

ICMJE Form for Disclosure of Potential Conflicts of Interest

Instructions

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)
Mengjia

2. Surname (Last Name)
Chen

3. Date
10-November-2023

4. Are you the corresponding author?

Yes No

Corresponding Author's Name
Chunyan Ma

5. Manuscript Title
Ventricular Dysfunction Consequences of Mechanical Dyssynchrony in Isolated Complete Right Bundle Branch Block versus the Left Bundle Branch Block

6. Manuscript Identifying Number (if you know it)
QIMS-23-959

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Xueyang

2. Surname (Last Name)
Zhang

3. Date
10-November-2023

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Yes No

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Chunyan Ma

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1. Given Name (First Name) Guangyuan	2. Surname (Last Name) Li	3. Date 10-November-2023
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Chunyan Ma
5. Manuscript Title Ventricular Dysfunction Consequences of Mechanical Dyssynchrony in Isolated Complete Right Bundle Branch Block versus the Left Bundle Branch Block		
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Yonghuai

2. Surname (Last Name)
Wang

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10-November-2023

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Corresponding Author's Name
Chunyan Ma

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Section 1. Identifying Information

1. Given Name (First Name)
Chunyan

2. Surname (Last Name)
Ma

3. Date
10-November-2023

4. Are you the corresponding author? Yes No

5. Manuscript Title
Ventricular Dysfunction Consequences of Mechanical Dyssynchrony in Isolated Complete Right Bundle Branch Block versus the Left Bundle Branch Block

6. Manuscript Identifying Number (if you know it)
QIMS-23-959

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.)?

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Dr. Ma has nothing to disclose.

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