X_None		
8	Patents planned, issued or pending	X _None		
9	Participation on a Data Safety Monitoring Board or Advisory Board	X _None		
10	Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid	X_None		
11	Stock or stock options	X_None		
12	Receipt of equipment, materials, drugs, medical writing, gifts or other services	X_None		
13	Other financial or non- financial interests	X _None		

Please place an "X" next to the following statement to indicate your agreement:		
_ X _ I certify that I have answered every question and have not altered the wording of any of the questions on this form.		

Date:20/07/2023
Your Name: Xiaoyan Zhang
Manuscript Title: _Effects of Ranolazine on Coronary Microvascular Function in Patients with Nonobstructive Coronar
Artery Disease: A Meta-analysis with Trial Sequential Analysis of Randomized Controlled Trials
Manuscript number (if known): QIMS-23-1029

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.

The following questions apply to the author's relationships/activities/interests as they relate to the <u>current manuscript only</u>.

The author's relationships/activities/interests should be <u>defined broadly</u>. For example, if your manuscript pertains to the epidemiology of hypertension, you should declare all relationships with manufacturers of antihypertensive medication, even if that medication is not mentioned in the manuscript.

		Name all entities with	Specifications/Comments
		whom you have this	(e.g., if payments were made to you or to your
		relationship or indicate	institution)
		none (add rows as	
		needed)	
		Time frame: Since the initial	planning of the work
1	All support for the present	None	
	manuscript (e.g., funding,	All authors have	No payment has been made to us yet.
	provision of study materials,	completed the ICMJE	
	medical writing, article	uniform disclosure form.	
	processing charges, etc.)	All authors reported that	
	No time limit for this item.	this work was supported	
		by grants from the Beijing	
		Municipal Natural Science	
		Foundation [grant number	
		7212068]; and the	
		National Natural Science	
		Foundation of China [grant	
		number 81900747]. The	
		authors have no other	
		conflicts of interest to	
		declare.	

	Time frame: past 36 months			
2	Grants or contracts from any entity (if not indicated in item #1 above).	_ X _None		
3	Royalties or licenses	X _None		
4	Consulting fees	X _None		
5	Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or educational events	X_None		
6	Payment for expert testimony	X_None		
7	Support for attending meetings and/or travel	_X_None		
8	Patents planned, issued or pending	_ X _None		
9	Participation on a Data Safety Monitoring Board or Advisory Board	_ X _None		
10	Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid	X_None		
11	Stock or stock options	X_None		
12	Receipt of equipment, materials, drugs, medical writing, gifts or other services	X_None		
13	Other financial or non- financial interests	X _None		

Please place an "X" next to the following statement to indicate your agreement:		
_ X _ I certify that I have answered every question and have not altered the wording of any of the questions on this form.		

Date:20/07/2023
Your Name: Qin Wang
Manuscript Title: _Effects of Ranolazine on Coronary Microvascular Function in Patients with Nonobstructive Coronar
Artery Disease: A Meta-analysis with Trial Sequential Analysis of Randomized Controlled Trials
Manuscript number (if known): QIMS-23-1029

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.

The following questions apply to the author's relationships/activities/interests as they relate to the <u>current manuscript only</u>.

The author's relationships/activities/interests should be <u>defined broadly</u>. For example, if your manuscript pertains to the epidemiology of hypertension, you should declare all relationships with manufacturers of antihypertensive medication, even if that medication is not mentioned in the manuscript.

		Name all entities with whom you have this relationship or indicate none (add rows as needed)  Time frame: Since the initial	Specifications/Comments (e.g., if payments were made to you or to your institution)  planning of the work
1	All support for the present manuscript (e.g., funding, provision of study materials, medical writing, article processing charges, etc.)  No time limit for this item.	None All authors have completed the ICMJE uniform disclosure form. All authors reported that this work was supported by grants from the Beijing Municipal Natural Science Foundation [grant number 7212068]; and the National Natural Science Foundation of China [grant number 81900747]. The authors have no other conflicts of interest to declare.	No payment has been made to us yet.

	Time frame: past 36 months			
2	Grants or contracts from any entity (if not indicated in item #1 above).	_ X _None		
3	Royalties or licenses	X _None		
4	Consulting fees	X _None		
5	Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or educational events	X_None		
6	Payment for expert testimony	X_None		
7	Support for attending meetings and/or travel	_X_None		
8	Patents planned, issued or pending	_ X _None		
9	Participation on a Data Safety Monitoring Board or Advisory Board	_ X _None		
10	Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid	X_None		
11	Stock or stock options	X_None		
12	Receipt of equipment, materials, drugs, medical writing, gifts or other services	X_None		
13	Other financial or non- financial interests	X _None		

Please place an "X" next to the following statement to indicate your agreement:		
_ X _ I certify that I have answered every question and have not altered the wording of any of the questions on this form.		

