ICMJE Form for Disclosure of Potential Conflicts of Interest

Instructions

The purpose of this form is to provide readers of your manuscript with information about your other interests that could influence how they receive and understand your work. The form is designed to be completed electronically and stored electronically. It contains programming that allows appropriate data display. Each author should submit a separate form and is responsible for the accuracy and completeness of the submitted information. The form is in six parts.

1. Identifying information.

2. The work under consideration for publication.

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**Royalties:** Funds are coming in to you or your institution due to your patent
ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)  
   Keith

2. Surname (Last Name)  
   Aaronson

3. Date  
   07-February-2019

4. Are you the corresponding author?  
   Yes ☑ No

   Corresponding Author’s Name  
   Mandeep Mehra

5. Manuscript Title  
   A Fully Magnetically Levitated Left Ventricular Assist Device - Final Report

6. Manuscript Identifying Number (if you know it)  
   19-00486

Section 2. The Work Under Consideration for Publication

Did you or your institution at any time receive payment or services from a third party (government, commercial, private foundation, etc.) for any aspect of the submitted work (including but not limited to grants, data monitoring board, study design, manuscript preparation, statistical analysis, etc.)?

Are there any relevant conflicts of interest?  
   Yes ☑ No

If yes, please fill out the appropriate information below. If you have more than one entity press the “ADD” button to add a row. Excess rows can be removed by pressing the “X” button.

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Are there any relevant conflicts of interest?  
   Yes ☑ No

If yes, please fill out the appropriate information below.

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<th>Name of Entity</th>
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Do you have any patents, whether planned, pending or issued, broadly relevant to the work?  
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Section 6. Disclosure Statement

Based on the above disclosures, this form will automatically generate a disclosure statement, which will appear in the box below.

Dr. Aaronson reports grants from Abbott, from null, during the conduct of the study; grants and personal fees from Medtronic, other from Procyrion, personal fees from NuPulseCV, outside the submitted work;.

Evaluation and Feedback

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)  
   Ashok

2. Surname (Last Name)  
   Babu

3. Date  
   11-February-2019

4. Are you the corresponding author?  
   Yes ✗ No

   Corresponding Author’s Name  
   Mandeep Mehra

5. Manuscript Title  
   A Fully Magnetically Levitated Left Ventricular Assist Device - Final Report

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Dr. Babu reports personal fees from Abbott, outside the submitted work; .

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Section 1. Identifying Information

1. Given Name (First Name)  Arvind
2. Surname (Last Name)  Bhimaraj
3. Date  08-February-2019
4. Are you the corresponding author?  [ ] Yes  [x] No  Corresponding Author’s Name  Mandeep Mehra

5. Manuscript Title  A Fully Magnetically Levitated Left Ventricular Assist Device - Final Report

6. Manuscript Identifying Number (if you know it)  19-00486

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Bhimaraj
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<td>3. Date</td>
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<td>4. Are you the corresponding author?</td>
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Dr. Bruckner has nothing to disclose.

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4. Are you the corresponding author? [ ] Yes [ √ ] No

<table>
<thead>
<tr>
<th>Corresponding Author's Name</th>
</tr>
</thead>
<tbody>
<tr>
<td>Mandeep Mehra</td>
</tr>
</tbody>
</table>

5. Manuscript Title
A Fully Magnetically Levitated Left Ventricular Assist Device-Final Report

6. Manuscript Identifying Number (if you know it)
19-00486

**Section 2. The Work Under Consideration for Publication**

Did you or your institution at any time receive payment or services from a third party (government, commercial, private foundation, etc.) for any aspect of the submitted work (including but not limited to grants, data monitoring board, study design, manuscript preparation, statistical analysis, etc.)?

Are there any relevant conflicts of interest? [ ] Yes [ √ ] No

**Section 3. Relevant financial activities outside the submitted work.**

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Are there any relevant conflicts of interest? [ ] Yes [ √ ] No

**Section 4. Intellectual Property -- Patents & Copyrights**

Do you have any patents, whether planned, pending or issued, broadly relevant to the work? [ ] Yes [ √ ] No
ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 5. Relationships not covered above

Are there other relationships or activities that readers could perceive to have influenced, or that give the appearance of potentially influencing, what you wrote in the submitted work?

