

#### **Instructions**

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### 3. Relevant financial activities outside the submitted work.

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## 4. Intellectual Property.

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

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**Royalties:** Funds are coming in to you or your institution due to your patent

De Santo 1



Section 1.	Identifying Inform	nation	
1. Given Name (Fi Luca Salvatore	rst Name)	2. Surname (Last Name) De Santo	3. Date 07-October-2020
4. Are you the cor	responding author?	Yes ✓ No	Corresponding Author's Name Antonino Salvatore Rubino
5. Manuscript Title Cardiac surgery		VID-19 outbreak: a regionv	vide survey
6. Manuscript Idei JTD-20-2298	ntifying Number (if you kr	now it)	
Section 2.	The Work Under C	onsideration for Public	cation
any aspect of the s statistical analysis,	submitted work (including	but not limited to grants, da	a third party (government, commercial, private foundation, etc.) for ta monitoring board, study design, manuscript preparation,
Section 3.	Relevant financial	activities outside the s	submitted work.
Place a check in the appropriate boxes in the table to indicate whether you have financial relationships (regardless of amount of compensation) with entities as described in the instructions. Use one line for each entity; add as many lines as you need by clicking the "Add +" box. You should report relationships that were <b>present during the 36 months prior to publication</b> .  Are there any relevant conflicts of interest? Yes V			
Section 4.	Intellectual Prope	rty Patents & Copyric	ghts
Do you have any	patents, whether plan	ned, pending or issued, br	oadly relevant to the work? Yes V No

De Santo 2



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Section 6. Disclosure Statement
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Dr. De Santo has nothing to disclose.

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Rubino 1



Section 1.	Identifying Inform	nation		
1. Given Name (Fi Antonino Salvato	•	2. Surnan Rubino	ne (Last Name)	3. Date 07-October-2020
4. Are you the cor	responding author?	✓ Yes	No	
5. Manuscript Title Cardiac surgery		VID-19 outk	oreak: a regionwide survey	
6. Manuscript Idei JTD-20-2298	ntifying Number (if you kr	now it)		
3.5 20 2270				
Section 2.	The World Hoder C	: .! 4	ion for Publication	
Did you or your ins any aspect of the s statistical analysis,	stitution <b>at any time</b> rece ubmitted work (including	ive payment but not lim		ent, commercial, private foundation, etc.) for tudy design, manuscript preparation,
Section 3.	Relevant financial	activities	outside the submitted work.	
of compensation clicking the "Add	) with entities as descri	bed in the port relatio		cial relationships (regardless of amount ntity; add as many lines as you need by e 36 months prior to publication.
Section 4.	Intellectual Proper	tv Pata	nts & Convrights	
Do you have any patents, whether planned, pending or issued, broadly relevant to the work? Yes No				

Rubino 2



Section 5.					
Section 5.	Relationships not covered above				
	elationships or activities that readers could perceive to have influenced, or that give the appearance of ncing, what you wrote in the submitted work?				
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	nuscript acceptance, journals will ask authors to confirm and, if necessary, update their disclosure statements nals may ask authors to disclose further information about reported relationships.				
Section 6.	Disclosure Statement				
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Dr. Rubino has no	othing to disclose.				

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Torella

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1

administrative support, etc.



Section 1. Identifying Inform	nation		
Given Name (First Name) Michele	2. Surname (Last Name) Torella	3. Date 07-October-2020	
4. Are you the corresponding author?	☐ Yes ✓ No	Corresponding Author's Name Antonino Salvatore Rubino	
5. Manuscript Title Cardiac surgery practice during the CO	VID-19 outbreak: a region	wide survey	
6. Manuscript Identifying Number (if you ki JTD-20-2298	now it)		
Section 2. The Work Under C	onsideration for Public	cation	
Did you or your institution <b>at any time</b> receive payment or services from a third party (government, commercial, private foundation, etc.) for any aspect of the submitted work (including but not limited to grants, data monitoring board, study design, manuscript preparation, statistical analysis, etc.)?			
Are there any relevant conflicts of inter	est?		
Section 3. Polygant financial			
Relevant financial	activities outside the	submitted work.	
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Section 4. Intellectual Prope	rty Patents & Copyri	ghts	
Do you have any patents, whether plan	ned, pending or issued, br	oadly relevant to the work? Yes V No	

