

ICMJE Form for Disclosure of Potential Conflicts of Interest

Instructions

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Section 1. Identifying Information

1. Given Name (First Name) Jingyang	2. Surname (Last Name) Luan	3. Date 25-October-2020
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Ting Zhu
5. Manuscript Title New Indicators For Systematic Assessment of Aortic Morphology: A Narrative Review		
6. Manuscript Identifying Number (if you know it) JTD-20-2728-R1		

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1. Given Name (First Name) Le	2. Surname (Last Name) Mao	3. Date 25-October-2020
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Ting Zhu
5. Manuscript Title New Indicators For Systematic Assessment of Aortic Morphology: A Narrative Review		
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1. Given Name (First Name)

Ziqing

2. Surname (Last Name)

Zhu

3. Date

25-October-2020

4. Are you the corresponding author?

Yes

No

Corresponding Author's Name

Ting Zhu

5. Manuscript Title

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