Date: 2021-10.27 Your Name: Jingjun Li

Manuscript Title: Effect of cardiac rehabilitation training on patients with coronary heart disease: a systematic

review and Meta-analysis

Manuscript number (if known):

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	any entity (if not indicated in item #1 above).		
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4	Consulting fees	XNone	

5	Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or educational events	XNone			
6	Payment for expert testimony	XNone			
7	Support for attending meetings and/or travel	XNone			
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9	Participation on a Data Safety Monitoring Board or	XNone			
10	Advisory Board  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	X_None			
13	Other financial or non- financial interests	XNone			
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Please place an "X" next to the following statement to indicate your agreement:

Date: 2021-10.27

Your Name: Yongchun Li

Manuscript Title: Effect of cardiac rehabilitation training on patients with coronary heart disease: a systematic

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

Date: 2021-10.27

Your Name: Fengying Gong

Manuscript Title: Effect of cardiac rehabilitation training on patients with coronary heart disease: a systematic

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

Date: 2021-10.27

Your Name: Rongly Huang

Manuscript Title: Effect of cardiac rehabilitation training on patients with coronary heart disease: a systematic

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9	Participation on a Data	XNone			
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10	Leadership or fiduciary role	XNone			
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11	Stock or stock options	XNone			
12	Receipt of equipment,	X None			
12	materials, drugs, medical				
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	The authors have no conflicts of interest to declare.				

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.

Date: 2021-10.27

Your Name: Qiang Zhang

Manuscript Title: Effect of cardiac rehabilitation training on patients with coronary heart disease: a systematic

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6	Payment for expert testimony	XNone			
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	Please summarize the above conflict of interest in the following box:  The authors have no conflicts of interest to declare.				

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

Date: 2021-10.27 Your Name: Zhaoru Liu

Manuscript Title: Effect of cardiac rehabilitation training on patients with coronary heart disease: a systematic

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	The authors have no conflicts of interest to declare.				

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

Date: 2021-10.27 Your Name: Jintao Lin

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Date: 2021-10.27 Your Name: Aiwu Li

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Date: 2021-10.27 Your Name: Ying Lv

Manuscript Title: Effect of cardiac rehabilitation training on patients with coronary heart disease: a systematic

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Date: 2021-10.27

Your Name: Yunshui Cheng

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