



ICMJE Form for Disclosure of Potential Conflicts of Interest

Instructions

The purpose of this form is to provide readers of your manuscript with information about your other interests that could influence how they receive and understand your work. The form is designed to be completed electronically and stored electronically. It contains programming that allows appropriate data display. Each author should submit a separate form and is responsible for the accuracy and completeness of the submitted information. The form is in six parts.

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4. Intellectual Property.

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Section 1. Identifying Information

1. Given Name (First Name) Atene	2. Surname (Last Name) Simonyi	3. Date 24-September-2020
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Artur Beke
5. Manuscript Title EFFECTIVENESS OF FETAL ULTRASOUND DIAGNOSTICS IN CARDIAC MALFORMATIONS AND ASSOCIATION WITH POLYHYDRAMNIOS AND OLIGOHYDRAMNIOS		
6. Manuscript Identifying Number (if you know it) QIMS-20-823		

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Dr. Simonyi has nothing to disclose.

Evaluation and Feedback

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Section 1. Identifying Information

1. Given Name (First Name) Fanni Rebeka	2. Surname (Last Name) Eros	3. Date 24-September-2020
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Artur Beke
5. Manuscript Title EFFECTIVENESS OF FETAL ULTRASOUND DIAGNOSTICS IN CARDIAC MALFORMATIONS AND ASSOCIATION WITH POLYHYDRAMNIOS AND OLIGOHYDRAMNIOS		
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4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Artur Beke
5. Manuscript Title EFFECTIVENESS OF FETAL ULTRASOUND DIAGNOSTICS IN CARDIAC MALFORMATIONS AND ASSOCIATION WITH POLYHYDRAMNIOS AND OLIGOHYDRAMNIOS		
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1. Given Name (First Name)
Artur

2. Surname (Last Name)
Beke

3. Date
24-September-2020

4. Are you the corresponding author? Yes No

5. Manuscript Title
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