Torella 2



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Galbiati 1



Section 1. Identifying Inform	mation	
1. Given Name (First Name) Denise	2. Surname (Last Name) Galbiati	3. Date 07-October-2020
4. Are you the corresponding author?	☐ Yes ✓ No	Corresponding Author's Name Antonino Salvatore Rubino
5. Manuscript Title Cardiac surgery practice during the CO	DVID-19 outbreak: a region	wide survey
6. Manuscript Identifying Number (if you l JTD-20-2298	know it)	
Section 2. The Work Under 0	Consideration for Public	cation
	ng but not limited to grants, da	a third party (government, commercial, private foundation, etc.) for ata monitoring board, study design, manuscript preparation,
Continu 2		
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Do you have any patents, whether pla	nned, pending or issued, br	roadly relevant to the work? Yes V No

Galbiati 2



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lannelli 1



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1. Given Name (First Name) Gabriele	2. Surname (Last Name) Iannelli	3. Date 07-October-2020
4. Are you the corresponding author?	☐ Yes ✓ No	Corresponding Author's Name Antonino Salvatore Rubino
5. Manuscript Title Cardiac surgery practice during the CO	VID-19 outbreak: a region	wide survey
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lannelli 2



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Other: Anything not covered under the previous three boxes

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**Issued:** The patent has been issued by the agency

**Licensed:** The patent has been licensed to an entity, whether earning royalties or not

**Royalties:** Funds are coming in to you or your institution due to your

lesu 1



Section 1. Identifying Inform	nation		
Given Name (First Name)  Severino	2. Surname (Last Name) lesu	3. Date 07-October-2020	
4. Are you the corresponding author?	☐ Yes ✓ No	Corresponding Author's Name Antonino Salvatore Rubino	
5. Manuscript Title Cardiac surgery practice during the CO	VID-19 outbreak: a region	wide survey	
6. Manuscript ldentifying Number (if you k JTD-20-2298	now it)		
Section 2. The Work Under C	Consideration for Public	cation	
Did you or your institution <b>at any time</b> receive payment or services from a third party (government, commercial, private foundation, etc.) for any aspect of the submitted work (including but not limited to grants, data monitoring board, study design, manuscript preparation, statistical analysis, etc.)?			
Are there any relevant conflicts of inter	est?		
Section 3. Relevant financial	activities outside the s	submitted work.	
Place a check in the appropriate boxes in the table to indicate whether you have financial relationships (regardless of amount of compensation) with entities as described in the instructions. Use one line for each entity; add as many lines as you need by clicking the "Add +" box. You should report relationships that were <b>present during the 36 months prior to publication</b> .			
Are there any relevant conflicts of interest? Yes Vo			
Section 4. Intellectual Prope	rty Patents & Copyric	ghts	
Do you have any patents, whether plan	nned, pending or issued, br	roadly relevant to the work? Yes V No	

lesu 2



Section 5.	Relationships not covered above			
	relationships or activities that readers could perceive to have influenced, or that give the appearance of encing, what you wrote in the submitted work?			
	Yes, the following relationships/conditions/circumstances are present (explain below):  No other relationships/conditions/circumstances that present a potential conflict of interest			
At the time of manuscript acceptance, journals will ask authors to confirm and, if necessary, update their disclosure statements. On occasion, journals may ask authors to disclose further information about reported relationships.				
Section 6.	Disclosure Statement			
Based on the abo	ove disclosures, this form will automatically generate a disclosure statement, which will appear in the box			
Dr. lesu has noth	ning to disclose.			

