| Date: | 12/16/2023 |
|----------|--|
| Your Nar | ne: <u>Fuqian Guo</u> |
| Manuscr | ipt Title: Cardiac Computed Tomography Angiography-Derived pulmonary vein volumetry as |
| predicto | r for AF recurrence after catheter ablation |
| Manuscr | int number (if known): OIMS 22-1202 P1 |

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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| | | 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, | X None | |
| | medical writing, article | | |
| | processing charges, etc.) | | |
| | No time limit for this item. | | |
| | | | |
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| | | Time frame: past | 36 months |
| 2 | Grants or contracts from | X None | |
| | any entity (if not indicated | | |
| | in item #1 above). | | |
| 3 | Royalties or licenses | _X _None | |
| | | | |
| | | | |
| 4 | Consulting fees | X None | |
| | | | |

| 5 | Payment or honoraria for | _ X _None | |
|----|--|------------------|--|
| | lectures, presentations, | | |
| | speakers bureaus, | | |
| | manuscript writing or | | |
| | educational events | | |
| 6 | Payment for expert | X _None | |
| | testimony | | |
| _ | | | |
| 7 | Support for attending meetings and/or travel | X_None | |
| | | | |
| | | | |
| 8 | Patents planned, issued or | X None | |
| | pending | | |
| | | | |
| 9 | Participation on a Data | XNone | |
| | Safety Monitoring Board or | | |
| | Advisory Board | | |
| 10 | Leadership or fiduciary role | X_None | |
| | in other board, society, | | |
| | committee or advocacy | | |
| | group, paid or unpaid | | |
| 11 | Stock or stock options | X _None | |
| | | | |
| 12 | Receipt of equipment, | X None | |
| 12 | materials, drugs, medical | <u>X</u> None | |
| | writing, gifts or other | | |
| | services | | |
| 13 | Other financial or non- | X_None | |
| | financial interests | | |
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| Fuqiar | Fuqian Guo has no conflict of interest in this article. | | | |
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Please place an "X" next to the following statement to indicate your agreement:

| Date: | 12/16/2023 |
|-----------|--|
| Your Nar | ne: Tongtong Zheng |
| Manuscr | ipt Title: Cardiac Computed Tomography Angiography-Derived pulmonary vein volumetry as |
| predictor | r for AF recurrence after catheter ablation |
| Manuscr | int number (if known): OIMS-23-1302-R1 |

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|---|--|--|---|
| | _ | Time frame: Since the initial | planning of the work |
| 1 | All support for the present manuscript (e.g., funding, provision of study materials, | X_None | |
| | medical writing, article | | |
| | processing charges, etc.) | | |
| | No time limit for this item. | | |
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| | | Time frame: past | 36 months |
| 2 | Grants or contracts from | X_None | |
| | any entity (if not indicated | | |
| | in item #1 above). | | |
| 3 | Royalties or licenses | _X _None | |
| | | | |
| | | | |
| 4 | Consulting fees | X_None | |
| | | | |

| 5 | Payment or honoraria for | _ X _None | |
|----|--|------------------|--|
| | lectures, presentations, | | |
| | speakers bureaus, | | |
| | manuscript writing or | | |
| | educational events | | |
| 6 | Payment for expert | X _None | |
| | testimony | | |
| _ | | | |
| 7 | Support for attending meetings and/or travel | X_None | |
| | | | |
| | | | |
| 8 | Patents planned, issued or | X None | |
| | pending | | |
| | | | |
| 9 | Participation on a Data | XNone | |
| | Safety Monitoring Board or | | |
| | Advisory Board | | |
| 10 | Leadership or fiduciary role | X_None | |
| | in other board, society, | | |
| | committee or advocacy | | |
| | group, paid or unpaid | | |
| 11 | Stock or stock options | X _None | |
| | | | |
| 12 | Receipt of equipment, | X None | |
| 12 | materials, drugs, medical | <u>X</u> None | |
| | writing, gifts or other | | |
| | services | | |
| 13 | Other financial or non- | X_None | |
| | financial interests | | |
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| Tongtong Z | Tongtong Zheng has has no conflict of interest in this article. | | | | |
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Please place an "X" next to the following statement to indicate your agreement:

| Date: | 12/16/2023 |
|----------|---|
| Your Na | me: <u>Chenguang Kou</u> |
| Manuscr | ript Title: Cardiac Computed Tomography Angiography-Derived pulmonary vein volumetry as |
| predicto | r for AF recurrence after catheter ablation |
| Manuscr | ript number (if known): OIMS-23-1302-R1 |

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|---|---|--|---|
| | | Time frame: Since the initial | planning of the work |
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| | | 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 | XNone | |
| 4 | Consulting fees | _X_None | |

| 5 | Payment or honoraria for | _ X _None | |
|----|--|------------------|--|
| | lectures, presentations, | | |
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| 6 | Payment for expert | X _None | |
| | testimony | | |
| _ | | | |
| 7 | Support for attending meetings and/or travel | X_None | |
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| | | | |
| 8 | Patents planned, issued or | X None | |
| | pending | | |
| | | | |
| 9 | Participation on a Data | XNone | |
| | Safety Monitoring Board or | | |
| | Advisory Board | | |
| 10 | Leadership or fiduciary role | X_None | |
| | in other board, society, | | |
| | committee or advocacy | | |
| | group, paid or unpaid | | |
| 11 | Stock or stock options | X _None | |
| | | | |
| 12 | Receipt of equipment, | X None | |
| 12 | materials, drugs, medical | <u>X</u> None | |
| | writing, gifts or other | | |
| | services | | |
| 13 | Other financial or non- | X_None | |
| | financial interests | | |
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| Che | Chenguang Kou has no conflict of interest in this article. | | | | |
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Please place an "X" next to the following statement to indicate your agreement:

| Date: | 12/16/2023 | | | | |
|---|--|--|--|--|--|
| Your Name: Caiying Li | | | | | |
| Manuscr | ipt Title: Cardiac Computed Tomography Angiography-Derived pulmonary vein volumetry as | | | | |
| predictor for AF recurrence after catheter ablation | | | | | |
| Manuscr | int number (if known): OIMS-23-1302-R1 | | | | |

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|---|---|--|---|--|--|--|--|--|--|
| | 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. | X None | | | | | | | |
| | | 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, | _ X _None | |
|----|---|------------------|--|
| | | | |
| | speakers bureaus, | | |
| | manuscript writing or | | |
| | educational events | | |
| 6 | Payment for expert testimony | X _None | |
| | | | |
| _ | | | |
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| | | | |
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| | group, paid or unpaid | | |
| 11 | Stock or stock options | X _None | |
| | | | |
| 12 | Descipt of equipment | X None | |
| 12 | Receipt of equipment, materials, drugs, medical | X_None | |
| | writing, gifts or other | | |
| | services | | |
| 13 | Other financial or non- financial interests | X_None | |
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| Caiying Li has no conflict of interest in this article. | | | | | |
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