☐ Yes, the following relationships/conditions/circumstances are present (explain below):

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Section 6. Disclosure Statement

Based on the above disclosures, this form will automatically generate a disclosure statement, which will appear in the box below.

Dr. Chomsky has nothing to disclose.

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)  Joyce
2. Surname (Last Name)  Chuang
3. Date  11-February-2019
4. Are you the corresponding author?  Yes  No

Corresponding Author’s Name  Mandeep Mehra

5. Manuscript Title  A Fully Magnetically Levitated Left Ventricular Assist Device-Final Report

6. Manuscript Identifying Number (if you know it)  19-00486

Section 2. The Work Under Consideration for Publication

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<td>✔</td>
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<td>Salaried employee at Abbott</td>
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Section 4. Intellectual Property -- Patents & Copyrights

Do you have any patents, whether planned, pending or issued, broadly relevant to the work?  Yes  No
ICMJE Form for Disclosure of Potential Conflicts of Interest

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Dr. Chuang reports personal fees from Abbott, outside the submitted work.

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Royalties: Funds are coming in to you or your institution due to your patent
# ICMJE Form for Disclosure of Potential Conflicts of Interest

## Section 1. Identifying Information

1. Given Name (First Name)  
   Joseph

2. Surname (Last Name)  
   Cleveland

3. Date  
   11-February-2019

4. Are you the corresponding author?  
   Yes [ ]  No [x]

   Corresponding Author’s Name  
   Mandeep Mehra

5. Manuscript Title  
   A Fully Magnetically Levitated Left Ventricular Assist Device-Final Report

6. Manuscript Identifying Number (if you know it)  
   19-00486

## Section 2. The Work Under Consideration for Publication

Did you or your institution at any time receive payment or services from a third party (government, commercial, private foundation, etc.) for any aspect of the submitted work (including but not limited to grants, data monitoring board, study design, manuscript preparation, statistical analysis, etc.)?

Are there any relevant conflicts of interest?  
Yes [x]  No [ ]

If yes, please fill out the appropriate information below. If you have more than one entity press the “ADD” button to add a row. Excess rows can be removed by pressing the "X" button.

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<td>Abbott</td>
<td>[x]</td>
<td>[ ]</td>
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<td>[ ]</td>
<td>Institutional research grant as PI for MOMENTUM 3</td>
</tr>
</tbody>
</table>

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Are there any relevant conflicts of interest?  
Yes [ ]  No [x]

## Section 4. Intellectual Property -- Patents & Copyrights

Do you have any patents, whether planned, pending or issued, broadly relevant to the work?  
Yes [ ]  No [x]
Section 5. Relationships not covered above

Are there other relationships or activities that readers could perceive to have influenced, or that give the appearance of potentially influencing, what you wrote in the submitted work?

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☑ No other relationships/conditions/circumstances that present a potential conflict of interest

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Dr. Cleveland reports grants from Abbott, during the conduct of the study.

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**Royalties**: Funds are coming in to you or your institution due to your patent
ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)
   Rebecca

2. Surname (Last Name)
   Cogswell

3. Date
   08-February-2019

4. Are you the corresponding author? 
   [ ] Yes  ✔ No

   Corresponding Author’s Name
   Mandeep Mehra

5. Manuscript Title
   A Fully Magnetically Levitated Left Ventricular Assist Device-Final Report

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<td>Consulting, speakers bureau</td>
</tr>
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<td>Medtronic</td>
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<td>✔</td>
<td>Consulting, heart failure advisory board</td>
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Spouse is employed by Medtronic

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Dr. Cogswell reports personal fees from Abbott, personal fees and other from Medtronic, outside the submitted work; and Spouse is employed by Medtronic.

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Section 1. Identifying Information

1. Given Name (First Name)  
   William

2. Surname (Last Name)  
   Cotts

3. Date  
   08-February-2019

4. Are you the corresponding author?  
   Yes ☐  No ☑

   Corresponding Author’s Name  
   Mandeep Mehra

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Dr. Cotts has nothing to disclose.

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   David

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   Dean

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   11-February-2019

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Dr. Dean reports other from Abbott, outside the submitted work.

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This section asks about patents and copyrights, whether pending, issued, licensed and/or receiving royalties.

