Date: April, 25 Your Name: Jun	
Manuscript Title:	Patient-specific stent for hemolytic anemia due to a kinked ascending aortic graft if known): JTD-23-688
In the interest of trar	sparency, 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 following questions apply to the author's relationships/activities/interests as they relate to the <u>current</u> <u>manuscript only</u>.

The author's relationships/activities/interests should be <u>defined broadly</u>. 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.

		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)
		Time frame: Since the initial	planning of the work
1	All support for the present manuscript (e.g., funding, provision of study materials, medical writing, article processing charges, etc.) No time limit for this item.	XNone	
		Time frame: past	36 months
2	Grants or contracts from any entity (if not indicated in item #1 above).	XNone	
3	Royalties or licenses	XNone	
4	Consulting fees	XNone	

5	Payment or honoraria for	XNone	
	lectures, presentations,		
	speakers bureaus,		
	manuscript writing or		
	educational events		
6	Payment for expert	XNone	
	testimony		
7	Support for attending meetings and/or travel	XNone	
8	Patents planned, issued or	XNone	
	pending		
9	Participation on a Data	XNone	
	Safety Monitoring Board or		
	Advisory Board		
10	Leadership or fiduciary role	XNone	
	in other board, society,		
	committee or advocacy		
	group, paid or unpaid		
11	Stock or stock options	XNone	
12	Receipt of equipment,	XNone	
	materials, drugs, medical		
	writing, gifts or other services		
13	Other financial or non-	XNone	
	financial interests		
Ple	ase summarize the above co	inflict of interest in the fol	lowing box:
-	The author has no conflict	of interest to declare	

Date:April, 25, 2023	
Your Name: Hyun Ah Lim	
Manuscript Title : Patient-specific st	ent for hemolytic anemia due to a kinked ascending aortic graft
Manuscript number (if known):	ITD-23-688

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 following questions apply to the author's relationships/activities/interests as they relate to the <u>current manuscript only</u>.

The author's relationships/activities/interests should be <u>defined broadly</u>. 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.

		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)
		Time frame: Since the initial	planning of the work
1	All support for the present manuscript (e.g., funding, provision of study materials, medical writing, article processing charges, etc.) No time limit for this item.	XNone	
		Time frame: past	36 months
2	Grants or contracts from any entity (if not indicated in item #1 above).	XNone	
3	Royalties or licenses	XNone	
4	Consulting fees	XNone	

5	Payment or honoraria for	XNone	
	lectures, presentations,		
	speakers bureaus,		
	manuscript writing or		
	educational events		
6	Payment for expert	XNone	
	testimony		
7	Support for attending	XNone	
	meetings and/or travel		
8	Patents planned, issued or	X None	
	pending		
	, ,		
9	Participation on a Data	X None	
	Safety Monitoring Board or		
	Advisory Board		
10	Leadership or fiduciary role	XNone	
	in other board, society,		
	committee or advocacy		
	group, paid or unpaid		
11	Stock or stock options	XNone	
12		XNone	
	materials, drugs, medical		
	writing, gifts or other		
	services		
13		XNone	
	financial interests		
ы		uflict of interest in the f	ollowing how
PI	ease summarize the above co	milict of interest in the i	ollowing box.
	The author has no conflict	-f:	
	The author has no conflict	of interest to declare	

Date:___ April, 25, 2023_____

_X__None

Consulting fees

You	r Name: Seok Beom	Hong	
	<u> </u>	•	tic anemia due to a kinked ascending aortic graft
Mai	nuscript number (if known):	JTD-23-688	
	• •	•	relationships/activities/interests listed below that are
part	ties whose interests may be	affected by the content of	ans any relation with for-profit or not-for-profit third If the manuscript. Disclosure represents a commitment If you are in doubt about whether to list a
	tionship/activity/interest, i	•	•
	following questions apply t nuscript only.	o the author's relationshi	ps/activities/interests as they relate to the <u>current</u>
to t		nsion, you should declare	defined broadly. For example, if your manuscript pertains all relationships with manufacturers of antihypertensive the manuscript.
	em #1 below, report all sup time frame for disclosure is	•	d in this manuscript without time limit. For all other items,
		Name all entities with	Specifications/Comments
		whom you have this	(e.g., if payments were made to you or to your
		relationship or indicate	institution)
		none (add rows as	
		needed)	
		Time frame: Since the initial	al planning of the work
1	All support for the present		
	1	XNone	
	manuscript (e.g., funding, provision of study materials,	XNone	
	manuscript (e.g., funding,	XNone	
	manuscript (e.g., funding, provision of study materials, medical writing, article processing charges, etc.)	XNone	
	manuscript (e.g., funding, provision of study materials, medical writing, article	XNone	
	manuscript (e.g., funding, provision of study materials, medical writing, article processing charges, etc.)	XNone	
	manuscript (e.g., funding, provision of study materials, medical writing, article processing charges, etc.)		
2	manuscript (e.g., funding, provision of study materials, medical writing, article processing charges, etc.)	XNone XNone Time frame: pas	
2	manuscript (e.g., funding, provision of study materials, medical writing, article processing charges, etc.) No time limit for this item.	Time frame: pas	
2	manuscript (e.g., funding, provision of study materials, medical writing, article processing charges, etc.) No time limit for this item. Grants or contracts from	Time frame: pas	

