Da	ate: 107 - 05 - 1	- 1. D	
		ingthe leng	
M	anuscript Title: <u>Differences</u>	in Minical features of hyp	ertrophic cardiomyopathy with or without left ventricular
-	largement		Manager and the second
M	anuscript number (if known)):	
re pa to	lated to the content of your arties whose interests may be	manuscript. "Related" me e affected by the content necessarily indicate a bias	all relationships/activities/interests listed below that are eans any relation with for-profit or not-for-profit third of the manuscript. Disclosure represents a commitment s. If you are in doubt about whether to list a
	ne following questions apply anuscript only.	to the author's relations	hips/activities/interests as they relate to the current
to	the epidemiology of hyperto edication, even if that medic	ension, you should declar cation is not mentioned in	
	item #1 below, report all su e time frame for disclosure i		ted in this manuscript without time limit. For all other items,
IP.		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 initi	al 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.	None	
		Time frame: pas	st 36 months
2	Grants or contracts from any entity (if not indicated in item #1 above).	None	
3	Royalties or licenses	None	

None

Consulting fees

5	Payment or honoraria for	None	
	lectures, presentations,		
	speakers bureaus, manuscript writing or educational events		
6	Payment for expert	None	
	testimony		
7	Support for attending	None	
	meetings and/or travel		
8	Patents planned, issued or	None	
	pending		
9	Participation on a Data Safety Monitoring Board or	Mone	
	Advisory Board		
10	Leadership or fiduciary role in other board, society,	None	
	committee or advocacy group, paid or unpaid		
11	Stock or stock options	None	
12	Receipt of equipment,	None	
12	materials, drugs, medical writing, gifts or other services	None	
13	Other financial or non-	\ /None	
	financial interests		
2.1.12.2			

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

The author declare that they have	no competing interests.	

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

I certify that I have answered every question and have not altered the wording of any of the questions on this form.

Date: 7000 - Your Name:	yangang Zhau
	erences in clinical features of hypertrophic cardiomyopathy with or without left ventricular
enlargement	
Manuscript number (if	known):
manascript names (n	

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.

The following questions apply to the author's relationships/activities/interests as they relate to the <u>current</u> <u>manuscript only</u>.

The author's relationships/activities/interests should be <u>defined broadly</u>. For example, if your manuscript pertains to the epidemiology of hypertension, you should declare all relationships with manufacturers of antihypertensive medication, even if that medication is not mentioned in the manuscript.

In item #1 below, report all support for the work reported in this manuscript without time limit. For all other items, the time frame for disclosure is the past 36 months.

		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 initi	al 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.	None	
		Time frame: pas	st 36 months
2	Grants or contracts from any entity (if not indicated in item #1 above).	<u>√</u> None	
3	Royalties or licenses	None	
4	Consulting fees	None	

	Payment or honoraria for	✓None	
	lectures, presentations, speakers bureaus, manuscript writing or educational events		
6	Payment for expert testimony	None	
		1	
7	Support for attending meetings and/or travel	None	
8	Patents planned, issued or pending	None	
9	Participation on a Data Safety Monitoring Board or	<u>∨</u> None	
-	Advisory Board		
	Leadership or fiduciary role	None	
	in other board, society,		
	committee or advocacy group, paid or unpaid		
	Stock or stock options	None	
	Stock of Stock options	γ None	
12	Receipt of equipment, materials, drugs, medical	_√None	
	writing, gifts or other services		
	Other financial or non-	None	
	financial interests		

The au	or declare that they have no competing interests.	

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

I certify that I have answered every question and have not altered the wording of any of the questions on this form.

Date: 1021.08.17 Then Too. Your Name:
Manuscript Title: Differences in clinical features of hypertrophic cardiomyopathy with or without left ventrice
enlargement
Manuscript number (if known):
In the interest of transparency, we ask you to disclose all relationships/activities/interests listed below that a

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.

The following questions apply to the author's relationships/activities/interests as they relate to the <u>current</u> <u>manuscript only</u>.

The author's relationships/activities/interests should be <u>defined broadly</u>. For example, if your manuscript pertains to the epidemiology of hypertension, you should declare all relationships with manufacturers of antihypertensive medication, even if that medication is not mentioned in the manuscript.

In item #1 below, report all support for the work reported in this manuscript without time limit. For all other items, the time frame for disclosure is the past 36 months.

		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)
	第二次图4 元 《图6 》 4 年 8 元 元 元 - 《	Time frame: Since the initi	al 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.	None	
		Time frame: pas	st 36 months
2	Grants or contracts from any entity (if not indicated in item #1 above).	None	
3	Royalties or licenses	None	
4	Consulting fees		

5	Payment or honoraria for	None	
	lectures, presentations,	-V-rione	
	speakers bureaus,		
	manuscript writing or		
	educational events		
6	Payment for expert	None	
	testimony		
4		/61	
7	Support for attending meetings and/or travel	None	
8	Patents planned, issued or	None	
	pending		
9	Participation on a Data	None	
	Safety Monitoring Board or		
	Advisory Board		
10	Leadership or fiduciary role in other board, society,	None	
	committee or advocacy		
	group, paid or unpaid		
11	Stock or stock options	None	
12	Receipt of equipment,	None	
	materials, drugs, medical		
	writing, gifts or other		
	services	1	
13	Other financial or non-	None	
	financial interests		
Ple	ease summarize the above c	onflict of interest in the	following hox:
		The state of the s	Jones Harris
	The author declare that the	y have no competing in	terests
	The dathor decisie that the	y mare no competing in	ici coto.

The	author declare that they have no competing interests.

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

I certify that I have answered every question and have not altered the wording of any of the questions on this form.

Date: 2021 8 - 17	
Your Name:	Gaiging Va
Manuscript Title: Diffe enlargement	erences in clinical features of hypertrophic cardiomyopathy with or without left ventricular
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.

The following questions apply to the author's relationships/activities/interests as they relate to the <u>current manuscript only</u>.

The author's relationships/activities/interests should be <u>defined broadly</u>. For example, if your manuscript pertains to the epidemiology of hypertension, you should declare all relationships with manufacturers of antihypertensive medication, even if that medication is not mentioned in the manuscript.

In item #1 below, report all support for the work reported in this manuscript without time limit. For all other items, the time frame for disclosure is the past 36 months.

1		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 initi	al 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.	None	
		Time frame: pas	t 36 months
2	Grants or contracts from any entity (if not indicated in item #1 above).	None	
3	Royalties or licenses	None	
ŀ	Consulting fees	None	

es, presentations, ers bureaus, cript writing or cional events nt for expert ony rt for attending ngs and/or travel	None		
cript writing or cional events nt for expert ony			
ony rt for attending			
rt for attending	None		
	None		
	None		
Patents planned, issued or pending	None		
Participation on a Data Safety Monitoring Board or Advisory Board	None		
Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid	None		
or stock options	None		
Receipt of equipment, materials, drugs, medical writing, gifts or other services	None		
Other financial or non- financial interests	None		
t	r stock options of equipment, als, drugs, medical , gifts or other s inancial or non-	r stock options None of equipment, als, drugs, medical , gifts or other s inancial or non- None	r stock options None None None None None None None

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

The author of	declare that the	y have no comp	eting interests.	2230	÷	

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.