## **Evaluation and Feedback**

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**Royalties:** Funds are coming in to you or your institution due to your patent

Tritto 1



Section 1. Identifying Inform	ation	
1. Given Name (First Name) Francesco Paolo	2. Surname (Last Name) Tritto	3. Date 07-October-2020
4. Are you the corresponding author?	☐ Yes ✓ No	Corresponding Author's Name Antonino Salvatore Rubino
5. Manuscript Title Cardiac surgery practice during the COV	VID-19 outbreak: a region	wide survey
6. Manuscript Identifying Number (if you kr JTD-20-2298	now it)	
		_
Section 2. The Work Under Co	onsideration for Public	cation
	but not limited to grants, da	a third party (government, commercial, private foundation, etc.) for ata monitoring board, study design, manuscript preparation,
Section 3. Relevant financial	activities outside the s	submitted work.
of compensation) with entities as descri	ibed in the instructions. Us port relationships that wer	ether you have financial relationships (regardless of amount se one line for each entity; add as many lines as you need by re present during the 36 months prior to publication.
Section 4. Intellectual Proper		
Intellectual Proper	rty Patents & Copyri	ghts
Do you have any patents, whether plan	ned, pending or issued, br	roadly relevant to the work? Yes V No

Tritto 2



Section 5. Relationships not sovered above
Relationships not covered above
Are there other relationships or activities that readers could perceive to have influenced, or that give the appearance of potentially influencing, what you wrote in the submitted work?
Yes, the following relationships/conditions/circumstances are present (explain below):
✓ No other relationships/conditions/circumstances that present a potential conflict of interest
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Section 6. Disclosure Statement
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Dr. Tritto has nothing to disclose.

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Fiorani 1



Section 1.	Identifying Inform	ation	
1. Given Name (Fir Brenno	rst Name)	2. Surname (Last Name) Fiorani	3. Date 07-October-2020
4. Are you the corr	responding author?	Yes ✓ No	Corresponding Author's Name Antonino Salvatore Rubino
5. Manuscript Title Cardiac surgery p		/ID-19 outbreak: a regionv	vide survey
6. Manuscript Ider JTD-20-2298	ntifying Number (if you kr	now it)	
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Do you have any	patents, whether plan	ned, pending or issued, br	oadly relevant to the work? Yes V No

Fiorani 2



Section 5.					
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Yes, the follo	wing relationships/conditions/circumstances are present (explain below):				
✓ No other rela	tionships/conditions/circumstances that present a potential conflict of interest				
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Section 6.	Disclosure Statement				
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Dr. Fiorani has n	othing to disclose.				

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Chiariello 1



Section 1. Identifying Inform	nation	
1. Given Name (First Name) Luigi	2. Surname (Last Name) Chiariello	3. Date 07-October-2020
4. Are you the corresponding author?	☐ Yes ✓ No	Corresponding Author's Name Antonino Salvatore Rubino
5. Manuscript Title Cardiac surgery practice during the CO	VID-19 outbreak: a region	wide survey
6. Manuscript Identifying Number (if you kr JTD-20-2298	now it)	
Section 2. The Work Under Co	onsideration for Publi	cation
	g but not limited to grants, da	a third party (government, commercial, private foundation, etc.) for ata monitoring board, study design, manuscript preparation,
Section 3. Relevant financial	activities outside the	submitted work.
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Continue A		
Section 4. Intellectual Proper	rty Patents & Copyri	ghts
Do you have any patents, whether plan	ned, pending or issued, br	roadly relevant to the work? Yes V No

Chiariello 2



Section 5.	
Section 5.	Relationships not covered above
	elationships or activities that readers could perceive to have influenced, or that give the appearance of encing, what you wrote in the submitted work?
Yes, the follo	wing relationships/conditions/circumstances are present (explain below):
✓ No other rela	tionships/conditions/circumstances that present a potential conflict of interest
	anuscript acceptance, journals will ask authors to confirm and, if necessary, update their disclosure statements rnals may ask authors to disclose further information about reported relationships.
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Dr. Chiariello ha	s nothing to disclose.

