ICMJE Form for Disclosure of Potential Conflicts of Interest

Instructions

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<tbody>
<tr>
<td>Frank</td>
<td>Heinzel</td>
<td>28-July-2020</td>
</tr>
</tbody>
</table>

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

5. Manuscript Title
   Left Ventricular Dysfunction in Heart Failure with Preserved Ejection Fraction - Molecular Mechanisms and Impact on Right Ventricular Function

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

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**Section 1. Identifying Information**

1. Given Name (First Name)  
   Niklas

2. Surname (Last Name)  
   Hegemann

3. Date  
   03-August-2020

4. Are you the corresponding author?  
   ☑ No

   Corresponding Author’s Name  
   Frank R. Heinzel

5. Manuscript Title  
   Left Ventricular Dysfunction in Heart Failure with Preserved Ejection Fraction - Molecular Mechanisms and Impact on Right Ventricular Function

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Mr. Hegemann has nothing to disclose.

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Section 1. Identifying Information

1. Given Name (First Name)  
   Felix  

2. Surname (Last Name)  
   Hohendanner  

3. Date  
   30-July-2020  

4. Are you the corresponding author?  
   □ Yes  ✔ No  
   Corresponding Author’s Name  
   Frank R. Heinzel  

5. Manuscript Title  
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   Uwe

2. Surname (Last Name)  
   Primessnig

3. Date  
   28-July-2020

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   ☑ No

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   Frank R. Heinzel

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<tr>
<td>Jana</td>
<td>Grune</td>
<td>29-July-2020</td>
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Corresponding Author’s Name
Frank R. Heinzel

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Dr. Grune 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)  Florian
2. Surname (Last Name)  Blaschke
3. Date  19-August-2020

4. Are you the corresponding author?  Yes  No
   Corresponding Author’s Name  Frank R. Heinzel

5. Manuscript Title
   Left Ventricular Dysfunction in Heart Failure with Preserved Ejection Fraction - Molecular Mechanisms and Impact on Right Ventricular Function

6. Manuscript Identifying Number (if you know it)
   CDT-2020-RVD-15(CDT-20-477)_R1

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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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Dr. Blaschke 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) Rudolf
2. Surname (Last Name) de Boer
3. Date 28-July-2020
4. Are you the corresponding author? Yes ✔
   No
   Corresponding Author’s Name Frank R. Heinzel

5. Manuscript Title
   Left Ventricular Dysfunction in Heart Failure with Preserved Ejection Fraction - Molecular Mechanisms and Impact on Right Ventricular Function
6. Manuscript Identifying Number (if you know it)
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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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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**

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Dr. de Boer reports grants from Abbott, grants from AstraZeneca, grants from Bristol-Myers Squibb, grants from Novartis, grants from NovoNordisk, grants from Roche, personal fees from Abbott, personal fees from AstraZeneca, personal fees from NovoNordisk, personal fees from Roche, outside the submitted work; .
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1. Given Name (First Name) Burkert
2. Surname (Last Name) Pieske
3. Date 16-August-2020
4. Are you the corresponding author? ☐ Yes ☑ No
   Corresponding Author’s Name
   Frank R. Heinzel
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Section 1. Identifying Information

1. Given Name (First Name)  
   Gabriele  
2. Surname (Last Name)  
   Schiattarella  
3. Date  
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4. Are you the corresponding author?  
   Yes  ☐  No  ☑  
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1. Given Name (First Name)  Wolfgang
2. Surname (Last Name)  Kuebler
3. Date  28-July-2020
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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
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Do you have any patents, whether planned, pending or issued, broadly relevant to the work?  
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**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.

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