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Royalties: Funds are coming in to you or your institution due to your patent
ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name) Gregory
2. Surname (Last Name) Ewald
3. Date 11-February-2019
4. Are you the corresponding author? ☐ Yes ☑ No
   Corresponding Author’s Name
   Mandeep Mehra
5. Manuscript Title
   A Fully Magnetically Levitated Left Ventricular Assist Device-Final Report
6. Manuscript Identifying Number (if you know it)
   19-00486

Section 2. The Work Under Consideration for Publication

Did you or your institution at any time receive payment or services from a third party (government, commercial, private foundation, etc.) for any aspect of the submitted work (including but not limited to grants, data monitoring board, study design, manuscript preparation, statistical analysis, etc.)?

Are there any relevant conflicts of interest? ☐ Yes ☑ No

Section 3. Relevant financial activities outside the submitted work.

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Are there any relevant conflicts of interest? ☑ Yes ☐ No
If yes, please fill out the appropriate information below.

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</tbody>
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Section 4. Intellectual Property -- Patents & Copyrights

Do you have any patents, whether planned, pending or issued, broadly relevant to the work? ☐ Yes ☑ No
ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 5. Relationships not covered above
Are there other relationships or activities that readers could perceive to have influenced, or that give the appearance of potentially influencing, what you wrote in the submitted work?

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Dr. Ewald reports personal fees from Abbott, outside the submitted work.

Evaluation and Feedback
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- **Royalties:** Funds are coming in to you or your institution due to your patent

Goldstein
ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name) Daniel
2. Surname (Last Name) Goldstein
3. Date 12-February-2019
4. Are you the corresponding author? ☑ Yes  ☐ No
   Corresponding Author’s Name: Mandeep Mehra
5. Manuscript Title
   A Fully Magnetically Levitated Left Ventricular Assist Device-Final Report
6. Manuscript Identifying Number (if you know it)
   19-00486

Section 2. The Work Under Consideration for Publication

Did you or your institution at any time receive payment or services from a third party (government, commercial, private foundation, etc.) for any aspect of the submitted work (including but not limited to grants, data monitoring board, study design, manuscript preparation, statistical analysis, etc.)?

Are there any relevant conflicts of interest? ☑ Yes  ☐ No

If yes, please fill out the appropriate information below. If you have more than one entity press the “ADD” button to add a row. Excess rows can be removed by pressing the “X” button.

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<td>☑</td>
<td>☐</td>
<td>Travel expenses related to my role as Principal Investigator of the MOMENTUM 3 Trial</td>
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Section 3. Relevant financial activities outside the submitted work.

Place a check in the appropriate boxes in the table to indicate whether you have financial relationships (regardless of amount of compensation) with entities as described in the instructions. Use one line for each entity; add as many lines as you need by clicking the “Add +” box. You should report relationships that were present during the 36 months prior to publication.

Are there any relevant conflicts of interest? ☑ Yes  ☐ No

If yes, please fill out the appropriate information below.

<table>
<thead>
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<th>Name of Entity</th>
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</tbody>
</table>
ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 4. Intellectual Property -- Patents & Copyrights

Do you have any patents, whether planned, pending or issued, broadly relevant to the work? □ Yes ☑ No

Section 5. Relationships not covered above

Are there other relationships or activities that readers could perceive to have influenced, or that give the appearance of potentially influencing, what you wrote in the submitted work?

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Section 6. Disclosure Statement

Based on the above disclosures, this form will automatically generate a disclosure statement, which will appear in the box below.

Dr. Goldstein reports non-financial support from Abbott Inc. during the conduct of the study; personal fees from Abbott Inc, personal fees from TERUMO INC, outside the submitted work; .

Evaluation and Feedback

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)  Steven
2. Surname (Last Name)  Hutchins
3. Date  11-February-2019
4. Are you the corresponding author?  Yes  No  ✔
   Corresponding Author’s Name  Mandeep Mehra
5. Manuscript Title  A Fully Magnetically Levitated Left Ventricular Assist Device-Final Report
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ICMJE Form for Disclosure of Potential Conflicts of Interest

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Dr. Hutchins has nothing to disclose.