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De Bellis 1



Section 1.	Identifying Inform	ation	
1. Given Name (Fii Antonio	rst Name)	2. Surname (Last Name) De Bellis	3. Date 07-October-2020
4. Are you the cor	responding author?	Yes ✓ No	Corresponding Author's Name Antonino Salvatore Rubino
5. Manuscript Title Cardiac surgery p		/ID-19 outbreak: a region	wide survey
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Section 2			
Section 3.	Relevant financial	activities outside the	submitted work.
of compensation clicking the "Add	) with entities as descri	bed in the instructions. Uport relations hips that we	nether you have financial relationships (regardless of amount less one line for each entity; add as many lines as you need by ere present during the 36 months prior to publication.
Section 4.	Intellectual Duese	tu. Potonte <sup>9</sup> Commi	ahta
	intellectual Proper	ty Patents & Copyri	gnts
Do you have any	patents, whether plan	ned, pending or issued, b	roadly relevant to the work? Yes Vo

De Bellis 2



Section 5.					
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Dr. De Bellis has	nothing to disclose.				

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Di Benedetto 1



Section 1.	Identifying Inform	nation	
1. Given Name (Fii Giuseppe	rst Name)	2. Surname (Last Name) Di Benedetto	3. Date 07-October-2020
4. Are you the cor	responding author?	Yes ✓ No	Corresponding Author's Name Antonino Salvatore Rubino
5. Manuscript Title Cardiac surgery p		VID-19 outbreak: a region	vide survey
6. Manuscript Ider JTD-20-2298	ntifying Number (if you kr	now it)	
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Do you have any	•		oadly relevant to the work? Yes V No

Di Benedetto 2



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Dr. Di Benedetto has nothing to disclose.

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Di Benedetto 3



#### **Instructions**

The purpose of this form is to provide readers of your manuscript with information about your other interests that could influence how they receive and understand your work. The form is designed to be completed electronically and stored electronically. It contains programming that allows appropriate data display. Each author should submit a separate form and is responsible for the accuracy and completeness of the submitted information. The form is in six parts.

## Identifying information.

## 2. The work under consideration for publication.

This section asks for information about the work that you have submitted for publication. The time frame for this reporting is that of the work itself, from the initial conception and planning to the present. The requested information is about resources that you received, either directly or indirectly (via your institution), to enable you to complete the work. Checking "No" means that you did the work without receiving any financial support from any third party -- that is, the work was supported by funds from the same institution that pays your salary and that institution did not receive third-party funds with which to pay you. If you or your institution received funds from a third party to support the work, such as a government granting agency, charitable foundation or commercial sponsor, check "Yes".

### Relevant financial activities outside the submitted work.

This section asks about your financial relationships with entities in the bio-medical arena that could be perceived to influence, or that give the appearance of potentially influencing, what you wrote in the submitted work. You should disclose interactions with ANY entity that could be considered broadly relevant to the work. For example, if your article is about testing an epidermal growth factor receptor (EGFR) antagonist in lung cancer, you should report all associations with entities pursuing diagnostic or therapeutic strategies in cancer in general, not just in the area of EGFR or lung cancer.

Report all sources of revenue paid (or promised to be paid) directly to you or your institution on your behalf over the 36 months prior to submission of the work. This should include all monies from sources with relevance to the submitted work, not just monies from the entity that sponsored the research. Please note that your interactions with the work's sponsor that are outside the submitted work should also be listed here. If there is any question, it is usually better to disclose a relationship than not to do so.

For grants you have received for work outside the submitted work, you should disclose support ONLY from entities that could be perceived to be affected financially by the published work, such as drug companies, or foundations supported by entities that could be perceived to have a financial stake in the outcome. Public funding sources, such as government agencies, charitable foundations or academic institutions, need not be disclosed. For example, if a government agency sponsored a study in which you have been involved and drugs were provided by a pharmaceutical company, you need only list the pharmaceutical company.

## 4. Intellectual Property.

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

## Relationships not covered above.

Use this section to report other relationships or activities that readers could perceive to have influenced, or that give the appearance of potentially influencing, what you wrote in the submitted work.

#### Definitions.

**Entity:** government agency, foundation, commercial sponsor, academic institution, etc.

**Grant:** A grant from an entity, generally [but not always] paid to your organization

**Personal Fees:** Monies paid to you for services rendered, generally honoraria, royalties, or fees for consulting, lectures, speakers bureaus, expert testimony, employment, or other affiliations

**Non-Financial Support:** Examples include drugs/equipment supplied by the entity, travel paid by the entity, writing assistance, administrative support, etc.