5	Payment or honoraria for	XNone	
	lectures, presentations,		
	speakers bureaus,		
	manuscript writing or		
	educational events		
6	Payment for expert	XNone	
	testimony		
7	Support for attending	XNone	
	meetings and/or travel		
8	Patents planned, issued or	X None	
	pending		
	, ,		
9	Participation on a Data	X None	
	Safety Monitoring Board or		
	Advisory Board		
10	Leadership or fiduciary role	XNone	
	in other board, society,		
	committee or advocacy		
	group, paid or unpaid		
11	Stock or stock options	XNone	
12		XNone	
	materials, drugs, medical		
	writing, gifts or other		
	services		
13		XNone	
	financial interests		
ы		uflict of interest in the f	ollowing how
PI	ease summarize the above co	milict of interest in the i	ollowing box.
	The author has no conflict	-f:	
	The author has no conflict	of interest to declare	

Dat	e: April, 25, 2023				
You	Your Name: Yong Han Kim				
	Manuscript Title: Patient-specific stent for hemolytic anemia due to a kinked ascending aortic graft				
	Manuscript number (if known): JTD-23-688				
In the Interest of the Interes	ne interest of transparency, ted to the content of your name ties whose interests may be ransparency and does not name tionship/activity/interest, it following questions apply the transcript only.	we ask you to disclose all nanuscript. "Related" mea affected by the content o ecessarily indicate a bias. t is preferable that you do o the author's relationship vities/interests should be g	relationships/activities/interests listed below that are ans any relation with for-profit or not-for-profit third f the manuscript. Disclosure represents a commitment If you are in doubt about whether to list a		
med In it	dication, even if that medica	ntion is not mentioned in t	·		
		Name all entities with	Specifications/Comments		
		whom you have this	(e.g., if payments were made to you or to your		
		relationship or indicate	institution)		
		none (add rows as			
		needed)			
1		needed) Time frame: Since the initia	al planning of the work		
1	All support for the present	needed)	al planning of the work		
1	manuscript (e.g., funding,	needed) Time frame: Since the initia	al planning of the work		
1	manuscript (e.g., funding, provision of study materials,	needed) Time frame: Since the initia	al planning of the work		
1	manuscript (e.g., funding, provision of study materials, medical writing, article	needed) Time frame: Since the initia	al planning of the work		
1	manuscript (e.g., funding, provision of study materials, medical writing, article processing charges, etc.)	needed) Time frame: Since the initia	al planning of the work		
1	manuscript (e.g., funding, provision of study materials, medical writing, article	needed) Time frame: Since the initia	al planning of the work		
1	manuscript (e.g., funding, provision of study materials, medical writing, article processing charges, etc.)	needed) Time frame: Since the initia	al planning of the work		
1	manuscript (e.g., funding, provision of study materials, medical writing, article processing charges, etc.)	needed) Time frame: Since the initia	al planning of the work		
1	manuscript (e.g., funding, provision of study materials, medical writing, article processing charges, etc.)	needed) Time frame: Since the initia			
2	manuscript (e.g., funding, provision of study materials, medical writing, article processing charges, etc.)	needed) Time frame: Since the initiaXNone			
	manuscript (e.g., funding, provision of study materials, medical writing, article processing charges, etc.) No time limit for this item.	needed) Time frame: Since the initiaXNone			
	manuscript (e.g., funding, provision of study materials, medical writing, article processing charges, etc.) No time limit for this item. Grants or contracts from	needed) Time frame: Since the initiaXNone			