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Itoh
ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)  Akinobu
2. Surname (Last Name)  Itoh
3. Date  11-February-2019
4. Are you the corresponding author?  Yes  No
   Corresponding Author’s Name  Mandeep Mehra
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Do you have any patents, whether planned, pending or issued, broadly relevant to the work?  Yes  No
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**Royalties**: Funds are coming in to you or your institution due to your patent
ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)  
   Valluvan

2. Surname (Last Name)  
   Jeevanandam

3. Date  
   08-February-2019

4. Are you the corresponding author?  
   Yes [✔] No

   Corresponding Author’s Name  
   Mandeep Mehra

5. Manuscript Title  
   A Fully Magnetically Levitated Left Ventricular Assist Device-Final Report

6. Manuscript Identifying Number (if you know it)  
   19-00486

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Are there any relevant conflicts of interest?  
   Yes [✔] No

If yes, please fill out the appropriate information below. If you have more than one entity press the “ADD” button to add a row. Excess rows can be removed by pressing the “X” button.

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   Yes [ ] No [✔]

Section 4. Intellectual Property -- Patents & Copyrights

Do you have any patents, whether planned, pending or issued, broadly relevant to the work?  
   Yes [ ] No [✔]
ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 5. Relationships not covered above

Are there other relationships or activities that readers could perceive to have influenced, or that give the appearance of potentially influencing, what you wrote in the submitted work?

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Dr. Jeevanandam reports personal fees from Thoratec Abbott, during the conduct of the study.

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name) Ranjit
2. Surname (Last Name) John
3. Date 08-February-2019
4. Are you the corresponding author? No
   ✔
Corresponding Author’s Name
Mandeep Mehra
5. Manuscript Title
A Fully Magnetically Levitated Left Ventricular Assist Device-Final Report
6. Manuscript Identifying Number (if you know it)
19-00486

Section 2. The Work Under Consideration for Publication

Did you or your institution at any time receive payment or services from a third party (government, commercial, private foundation, etc.) for any aspect of the submitted work (including but not limited to grants, data monitoring board, study design, manuscript preparation, statistical analysis, etc.)?

Are there any relevant conflicts of interest? ✔ Yes  ❌ No

If yes, please fill out the appropriate information below. If you have more than one entity press the “ADD” button to add a row. Excess rows can be removed by pressing the “X” button.

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Dr. John reports grants and personal fees from Abbott, during the conduct of the study; grants and personal fees from Medtronic, outside the submitted work;

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)  Jason
2. Surname (Last Name)  Katz
3. Date  11-February-2019
4. Are you the corresponding author?  Yes  ✔  No
5. Manuscript Title
   A Fully Magnetically Levitated Left Ventricular Assist Device-Final Report
6. Manuscript Identifying Number (if you know it)
   19-00486

Corresponding Author’s Name
Mandeep Mehra

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Dr. Katz has nothing to disclose.

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Section 1. Identifying Information

1. Given Name (First Name)  
   Arun

2. Surname (Last Name)  
   Krishnamoorthy

3. Date  
   08-February-2019

4. Are you the corresponding author?  
   ✔ No  
   Corresponding Author’s Name  
   Mandeep Mehra

5. Manuscript Title  
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6. Manuscript Identifying Number (if you know it)  
   19-00486

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### Section 1. Identifying Information

1. **Given Name (First Name)**
   - Brian

2. **Surname (Last Name)**
   - Lowes

3. **Date**
   - 08-February-2019

4. **Are you the corresponding author?**
   - Yes

5. **Manuscript Title**
   - A Fully Magnetically Levitated Left Ventricular Assist Device—Final Report

6. **Manuscript Identifying Number (if you know it)**
   - 19-00486

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Section 1. Identifying Information

1. Given Name (First Name) Abeel
2. Surname (Last Name) Mangi
3. Date 07-February-2019

4. Are you the corresponding author? Yes No

Corresponding Author’s Name
Mandeep Mehra

5. Manuscript Title
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Section 4. Intellectual Property -- Patents & Copyrights

Do you have any patents, whether planned, pending or issued, broadly relevant to the work? Yes No
ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 5. Relationships not covered above

Are there other relationships or activities that readers could perceive to have influenced, or that give the appearance of potentially influencing, what you wrote in the submitted work?

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Section 6. Disclosure Statement

Based on the above disclosures, this form will automatically generate a disclosure statement, which will appear in the box below.

Dr. Mangi reports personal fees for consulting and speaking, from Thoratec Corporation, outside the submitted work.