Other: Anything not covered under the previous three boxes

**Pending:** The patent has been filed but not issued **Issued:** The patent has been issued by the agency

**Licensed:** The patent has been licensed to an entity, whether earning royalties or not

Royalties: Funds are coming in to you or your institution due to your

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Section 1.	Identifying Inform	nation	
1. Given Name (Fir Carlo	rst Name)	2. Surname (Last Name) Zebele	3. Date 07-October-2020
4. Are you the cor	responding author?	Yes 🗸 No	Corresponding Author's Name Antonino Salvatore Rubino
5. Manuscript Title Cardiac surgery p		VID-19 outbreak: a region	wide survey
6. Manuscript Ider JTD-20-2298	ntifying Number (if you kr	now it)	
			_
Section 2.	The Work Under Co	onsideration for Publi	cation
any aspect of the s statistical analysis,	ubmitted work (including	but not limited to grants, do	a third party (government, commercial, private foundation, etc.) for ata monitoring board, study design, manuscript preparation,
Section 3.	Relevant financial	activities outside the	submitted work.
of compensation clicking the "Add	) with entities as descri	ibed in the instructions. U port relationships that we	nether you have financial relationships (regardless of amount se one line for each entity; add as many lines as you need by re <b>present during the 36 months prior to publication</b> .
Section 4.	Intellectual Proper	rty Patents & Copyri	ghts
Do you have any	patents, whether plan	ned, pending or issued, b	roadly relevant to the work? Yes V No

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Section 5. Relationships not sovered above
Relationships not covered above
Are there other relationships or activities that readers could perceive to have influenced, or that give the appearance of potentially influencing, what you wrote in the submitted work?
Yes, the following relationships/conditions/circumstances are present (explain below):
✓ No other relationships/conditions/circumstances that present a potential conflict of interest
At the time of manuscript acceptance, journals will ask authors to confirm and, if necessary, update their disclosure statements On occasion, journals may ask authors to disclose further information about reported relationships.
Section 6. Disclosure Statement
Based on the above disclosures, this form will automatically generate a disclosure statement, which will appear in the box below.
Dr. Zebele has nothing to disclose.

### **Evaluation and Feedback**

Please visit <a href="http://www.icmje.org/cgi-bin/feedback">http://www.icmje.org/cgi-bin/feedback</a> to provide feedback on your experience with completing this form.

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**Royalties:** Funds are coming in to you or your institution due to your patent

De Feo 1



Section 1.	Identifying Inform	nation		
1. Given Name (First Name) Marisa		2. Surname (Last Name) De Feo	3. Date 07-October-2020	
4. Are you the corresponding author?		Yes ✓ No	Corresponding Author's Name Antonino Salvatore Rubino	
5. Manuscript Title Cardiac surgery practice during the COVID-19 outbreak: a regionwide survey				
6. Manuscript Identifying Number (if you know it) JTD-20-2298				
Section 2. The Work Under Consideration for Publication				
Did you or your institution <b>at any time</b> receive payment or services from a third party (government, commercial, private foundation, etc.) for any aspect of the submitted work (including but not limited to grants, data monitoring board, study design, manuscript preparation, statistical analysis, etc.)?  Are there any relevant conflicts of interest? Yes Vo				
Section 3.	Relevant financial	activities outside the	submitted work.	
Place a check in the appropriate boxes in the table to indicate whether you have financial relationships (regardless of amount of compensation) with entities as described in the instructions. Use one line for each entity; add as many lines as you need by clicking the "Add +" box. You should report relationships that were <b>present during the 36 months prior to publication</b> .  Are there any relevant conflicts of interest? Yes Vo				
Section 4.	Intellectual Prope	rty Patents & Copyri	ghts	
Do you have any patents, whether planned, pending or issued, broadly relevant to the work? Yes Vo				

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Section 5.				
	Relationships not covered above			
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