Date:Sep.3 rd , 2021				
our Name:Tadashi Umehara				
Manuscript Title: Hemodynamic features underlying pulmonary vein stump thrombus formation after left upper				
obectomy: Four-dimensional flow magnetic resonance imaging study				
Manuscript number (if known):	QIMS-21-472			

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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4	Consulting fees	X_None	
5		XNone	

6	Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or educational events Payment for expert testimony	XNone	
7	Support for attending meetings and/or travel	XNone	
8	Patents planned, issued or pending	XNone	
9	Participation on a Data Safety Monitoring Board or Advisory Board	XNone	
10	Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid	XNone	
11	Stock or stock options	XNone	
12	Receipt of equipment, materials, drugs, medical writing, gifts or other services	XNone	
13	Other financial or non- financial interests	XNone	

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This study is supported by grant-in-aid for scientific research JSPS KAKENHI (JP19K18221) which is paid to m
institution.

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

Da	ite:Sep.3 rd , 2021		
Yo	ur Name:Koji Takumi		
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3	Royalties or licenses	XNone	
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5	Payment or honoraria for	XNone	

educational events		
Payment for expert	XNone	
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Support for attending meetings and/or travel	XNone	
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Patents planned, issued or pending	XNone	
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Participation on a Data	XNone	
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Stock or stock options	XNone	
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Other financial or non-	X None	
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Da	te:Sep.3 rd , 2021		
Yo	ur Name:Kazuhiro Ueda		
	· —		ulmonary vein stump thrombus formation after left upper maging study
Ma	nuscript number (if known)	: QIMS-21-47	
rel pa to rel	ated to the content of your rties whose interests may be transparency and does not ationship/activity/interest,	manuscript. "Related" med e affected by the content on necessarily indicate a bias. it is preferable that you do	I relationships/activities/interests listed below that are ans any relation with for-profit or not-for-profit third of the manuscript. Disclosure represents a commitment If you are in doubt about whether to list a o so.
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4	Consulting fees	X_None	
5	Payment or honoraria for lectures, presentations,	XNone	

	educational events		
6	Payment for expert	XNone	
	testimony		
7	Support for attending meetings and/or travel	XNone	
8	Patents planned, issued or	XNone	
	pending		
9	Participation on a Data	XNone	
	Safety Monitoring Board or		
	Advisory Board		
	Leadership or fiduciary role	XNone	
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	committee or advocacy group, paid or unpaid		
11	Stock or stock options	XNone	
12	Receipt of equipment,	XNone	
	materials, drugs, medical		
	writing, gifts or other		
	services		
13	Other financial or non-	XNone	
	financial interests		
Ple	ase summarize the above c	onflict of interest in the fo	llowing box:

I have no conflict of interest to declare.			

Da	te:Sep.3 rd , 2021		
Yo	ur Name:Takuya Tokuna	ıga	
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Patents planned, issued or	XNone	
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Participation on a Data	XNone	
Safety Monitoring Board or		
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Stock or stock options	XNone	
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Other financial or non-	X None	
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Da	te:Sep.3 rd , 2021		
Yo	ur Name:Aya Harada-Ta	keda	
			ulmonary vein stump thrombus formation after left upper maging study
Ma	anuscript number (if known)	: OIMS-21-47	
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to me	the epidemiology of hyperte edication, even if that medic	ension, you should declare ation is not mentioned in apport for the work reporte	defined broadly. For example, if your manuscript pertains all relationships with manufacturers of antihypertensive the manuscript. ed in this manuscript without time limit. For all other items,
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5	Payment or honoraria for lectures, presentations,	XNone	

	educational events				
6	Payment for expert	XNone			
	testimony				
7	Support for attending meetings and/or travel	XNone			
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8	Patents planned, issued or pending	XNone			
9	Participation on a Data	XNone			
	Safety Monitoring Board or				
	Advisory Board				
10	Leadership or fiduciary role	XNone			
	in other board, society,				
	committee or advocacy				
	group, paid or unpaid				
11	Stock or stock options	XNone			
12	Receipt of equipment,	XNone			
	materials, drugs, medical				
	writing, gifts or other				
	services				
13	Other financial or non-	XNone			
	financial interests				
	Please summarize the above conflict of interest in the following box: I have no conflict of interest to declare.				

Date:Sep.3 rd , 2021	
Your Name:Masami Sato	
• = •	nderlying pulmonary vein stump thrombus formation after left upper resonance imaging study
Manuscript number (if known):	QIMS-21-
47	

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6	educational events Payment for expert	X None				
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7	Support for attending meetings and/or travel	XNone				
8	Patents planned, issued or	XNone				
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9	Participation on a Data Safety Monitoring Board or	XNone				
10	Advisory Board Leadership or fiduciary role	XNone				
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	committee or advocacy					
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	writing, gifts or other services					
13	Other financial or non-	XNone				
	financial interests					
Please summarize the above conflict of interest in the following box:						
	I have no conflict of interest to declare.					
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Ple	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

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