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Royalties: Funds are coming in to you or your institution due to your patent
ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name) Mandeep
2. Surname (Last Name) Mehra
3. Date 11-February-2019
4. Are you the corresponding author? ✔ Yes  ❎ No
5. Manuscript Title
A Fully Magnetically Levitated Left Ventricular Assist Device-Final Report
6. Manuscript Identifying Number (if you know it)
19-00486.R1

Section 2. The Work Under Consideration for Publication

Did you or your institution at any time receive payment or services from a third party (government, commercial, private foundation, etc.) for any aspect of the submitted work (including but not limited to grants, data monitoring board, study design, manuscript preparation, statistical analysis, etc.)?
Are there any relevant conflicts of interest? ❏ Yes  ✔ No

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**Section 4. Intellectual Property -- Patents & Copyrights**

Do you have any patents, whether planned, pending or issued, broadly relevant to the work?  
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Dr. Mehra reports personal fees from Abbott, personal fees from Medtronic, personal fees from Janssen, personal fees from Mesoblast, personal fees from Portola, personal fees from Bayer, personal fees from Xogenex, personal fees from NupulseCV, personal fees from FineHeart, outside the submitted work; .
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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)  Carmelo
2. Surname (Last Name)  Milano
3. Date  14-February-2019
4. Are you the corresponding author?  Yes ✔ No
5. Manuscript Title  
A Fully Magnetically Levitated Left Ventricular Assist Device-Final Report
6. Manuscript Identifying Number (if you know it)  19-00486

Section 2. The Work Under Consideration for Publication

Did you or your institution at any time receive payment or services from a third party (government, commercial, private foundation, etc.) for any aspect of the submitted work (including but not limited to grants, data monitoring board, study design, manuscript preparation, statistical analysis, etc.)? Are there any relevant conflicts of interest?  Yes ✔ No

Section 3. Relevant financial activities outside the submitted work.

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Are there any relevant conflicts of interest?  Yes ✔ No
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Section 4. Intellectual Property -- Patents & Copyrights

Do you have any patents, whether planned, pending or issued, broadly relevant to the work?  Yes ✔ No
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Dr. Milano reports personal fees from Abbott, personal fees from Medtronic, outside the submitted work.

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Section 1. Identifying Information

1. Given Name (First Name)  
   Ezequiel

2. Surname (Last Name)  
   Molina

3. Date  
   08-February-2019

4. Are you the corresponding author?  
   □ Yes  ✔ No

   ✔ Corresponding Author’s Name  
   Mandeep Mehra

5. Manuscript Title  
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6. Manuscript Identifying Number (if you know it)  
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Dr. Molina has nothing to disclose.

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)  
   Yoshifumi

2. Surname (Last Name)  
   Naka

3. Date  
   11-February-2019

4. Are you the corresponding author?  
   Yes

5. Manuscript Title  
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Dr. Naka reports personal fees from Abbott, outside the submitted work.

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**Section 1. Identifying Information**

1. Given Name (First Name)  
   Francis

2. Surname (Last Name)  
   Pagani

3. Date  
   11-February-2019

4. Are you the corresponding author?  
   ☐ Yes  ☑ No  
   Corresponding Author’s Name  
   Mandeep Mehra

5. Manuscript Title  
   A Fully Magnetically Levitated Left Ventricular Assist Device-Final Report

6. Manuscript Identifying Number (if you know it)  
   19-00486

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Are there any relevant conflicts of interest?  
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Do you have any patents, whether planned, pending or issued, broadly relevant to the work?  
   ☐ Yes  ☑ No
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Section 6. Disclosure Statement

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Dr. Pagani has nothing to disclose.

Evaluation and Feedback

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ICMJE Form for Disclosure of Potential Conflicts of Interest

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1. Given Name (First Name)  
Chetan  
2. Surname (Last Name)  
Patel  
3. Date  
11-February-2019  
4. Are you the corresponding author?  
Yes ✔ No  
5. Manuscript Title  
A Fully Magnetically Levitated Left Ventricular Assist Device-Final Report  
6. Manuscript Identifying Number (if you know it)  
19-00486

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Are there any relevant conflicts of interest?  
Yes ✔ No

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If yes, please fill out the appropriate information below.

