

Instructions

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Perek

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

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administrative support, etc.



| Section 1. Identifying Inform | nation | |
|--|--|----------------------------------|
| 1. Given Name (First Name) Bartlomiej | 2. Surname (Last Name) Perek | 3. Date 07-December-2020 |
| 4. Are you the corresponding author? | ✓ Yes No | |
| 5. Manuscript Title How the COVID-19 Pandemic Changed | Treatment of Severe Aortic Stenosis: A Single Cardia | ac Center Experience |
| 6. Manuscript Identifying Number (if you kr JTD-20-3025 | now it) | |
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| Section 2. The Work Under C | onsideration for Publication | |
| | vive payment or services from a third party (government, cong but not limited to grants, data monitoring board, study doest? Yes V No | |
| Section 3. Relevant financial | activities outside the submitted work. | |
| of compensation) with entities as descr | in the table to indicate whether you have financial re ibed in the instructions. Use one line for each entity; port relationships that were present during the 36 rest? Yes V | add as many lines as you need by |
| Section 4. Intellectual Proper | | |
| Intellectual Proper | rty Patents & Copyrights | |
| Do you have any patents, whether plan | ned, pending or issued, broadly relevant to the work | ☐ Yes ✓ No</th |

Perek 2



| Section 5. | |
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| Section 5. | Relationships not covered above |
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| Dr. Perek has not | hing to disclose. |

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Olasinska-Wisniewska 1



| Section 1. Identifying Inform | nation | |
|--|---|--|
| 1. Given Name (First Name) Anna | 2. Surname (Last Name) Olasinska-Wisniewska | 3. Date 07-December-2020 |
| 4. Are you the corresponding author? | Yes ✓ No | Corresponding Author's Name Bartlomiej Perek |
| 5. Manuscript Title How the COVID-19 Pandemic Changed | Treatment of Severe Aorti | c Stenosis: A Single Cardiac Center Experience |
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| Do you have any patents, whether plan | ned, pending or issued, br | oadly relevant to the work? Yes V No |

Olasinska-Wisniewska 2



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Misterski 1



| Section 1. Identifying Info | rmation | |
|---|--|--|
| 1. Given Name (First Name) Marcin | 2. Surname (Last Name) Misterski | 3. Date 07-December-2020 |
| 4. Are you the corresponding author? | ☐ Yes ✓ No | Corresponding Author's Name Bartlomiej Perek |
| 5. Manuscript Title How the COVID-19 Pandemic Chang | ed Treatment of Severe Aorti | c Stenosis: A Single Cardiac Center Experience |
| 6. Manuscript Identifying Number (if you JTD-20-3025 | ı know it) | |
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| Section 2. The Work Under | Consideration for Public | cation |
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| Intellectual Prop | perty Patents & Copyric | hts |
| Do you have any patents, whether pl | anned, pending or issued, br | oadly relevant to the work? Yes V No |

Misterski 2



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| Dr. Misterski has nothing to disclose. |

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Puslecki 1



| Section 1. Identifying Inform | nation | |
|---|--|--|
| 1. Given Name (First Name) Mateusz | 2. Surname (Last Name) Puslecki | 3. Date 07-December-2020 |
| 4. Are you the corresponding author? | ☐ Yes ✓ No | Corresponding Author's Name Bartlomiej Perek |
| 5. Manuscript Title How the COVID-19 Pandemic Changed | Treatment of Severe Aorti | ic Stenosis: A Single Cardiac Center Experience |
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Puslecki 2



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Grygier 1



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| 4. Are you the corresponding author? | ☐ Yes ✓ No | Corresponding Author's Nar Bartlomiej Perek | me |
| 5. Manuscript Title How the COVID-19 Pandemic Changed | Treatment of Severe Aorti | c Stenosis: A Single Cardiac | Center Experience |
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Grygier 2



