

ICMJE DISCLOSURE FORM

Date: 11/26/2021

Your Name: Sossio Perrotta

Manuscript Title: Short- and long-term outcome after surgical aortic valve replacement in patients on dialysis

Manuscript Number (if known): ID: JTD-21-1410-CL

In the interest of transparency, we ask you to disclose all relationships/activities/interests listed below that are related to the content of your manuscript. "Related" means any relation with for-profit or not-for-profit third parties whose interests may be affected by the content of the manuscript. Disclosure represents a commitment to transparency and does not necessarily indicate a bias. If you are in doubt about whether to list a relationship/activity/interest, it is preferable that you do so.

The author's relationships/activities/interests should be defined broadly. For example, if your manuscript pertains to the epidemiology of hypertension, you should declare all relationships with manufacturers of antihypertensive medication, even if that medication is not mentioned in the manuscript.

In item #1 below, report all support for the work reported in this manuscript without time limit. For all other items, the time frame for disclosure is the past 36 months.

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

ICMJE DISCLOSURE FORM

Date: 11/27/2021

Your Name: Susanne J Nielsen

Manuscript Title: Short- and long-term outcome after surgical aortic valve replacement in patients on dialysis

Manuscript Number (if known): ID: JTD-21-1410-CL

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ICMJE DISCLOSURE FORM

Date: 11/30/2021

Your Name: Emma C Hansson

Manuscript Title: Short- and long-term outcome after surgical aortic valve replacement in patients on dialysis

Manuscript Number (if known): ID: JTD-21-1410-CL

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Date: 11/26/2021

Your Name: Vincenzo Lepore

Manuscript Title: Short- and long-term outcome after surgical aortic valve replacement in patients on dialysis

Manuscript Number (if known): ID: JTD-21-1410-CL

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

ICMJE DISCLOSURE FORM

Date: 11/28/2021

Your Name: Andreas Martinsson

Manuscript Title: Short- and long-term outcome after surgical aortic valve replacement in patients on dialysis

Manuscript Number (if known): ID: JTD-21-1410-CL

In the interest of transparency, we ask you to disclose all relationships/activities/interests listed below that are related to the content of your manuscript. "Related" means any relation with for-profit or not-for-profit third parties whose interests may be affected by the content of the manuscript. Disclosure represents a commitment to transparency and does not necessarily indicate a bias. If you are in doubt about whether to list a relationship/activity/interest, it is preferable that you do so.

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ICMJE DISCLOSURE FORM

Date: 11/29/2021

Your Name: Anders Jeppsson

Manuscript Title: Short- and long-term outcome after surgical aortic valve replacement in patients on dialysis

Manuscript Number (if known): ID: JTD-21-1410-CL

In the interest of transparency, we ask you to disclose all relationships/activities/interests listed below that are related to the content of your manuscript. "Related" means any relation with for-profit or not-for-profit third parties whose interests may be affected by the content of the manuscript. Disclosure represents a commitment to transparency and does not necessarily indicate a bias. If you are in doubt about whether to list a relationship/activity/interest, it is preferable that you do so.

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2	Grants or contracts from any entity (if not indicated in item #1 above).	<input type="checkbox"/> None <table border="1" style="width: 100%; border-collapse: collapse;"> <tr><td style="width: 70%;">Swedish state research grant</td><td>Personal</td></tr> <tr><td>Swedish Heart Lung Foundation grant</td><td>Personal</td></tr> <tr><td>Västra Götaland Region research grant</td><td>Personal</td></tr> <tr><td>Winberg Foundation research grant</td><td>Personal</td></tr> </table>	Swedish state research grant	Personal	Swedish Heart Lung Foundation grant	Personal	Västra Götaland Region research grant	Personal	Winberg Foundation research grant	Personal	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr><td style="width: 70%;"> </td><td> </td></tr> <tr><td> </td><td> </td></tr> <tr><td> </td><td> </td></tr> </table>						
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4	Consulting fees	<input type="checkbox"/> None	
		LFB Biomedicaments	Personal fee
		Baxter	Personal fee
		Alexion	Personal fee
		Werfen	Personal fee
5	Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or educational events	<input type="checkbox"/> None	
		Boehringer-Ingelheim	Personal fee
6	Payment for expert testimony	<input checked="" type="checkbox"/> None	
7	Support for attending meetings and/or travel	<input checked="" type="checkbox"/> None	
8	Patents planned, issued or pending	<input checked="" type="checkbox"/> None	
9	Participation on a Data Safety Monitoring Board or Advisory Board	<input checked="" type="checkbox"/> None	
10	Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid	<input type="checkbox"/> None	
		European Association for Cardiothoracic Surgery	Clinical Guideline Committee

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ICMJE DISCLOSURE FORM

Date: 11/28/2021

Your Name: Martin Lindgren

Manuscript Title: Short- and long-term outcome after surgical aortic valve replacement in patients on dialysis

Manuscript Number (if known): ID: JTD-21-1410-CL

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