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Do you have any patents, whether planned, pending or issued, broadly relevant to the work?  
Yes ✔ No

Patel
ICMJE Form for Disclosure of Potential Conflicts of Interest

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Dr. Patel reports personal fees from Abbott Labs, outside the submitted work;

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Ransom 1
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<table>
<thead>
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<th>2. Surname (Last Name)</th>
<th>3. Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>John</td>
<td>Ransom</td>
<td>08-February-2019</td>
</tr>
</tbody>
</table>

4. Are you the corresponding author?  
   Yes [ ] No [X]  
   Corresponding Author's Name: Mandeep Mehra

5. Manuscript Title  
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6. Manuscript Identifying Number (if you know it)  
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## Section 2. The Work Under Consideration for Publication

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Yes [ ] No [X]

Are there any relevant conflicts of interest?  
Yes [ ] No [X]

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ICMJE Form for Disclosure of Potential Conflicts of Interest

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Dr. Ransom has nothing to disclose.

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name) Nirav
2. Surname (Last Name) Raval
3. Date 11-February-2019
4. Are you the corresponding author? ☑ No
Corresponding Author’s Name Mandeep Mehra
5. Manuscript Title A Fully Magnetically Levitated Left Ventricular Assist Device-Final Report
6. Manuscript Identifying Number (if you know it) 19-00486

Section 2. The Work Under Consideration for Publication

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Dr. Raval has nothing to disclose.

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Section 1. Identifying Information

1. Given Name (First Name)                      2. Surname (Last Name)                      3. Date
Christopher                              Salerno                              09-February-2019

4. Are you the corresponding author?  [ ] Yes  [x] No

Corresponding Author’s Name
Mandeep Mehra

5. Manuscript Title
A Fully Magnetically Levitated Left Ventricular Assist Device-Final Report

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Do you have any patents, whether planned, pending or issued, broadly relevant to the work?  [ ] Yes  [x] No
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Dr. Salerno reports personal fees from Abbott, personal fees from Medtronic, outside the submitted work.

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This section asks about patents and copyrights, whether pending, issued, licensed and/or receiving royalties.

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**Other**: Anything not covered under the previous three boxes

**Pending**: The patent has been filed but not issued

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**Licensed**: The patent has been licensed to an entity, whether earning royalties or not

**Royalties**: Funds are coming in to you or your institution due to your patent

Sayer
ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)  
Gabriel

2. Surname (Last Name)  
Sayer

3. Date  
11-February-2019

4. Are you the corresponding author?  
[ ] Yes  [x] No

5. Manuscript Title  
A Fully Magnetically Levitated Left Ventricular Assist Device-Final Report

6. Manuscript Identifying Number (if you know it)  
19-00486

Section 2. The Work Under Consideration for Publication

Did you or your institution at any time receive payment or services from a third party (government, commercial, private foundation, etc.) for any aspect of the submitted work (including but not limited to grants, data monitoring board, study design, manuscript preparation, statistical analysis, etc.)?

Are there any relevant conflicts of interest?  
[ ] Yes  [x] No

Section 3. Relevant financial activities outside the submitted work.

Place a check in the appropriate boxes in the table to indicate whether you have financial relationships (regardless of amount of compensation) with entities as described in the instructions. Use one line for each entity; add as many lines as you need by clicking the "Add +" box. You should report relationships that were present during the 36 months prior to publication.

Are there any relevant conflicts of interest?  
[ ] Yes  [x] No

If yes, please fill out the appropriate information below.

<table>
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<th>Name of Entity</th>
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<th>Comments</th>
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<td>Consulting</td>
</tr>
</tbody>
</table>

Section 4. Intellectual Property -- Patents & Copyrights

Do you have any patents, whether planned, pending or issued, broadly relevant to the work?  
[ ] Yes  [x] No
ICMJE Form for Disclosure of Potential Conflicts of Interest

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Section 6. Disclosure Statement

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Dr. Sayer reports personal fees from Medtronic, outside the submitted work.

Evaluation and Feedback

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name) Farooq
2. Surname (Last Name) Sheikh
3. Date 11-February-2019

4. Are you the corresponding author? □ Yes  ✔ No
   Corresponding Author’s Name Mandeep Mehra

5. Manuscript Title
   A Fully Magnetically Levitated Left Ventricular Assist Device-Final Report

6. Manuscript Identifying Number (if you know it)
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Did you or your institution at any time receive payment or services from a third party (government, commercial, private foundation, etc.) for any aspect of the submitted work (including but not limited to grants, data monitoring board, study design, manuscript preparation, statistical analysis, etc.)?

