Date:_____2023/08/14_____

Your Name: __Ying Liu_____

Manuscript Title: Discussion and literature review of uterine intravascular leiomyomatosis involving the heart: a case report

Manuscript number (if known):_____

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3	Royalties or licenses	X_None	
4	Consulting fees	XNone	

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	speakers bureaus, manuscript writing or educational events	
6	Payment for expert testimony	XNone
7	Support for attending meetings and/or travel	X_None
8	Patents planned, issued or pending	XNone
9		Y Nezz
9	Participation on a Data Safety Monitoring Board or Advisory Board	XNone
10	Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid	XNone
11	Stock or stock options	X_None
12	Receipt of equipment, materials, drugs, medical writing, gifts or other services	X_None
13	Other financial or non- financial interests	X_None
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 Date:_____2023/08/14_____

 Your Name:__Hongyan Wang______

Manuscript Title: ____ Discussion and literature review of uterine intravascular leiomyomatosis involving the heart: a case report

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13	Other financial or non- financial interests	X_None

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 Date:______2023/08/14_____

 Your Name:__Hanmei Pan______

Manuscript Title: ____ Discussion and literature review of uterine intravascular leiomyomatosis involving the heart: a case report

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lectures, presentations, speakers bureaus, manuscript writing or educational events			
lectures, presentations, speakers bureaus, manuscript writing or educational events			
educational events X_None 6 Payment for expert testimony X_None 7 Support for attending meetings and/or travel X_None 8 Patents planned, issued or pending X_None 9 Participation on a Data Safety Monitoring Board or Advisory Board X_None 10 Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid X_None 11 Stock or stock options X_None 12 Receipt of equipment, materials, drugs, medical writing, gifts or other services X_None 13 Other financial or non- X_None	5	lectures, presentations,	XNone
testimony		educational events	
meetings and/or travel	6		XNone
pending	7		X_None
Safety Monitoring Board or Advisory Board	8	-	XNone
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materials, drugs, medical	11	Stock or stock options	XNone
	12	materials, drugs, medical writing, gifts or other services	XNone
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 Date:
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 Your Name:
 Hualei Dai

 Manuscript Title:
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Manuscript number (if known):_____

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