

## ICMJE Form for Disclosure of Potential Conflicts of Interest

### Instructions

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#### 1. Identifying information.

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This section asks about patents and copyrights, whether pending, issued, licensed and/or receiving royalties.

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## ICMJE Form for Disclosure of Potential Conflicts of Interest

### Section 1. Identifying Information

1. Given Name (First Name) Yao	2. Surname (Last Name) Ming-Hui	3. Date 22-September-2020
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Sheng-Li Jiang
5. Manuscript Title Short-term and mid-term effects of radiofrequency ablation in mitral valve surgery in patients with different left atrial sizes		
6. Manuscript Identifying Number (if you know it)		

### Section 2. The Work Under Consideration for Publication

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Are there any relevant conflicts of interest?  Yes  No

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Are there any relevant conflicts of interest?  Yes  No

### Section 4. Intellectual Property -- Patents & Copyrights

Do you have any patents, whether planned, pending or issued, broadly relevant to the work?  Yes  No

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Dr. Ming-Hui has nothing to disclose.

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## ICMJE Form for Disclosure of Potential Conflicts of Interest

### Section 1. Identifying Information

1. Given Name (First Name) Ren	2. Surname (Last Name) Chong-Lei	3. Date 22-September-2020
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Sheng-Li Jiang
5. Manuscript Title Short-term and mid-term effects of radiofrequency ablation in mitral valve surgery in patients with different left atrial sizes		
6. Manuscript Identifying Number (if you know it)		

### Section 2. The Work Under Consideration for Publication

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Are there any relevant conflicts of interest?  Yes  No

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Are there any relevant conflicts of interest?  Yes  No

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Dr. Chong-Lei has nothing to disclose.

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1. Given Name (First Name) Zhang	2. Surname (Last Name) Lin	3. Date 22-September-2020
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Sheng-Li Jiang
5. Manuscript Title Short-term and mid-term effects of radiofrequency ablation in mitral valve surgery in patients with different left atrial sizes		
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Dr. Lin has nothing to disclose.

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### Section 1. Identifying Information

1. Given Name (First Name) Li	2. Surname (Last Name) Liang-Gang	3. Date 22-September-2020
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Sheng-Li Jiang
5. Manuscript Title Short-term and mid-term effects of radiofrequency ablation in mitral valve surgery in patients with different left atrial sizes		
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Dr. Liang-Gang has nothing to disclose.

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### Section 1. Identifying Information

1. Given Name (First Name)

Jiang

2. Surname (Last Name)

Sheng-Li

3. Date

22-September-2020

4. Are you the corresponding author?

Yes  No

5. Manuscript Title

Short-term and mid-term effects of radiofrequency ablation in mitral valve surgery in patients with different left atrial sizes

6. Manuscript Identifying Number (if you know it)

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