Are there any relevant conflicts of interest? □ Yes  ✔ No

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Are there any relevant conflicts of interest? □ Yes  ✔ No

Section 4. Intellectual Property -- Patents & Copyrights

Do you have any patents, whether planned, pending or issued, broadly relevant to the work? □ Yes  ✔ No
ICMJE Form for Disclosure of Potential Conflicts of Interest

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Section 6. Disclosure Statement

Based on the above disclosures, this form will automatically generate a disclosure statement, which will appear in the box below.

Dr. Sheikh has nothing to disclose.

Evaluation and Feedback

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**Royalties:** Funds are coming in to you or your institution due to your patent
ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information
1. Given Name (First Name)  Scott
2. Surname (Last Name)  Silvestry
3. Date  11-February-2019
4. Are you the corresponding author?  Yes ☐  No ☑

Corresponding Author’s Name  Mandeep Mehra

5. Manuscript Title  A Fully Magnetically Levitated Left Ventricular Assist Device-Final Report

6. Manuscript Identifying Number (if you know it)  19-00486

Section 2. The Work Under Consideration for Publication
Did you or your institution at any time receive payment or services from a third party (government, commercial, private foundation, etc.) for any aspect of the submitted work (including but not limited to grants, data monitoring board, study design, manuscript preparation, statistical analysis, etc.)?  
Are there any relevant conflicts of interest?  Yes ☐  No ☑

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Section 4. Intellectual Property -- Patents & Copyrights
Do you have any patents, whether planned, pending or issued, broadly relevant to the work?  Yes ☐  No ☑
ICMJE Form for Disclosure of Potential Conflicts of Interest

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Dr. Silvestry reports personal fees from Abbott, personal fees from Medtronic, outside the submitted work.

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ICMJE Form for Disclosure of Potential Conflicts of Interest

**Section 1. Identifying Information**

1. Given Name (First Name)  
   Poornima

2. Surname (Last Name)  
   Sood

3. Date  
   12-February-2019

4. Are you the corresponding author?  
   ✔ No  

Corresponding Author’s Name  
Dr. Mandeep Mehra

5. Manuscript Title  
   A Fully Magnetically Levitated Left Ventricular Assist Device-Final Report

6. Manuscript Identifying Number (if you know it)  
   19-00486

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Are there any relevant conflicts of interest?  

✔ No

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Are there any relevant conflicts of interest?  

✔ Yes  

No

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</tr>
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✔ No
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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name) Antone
2. Surname (Last Name) Tatooles
3. Date 11-February-2019
4. Are you the corresponding author? Yes No ✔
   Corresponding Author’s Name Mandeep Mehra
5. Manuscript Title
   A Fully Magnetically Levitated Left Ventricular Assist Device-Final Report
6. Manuscript Identifying Number (if you know it)
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Are there any relevant conflicts of interest? Yes No ✔

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<tbody>
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<td></td>
<td></td>
<td>Yes</td>
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<td>Travel Support for Abbott's surgical summit</td>
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## Section 1. Identifying Information

1. **Given Name (First Name)**  
   Paul

2. **Surname (Last Name)**  
   Tessmann

3. **Date**  
   10-February-2019

4. **Are you the corresponding author?**  
   - Yes   ✔  
   - No

   **Corresponding Author’s Name**  
   Mandeep R. Mehra

5. **Manuscript Title**  
   A Fully Magnetically Levitated Left Ventricular Assist Device-Final Report

6. **Manuscript Identifying Number (if you know it)**  
   19-00486

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Are there any relevant conflicts of interest?  
- Yes   ✔  
- No

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- Yes   ✔  
- No

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Do you have any patents, whether planned, pending or issued, broadly relevant to the work?  
- Yes   ✔  
- No
ICMJE Form for Disclosure of Potential Conflicts of Interest

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Dr. Tessmann has nothing to disclose.

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Section 1. Identifying Information

1. Given Name (First Name)  
   Ia

2. Surname (Last Name)  
   Topuria

3. Date  
   08-February-2019

4. Are you the corresponding author?  
   Yes ☐ No ☑

   Corresponding Author’s Name  
   Mandeep Mehra

5. Manuscript Title  
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Are there any relevant conflicts of interest?  
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If yes, please fill out the appropriate information below.

