

ICMJE DISCLOSURE FORM

Date: Jan. 25th, 2023

Your Name: Jinlin Wu

Manuscript Title: Does the weekend effect exist for acute type A aortic dissection? A retrospective case-control study

Manuscript number (if known): JTD-22-1639-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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Date: Jan. 25th, 2023

Your Name: Guang Tong

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Date: Jan. 25th, 2023

Your Name: Julia Fayanne Chen

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Your Name: Jue Yang

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Your Name: Xin Li

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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	
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12	Receipt of equipment, materials, drugs, medical writing, gifts or other services	<input checked="" type="checkbox"/> None	
13	Other financial or non-financial interests	<input checked="" type="checkbox"/> None	

Please summarize the above conflict of interest in the following box:

None.

Please place an "X" next to the following statement to indicate your agreement:

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: Jan. 25th, 2023

Your Name: Zhichao Liang

Manuscript Title: Does the weekend effect exist for acute type A aortic dissection? A retrospective case-control study

Manuscript number (if known): JTD-22-1639-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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		Name all entities with whom you have this relationship or indicate none (add rows as needed)	Specifications/Comments (e.g., if payments were made to you or to your institution)
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ICMJE DISCLOSURE FORM

Date: Jan. 25th, 2023

Your Name: Jie Liu

Manuscript Title: Does the weekend effect exist for acute type A aortic dissection? A retrospective case-control study

Manuscript number (if known): JTD-22-1639-CL

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ICMJE DISCLOSURE FORM

Date: Jan. 25th, 2023

Your Name: Zhen Zhang

Manuscript Title: Does the weekend effect exist for acute type A aortic dissection? A retrospective case-control study

Manuscript number (if known): JTD-22-1639-CL

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ICMJE DISCLOSURE FORM

Date: Jan. 25th, 2023

Your Name: Ruixin Fan

Manuscript Title: Does the weekend effect exist for acute type A aortic dissection? A retrospective case-control study

Manuscript number (if known): JTD-22-1639-CL

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ICMJE DISCLOSURE FORM

Date: Jan. 25th, 2023

Your Name: Tucheng Sun

Manuscript Title: Does the weekend effect exist for acute type A aortic dissection? A retrospective case-control study

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