

## ICMJE DISCLOSURE FORM

Date: 2021/6/29

Your Name: Qin-Yan An

Manuscript Title: Effectiveness and safety of exercise training and rehabilitation in chronic thromboembolic pulmonary hypertension: a systematic review and meta-analysis

Manuscript number (if known): \_\_\_\_\_

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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13	Other financial or non-financial interests	____ None	

**Please summarize the above conflict of interest in the following box:**

NONE
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**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.**

## ICMJE DISCLOSURE FORM

Date: 2021/6/29

Your Name: Lan Wang

Manuscript Title: Effectiveness and safety of exercise training and rehabilitation in chronic thromboembolic pulmonary hypertension: a systematic review and meta-analysis

Manuscript number (if known): \_\_\_\_\_

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## ICMJE DISCLOSURE FORM

Date: 2021/6/29

Your Name: Ping Yuan

Manuscript Title: Effectiveness and safety of exercise training and rehabilitation in chronic thromboembolic pulmonary hypertension: a systematic review and meta-analysis

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## ICMJE DISCLOSURE FORM

Date: 2021/6/29

Your Name: Qin-Hua Zhao

Manuscript Title: Effectiveness and safety of exercise training and rehabilitation in chronic thromboembolic pulmonary hypertension: a systematic review and meta-analysis

Manuscript number (if known): \_\_\_\_\_

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## ICMJE DISCLOSURE FORM

Date: 2021/6/29

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Your Name: Su-Gang Gong

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Manuscript Title: Effectiveness and safety of exercise training and rehabilitation in chronic thromboembolic pulmonary hypertension: a systematic review and meta-analysis

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Manuscript number (if known): \_\_\_\_\_

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## ICMJE DISCLOSURE FORM

Date: 2021/6/29

Your Name: Rui Zhang

Manuscript Title: Effectiveness and safety of exercise training and rehabilitation in chronic thromboembolic pulmonary hypertension: a systematic review and meta-analysis

Manuscript number (if known): \_\_\_\_\_

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## ICMJE DISCLOSURE FORM

Date: 2021/6/29

Your Name: Jing He

Manuscript Title: Effectiveness and safety of exercise training and rehabilitation in chronic thromboembolic pulmonary hypertension: a systematic review and meta-analysis

Manuscript number (if known): \_\_\_\_\_

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## ICMJE DISCLOSURE FORM

Date: 2021/6/29

Your Name: Ci-Jun Luo

Manuscript Title: Effectiveness and safety of exercise training and rehabilitation in chronic thromboembolic pulmonary hypertension: a systematic review and meta-analysis

Manuscript number (if known): \_\_\_\_\_

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## ICMJE DISCLOSURE FORM

Date: 2021/6/29

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Your Name: Hong-Ling Qiu

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Manuscript Title: Effectiveness and safety of exercise training and rehabilitation in chronic thromboembolic pulmonary hypertension: a systematic review and meta-analysis

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## ICMJE DISCLOSURE FORM

Date: 2021/6/29

Your Name: Hui-Ting Li

Manuscript Title: Effectiveness and safety of exercise training and rehabilitation in chronic thromboembolic pulmonary hypertension: a systematic review and meta-analysis

Manuscript number (if known): \_\_\_\_\_

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## ICMJE DISCLOSURE FORM

Date: 2021/6/29

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Your Name: Jin-Ming Liu

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Manuscript Title: Effectiveness and safety of exercise training and rehabilitation in chronic thromboembolic pulmonary hypertension: a systematic review and meta-analysis

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Your Name: Jing-Jing Wang

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1	All support for the present manuscript (e.g., funding, provision of study materials, medical writing, article processing charges, etc.) <b>No time limit for this item.</b>	_____ None	
<b>Time frame: past 36 months</b>			
2	Grants or contracts from any entity (if not indicated in item #1 above).	_____ None	
3	Royalties or licenses	_____ None	
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5	Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or educational events	____ None	
6	Payment for expert testimony	____ None	
7	Support for attending meetings and/or travel	____ None	
8	Patents planned, issued or pending	____ None	
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10	Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid	____ None	
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**Please summarize the above conflict of interest in the following box:**

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**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.**



## ICMJE DISCLOSURE FORM

Date: 2021/6/29

Your Name: Kuan Cheng

Manuscript Title: Effectiveness and safety of exercise training and rehabilitation in chronic thromboembolic pulmonary hypertension: a systematic review and meta-analysis

Manuscript number (if known): \_\_\_\_\_

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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**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.**

## ICMJE DISCLOSURE FORM

Date: 2021/6/29

Your Name: Rong Jiang

Manuscript Title: Effectiveness and safety of exercise training and rehabilitation in chronic thromboembolic pulmonary hypertension: a systematic review and meta-analysis

Manuscript number (if known): \_\_\_\_\_

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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