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## Section 1. Identifying Information

1. Given Name (First Name)  
   John

2. Surname (Last Name)  
   Um

3. Date  
   11-February-2019

4. Are you the corresponding author?  
   No

Corresponding Author’s Name  
Mandeep R Mehra

5. Manuscript Title  
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Are there any relevant conflicts of interest?  
Yes

If yes, please fill out the appropriate information below. If you have more than one entity press the “ADD” button to add a row. Excess rows can be removed by pressing the “X” button.

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<thead>
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<td>Cost of study borne by sponsor</td>
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1. Given Name (First Name)  
Nir

2. Surname (Last Name)  
Uriel

3. Date  
11-February-2019

4. Are you the corresponding author?  
☐ Yes  ✔ No

Corresponding Author’s Name  
Mandeep Mehra

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   Mary Norine

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   Walsh

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Based on the above disclosures, this form will automatically generate a disclosure statement, which will appear in the box below.

Dr. Walsh has nothing to disclose.

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Instructions

The purpose of this form is to provide readers of your manuscript with information about your other interests that could influence how they receive and understand your work. The form is designed to be completed electronically and stored electronically. It contains programming that allows appropriate data display. Each author should submit a separate form and is responsible for the accuracy and completeness of the submitted information. The form is in six parts.

1. Identifying information.

2. The work under consideration for publication.

   This section asks for information about the work that you have submitted for publication. The time frame for this reporting is that of the work itself, from the initial conception and planning to the present. The requested information is about resources that you received, either directly or indirectly (via your institution), to enable you to complete the work. Checking “No” means that you did the work without receiving any financial support from any third party -- that is, the work was supported by funds from the same institution that pays your salary and that institution did not receive third-party funds with which to pay you. If you or your institution received funds from a third party to support the work, such as a government granting agency, charitable foundation or commercial sponsor, check “Yes”.

3. Relevant financial activities outside the submitted work.

   This section asks about your financial relationships with entities in the bio-medical arena that could be perceived to influence, or that give the appearance of potentially influencing, what you wrote in the submitted work. You should disclose interactions with ANY entity that could be considered broadly relevant to the work. For example, if your article is about testing an epidermal growth factor receptor (EGFR) antagonist in lung cancer, you should report all associations with entities pursuing diagnostic or therapeutic strategies in cancer in general, not just in the area of EGFR or lung cancer.

   Report all sources of revenue paid (or promised to be paid) directly to you or your institution on your behalf over the 36 months prior to submission of the work. This should include all monies from sources with relevance to the submitted work, not just monies from the entity that sponsored the research. Please note that your interactions with the work's sponsor that are outside the submitted work should also be listed here. If there is any question, it is usually better to disclose a relationship than not to do so.

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   This section asks about patents and copyrights, whether pending, issued, licensed and/or receiving royalties.

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Definitions.

Entity: government agency, foundation, commercial sponsor, academic institution, etc.
Grant: A grant from an entity, generally [but not always] paid to your organization
Personal Fees: Monies paid to you for services rendered, generally honoraria, royalties, or fees for consulting, lectures, speakers bureaus, expert testimony, employment, or other affiliations
Non-Financial Support: Examples include drugs/equipment supplied by the entity, travel paid by the entity, writing assistance, administrative support, etc.
Other: Anything not covered under the previous three boxes
Pending: The patent has been filed but not issued
Issued: The patent has been issued by the agency
Licensed: The patent has been licensed to an entity, whether earning royalties or not
Royalties: Funds are coming in to you or your institution due to your patent
ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name) Melana
2. Surname (Last Name) Yuzefpolskaya
3. Date 11-February-2019

4. Are you the corresponding author? [ ] Yes [x] No
   Corresponding Author’s Name
   Mandeep Mehra

5. Manuscript Title
   A Fully Magnetically Levitated Left Ventricular Assist Device-Final Report

6. Manuscript Identifying Number (if you know it)
   19-00486

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Did you or your institution at any time receive payment or services from a third party (government, commercial, private foundation, etc.) for any aspect of the submitted work (including but not limited to grants, data monitoring board, study design, manuscript preparation, statistical analysis, etc.)?

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