Date:20/07/2023
Your Name: Ailing Li
Manuscript Title: _Effects of Ranolazine on Coronary Microvascular Function in Patients with Nonobstructive Coronary
Artery Disease: A Meta-analysis with Trial Sequential Analysis of Randomized Controlled Trials
Manuscript number (if known): QIMS-23-1029

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.

The following questions apply to the author's relationships/activities/interests as they relate to the <u>current manuscript only</u>.

The author's relationships/activities/interests should be <u>defined broadly</u>. For example, if your manuscript pertains to the epidemiology of hypertension, you should declare all relationships with manufacturers of antihypertensive medication, even if that medication is not mentioned in the manuscript.

	Name all entities with whom you have this relationship or indicate none (add rows as needed)	Specifications/Comments (e.g., if payments were made to you or to your institution)
	Time frame: Since the initia	l planning of the work
All support for the promanuscript (e.g., fund provision of study made medical writing, article processing charges, eta No time limit for this processing charges, eta no time limit for this processing charges.	esentNone ding, All authors have sterials, completed the ICMJE uniform disclosure form. etc.) All authors reported that	No payment has been made to us yet.

	Time frame: past 36 months		
2	Grants or contracts from any entity (if not indicated in item #1 above).	_ X _None	
3	Royalties or licenses	X _None	
4	Consulting fees	X _None	
5	Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or educational events	X_None	
6	Payment for expert testimony	X_None	
7	Support for attending meetings and/or travel	_X_None	
8	Patents planned, issued or pending	_ X _None	
9	Participation on a Data Safety Monitoring Board or Advisory Board	_ X _None	
10	Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid	X_None	
11	Stock or stock options	X_None	
12	Receipt of equipment, materials, drugs, medical writing, gifts or other services	X_None	
13	Other financial or non- financial interests	X _None	

Please place an "X" next to the following statement to indicate your agreement:
_ X _ I certify that I have answered every question and have not altered the wording of any of the questions on this form.

Date:20/07/2023
Your Name: Mingming Liu
Manuscript Title: _Effects of Ranolazine on Coronary Microvascular Function in Patients with Nonobstructive Coronar
Artery Disease: A Meta-analysis with Trial Sequential Analysis of Randomized Controlled Trials
Manuscript number (if known): QIMS-23-1029

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.

The following questions apply to the author's relationships/activities/interests as they relate to the <u>current manuscript only</u>.

The author's relationships/activities/interests should be <u>defined broadly</u>. For example, if your manuscript pertains to the epidemiology of hypertension, you should declare all relationships with manufacturers of antihypertensive medication, even if that medication is not mentioned in the manuscript.

		Name all entities with whom you have this relationship or indicate none (add rows as needed)	Specifications/Comments (e.g., if payments were made to you or to your institution)
		Time frame: Since the initial	planning of the work
1	All support for the present manuscript (e.g., funding, provision of study materials, medical writing, article processing charges, etc.)  No time limit for this item.	None All authors have completed the ICMJE uniform disclosure form. All authors reported that this work was supported by grants from the Beijing Municipal Natural Science Foundation [grant number 7212068]; and the National Natural Science Foundation of China [grant number 81900747]. The authors have no other conflicts of interest to declare.	No payment has been made to us yet.

	Time frame: past 36 months		
2	Grants or contracts from any entity (if not indicated in item #1 above).	_ X _None	
3	Royalties or licenses	X _None	
4	Consulting fees	X _None	
5	Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or educational events	X_None	
6	Payment for expert testimony	X_None	
7	Support for attending meetings and/or travel	_X_None	
8	Patents planned, issued or pending	_ X _None	
9	Participation on a Data Safety Monitoring Board or Advisory Board	_ X _None	
10	Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid	X_None	
11	Stock or stock options	X_None	
12	Receipt of equipment, materials, drugs, medical writing, gifts or other services	X_None	
13	Other financial or non- financial interests	X _None	

Please place an "X" next to the following statement to indicate your agreement:
_ X _ I certify that I have answered every question and have not altered the wording of any of the questions on this form.