Consulting fees

_X__None

5	Payment or honoraria for	XNone	
	lectures, presentations,		
	speakers bureaus,		
	manuscript writing or		
	educational events		
6	Payment for expert	XNone	
	testimony		
7	Support for attending	XNone	
	meetings and/or travel		
8	Patents planned, issued or	X None	
	pending		
	, ,		
9	Participation on a Data	X None	
	Safety Monitoring Board or		
	Advisory Board		
10	Leadership or fiduciary role	XNone	
	in other board, society,		
	committee or advocacy		
	group, paid or unpaid		
11	Stock or stock options	XNone	
12		XNone	
	materials, drugs, medical		
	writing, gifts or other		
	services		
13		XNone	
	financial interests		
ы		uflict of interest in the f	ollowing how
PI	ease summarize the above co	milict of interest in the i	ollowing box.
	The author has no conflict	-f:	
	The author has no conflict	of interest to declare	

Date: April,	25, 2023	
Your Name:	Hwan Wook Kim_	
Manuscript Title:_	Patient-specific	stent for hemolytic anemia due to a kinked ascending aortic graft
Manuscript numb	er (if known):	JTD-23-688

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 following questions apply to the author's relationships/activities/interests as they relate to the <u>current manuscript only</u>.

The author's relationships/activities/interests should be <u>defined broadly</u>. 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.

		Name all entities with whom you have this relationship or indicate none (add rows as needed) Time frame: Since the initial	Specifications/Comments (e.g., if payments were made to you or to your institution)
1	All support for the present manuscript (e.g., funding, provision of study materials, medical writing, article processing charges, etc.) No time limit for this item.	XNone	
2	Grants or contracts from any entity (if not indicated in item #1 above). Royalties or licenses	Time frame: pastXNone	36 months
4	Consulting fees	X_None	
	j		

5	Payment or honoraria for	XNone					
	lectures, presentations,						
	speakers bureaus,						
	manuscript writing or						
	educational events						
6	Payment for expert	XNone					
	testimony						
7	Support for attending meetings and/or travel	XNone					
8	Patents planned, issued or	XNone					
	pending						
9	Participation on a Data	XNone					
	Safety Monitoring Board or						
	Advisory Board						
10	Leadership or fiduciary role	XNone					
	in other board, society,						
	committee or advocacy						
	group, paid or unpaid						
11	Stock or stock options	XNone					
12	Receipt of equipment,	XNone					
	materials, drugs, medical						
	writing, gifts or other services						
13	Other financial or non-	XNone					
	financial interests						
	· · · · · · · · · · · · · · · · · · ·						
Ple	Please summarize the above conflict of interest in the following box:						
_							
	The author has no conflict of interest to declare						

Date:April, 25, 2023
Your Name: Do Yeon Kim
Manuscript Title: Patient-specific stent for hemolytic anemia due to a kinked ascending aortic graft
Manuscript number (if known): JTD-23-688

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 following questions apply to the author's relationships/activities/interests as they relate to the <u>current manuscript only</u>.

The author's relationships/activities/interests should be <u>defined broadly</u>. 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.

		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)			
	Time frame: Since the initial planning of the work					
1	All support for the present manuscript (e.g., funding, provision of study materials, medical writing, article processing charges, etc.) No time limit for this item.	XNone				
Time frame: past 36 months						
2	Grants or contracts from any entity (if not indicated in item #1 above).	XNone				
3	Royalties or licenses	XNone				
4	Consulting fees	X_None				

5	Payment or honoraria for	XNone					
	lectures, presentations,						
	speakers bureaus,						
	manuscript writing or						
	educational events						
6	Payment for expert	XNone					
	testimony						
7	Support for attending	XNone					
	meetings and/or travel						
8	Patents planned, issued or	X None					
	pending	XNone					
	p and a second						
9	Participation on a Data	X None					
	Safety Monitoring Board or						
	Advisory Board						
10	Leadership or fiduciary role	XNone					
	in other board, society,						
	committee or advocacy						
	group, paid or unpaid						
11	Stock or stock options	XNone					
12	Receipt of equipment,	XNone					
	materials, drugs, medical						
	writing, gifts or other						
	services						
13		XNone					
	financial interests						
DI.			all accidentally access				
PIE	Please summarize the above conflict of interest in the following box:						
	The author has no conflict of interest to declare						