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Lesiak 1



| Section 1. Identifying Info | rmation | |
|---|---|---|
| 1. Given Name (First Name) Maciej | 2. Surname (Last Name) Lesiak | 3. Date 07-December-2020 |
| 4. Are you the corresponding author? | ☐ Yes ✓ No | Corresponding Author's Name Bartlomiej Perek |
| 5. Manuscript Title How the COVID-19 Pandemic Change | ed Treatment of Severe Aorti | ic Stenosis: A Single Cardiac Center Experience |
| 6. Manuscript Identifying Number (if you JTD-20-3025 | know it) | |
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| Section 2. The Work Under | Consideration for Public | cation |
| | ing but not limited to grants, da | a third party (government, commercial, private foundation, etc.) for ita monitoring board, study design, manuscript preparation, |
| Section 3. Relevant financia | al activities outside the s | submitted work. |
| of compensation) with entities as des | cribed in the instructions. Us report 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 the present during the 36 months prior to publication. |
| Section 4. Intellectual Prop | | |
| Intellectual Prop | erty Patents & Copyric | hts |
| Do you have any patents, whether pla | anned, pending or issued, br | oadly relevant to the work? Yes V No |

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| 1. Given Name (Fii Tomasz | rst Name) | 2. Surname (Last Name) Stankowski | | 3. Date 07-December-2020 |
| 4. Are you the cor | responding author? | Yes ✓ No | Corresponding Author's Nan Bartlomiej Perek | ne |
| 5. Manuscript Title How the COVID- | | Treatment of Severe Aorti | c Stenosis: A Single Cardiac | Center Experience |
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| Do you have any | | | oadly relevant to the work? | ☐ Yes 🗸 No |



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| Do you have any | | | oadly relevant to the work? | ☐ Yes 🗸 No |



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|--|---|--|
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| 4. Are you the corresponding author? | ☐ Yes ✓ No | Corresponding Author's Name Bartlomiej Perek |
| 5. Manuscript Title How the COVID-19 Pandemic Changed | Treatment of Severe Aortic | Stenosis: A Single Cardiac Center Experience |
| 6. Manuscript Identifying Number (if you kr JTD-20-3025 | now it) | |
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|---|---------------------------|--|--|---|
| 1. Given Name (Fire Kurt | st Name) | 2. Surname (Last Name) Ruetzler | | 3. Date 07-December-2020 |
| 4. Are you the corr | esponding author? | Yes ✓ No | Corresponding Author's Nan Bartlomiej Perek | ne |
| 5. Manuscript Title How the COVID-1 | | Treatment of Severe Aorti | c Stenosis: A Single Cardiac | Center Experience |
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| Given Name (First Name) Oguz | 2. Surname (Last Name) Turan | 3. Date 07-December-2020 |
| 4. Are you the corresponding author? | ☐ Yes ✓ No | Corresponding Author's Name Bartlomiej Perek |
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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".

3. 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

n-Financial Support: Examples include drugs/equipment

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| Section 1. Identifying Info | ormation | |
|---|---|--|
| 1. Given Name (First Name) Marek | 2. Surname (Last Name) Jemielity | 3. Date 07-December-2020 |
| 4. Are you the corresponding author? | Yes Vo | Corresponding Author's Name Bartlomiej Perek |
| 5. Manuscript Title How the COVID-19 Pandemic Chan | ged Treatment of Severe Aorti | c Stenosis: A Single Cardiac Center Experience |
| 6. Manuscript Identifying Number (if yo JTD-20-3025 | ou know it) | |
| | | - |
| Section 2. The Work Under | r Consideration for Public | cation |
| | ding 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 finance | cial activities outside the s | submitted work. |
| of compensation) with entities as de | escribed in the instructions. Us d report 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 se present during the 36 months prior to publication. |
| Section 4 | | |
| Section 4. Intellectual Pro | perty Patents & Copyric | hts |
| Do you have any patents, whether p | planned, pending or issued, br | oadly relevant to the work? Yes V No |

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| Section 5. | |
|-------------------|--|
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| | 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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| ✓ No other relat | tionships/conditions/circumstances that present a potential conflict of interest |
| | nuscript 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. Jemielity has | nothing to disclose. |

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Please visit http://www.icmje.org/cgi-bin/feedback to provide feedback on your experience with completing this form.

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