ICMJE Form for Disclosure of Potential Conflicts of Interest

Instructions

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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”.

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)  
Pouya

2. Surname (Last Name)  
Youssefi

3. Date  
29-April-2020

4. Are you the corresponding author?  
Yes ☑ No

5. Manuscript Title  
Aortic valve repair – Pearls and Pitfalls

6. Manuscript Identifying Number (if you know it)

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Do you have any patents, whether planned, pending or issued, broadly relevant to the work?  
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Dr. Youssefi reports grants from SCTS Ethicon Fellowship, during the conduct of the study.

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**Section 1. Identifying Information**

1. Given Name (First Name)  
   Emmanuel

2. Surname (Last Name)  
   Lansac

3. Date  
   29-April-2020

4. Are you the corresponding author?  
   Yes ✔ No

5. Manuscript Title  
   Aortic valve repair – Pearls and Pitfalls

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<th>Name of Entity</th>
<th>Grant?</th>
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<td>Consultant agreement</td>
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Dr. Lansac reports grants from Adetec Association, grants from Edwards Life Sciences, during the conduct of the study; other from Coroneo, Inc., outside the submitted work; .

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   Pavel  
2. Surname (Last Name)  
   Zacek  
3. Date  
   29-April-2020  
4. Are you the corresponding author?  
   ✔ No  
5. Manuscript Title  
   Aortic valve repair – Pearls and Pitfalls  
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Dr. Zacek has nothing to disclose.

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1. Given Name (First Name)  
   Alain

2. Surname (Last Name)  
   Berrebi

3. Date  
   29-April-2020

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

   Corresponding Author's Name  
   Emmanuel Lansac

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<tr>
<td>3. Date</td>
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<tr>
<td>4. Are you the corresponding author?</td>
<td>Yes</td>
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<tr>
<td>Corresponding Author’s Name</td>
<td>Emmanuel Lansac</td>
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<td>5. Manuscript Title</td>
<td>Aortic valve repair – Pearls and Pitfalls</td>
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4. **Intellectual Property.**

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

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)  
Leila

2. Surname (Last Name)  
Mankoubi

3. Date  
29-April-2020

4. Are you the corresponding author?  
Yes ✔

5. Manuscript Title  
Aortic valve repair – Pearls and Pitfalls

6. Manuscript Identifying Number (if you know it)

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Are there any relevant conflicts of interest?  
Yes ✔

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Dr. Mankoubi 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)  
   Milena
2. Surname (Last Name)  
   Noghin
3. Date  
   29-April-2020
4. Are you the corresponding author?  
   [ ] Yes  
   ✔ No  
   Corresponding Author’s Name  
   Emmanuel Lansac
5. Manuscript Title  
   Aortic valve repair – Pearls and Pitfalls
6. Manuscript Identifying Number (if you know it)

### 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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[ ] 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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Dr. Noghin 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)  Christelle
2. Surname (Last Name)  Diakov
3. Date  29-April-2020
4. Are you the corresponding author?  Yes  No
   Corresponding Author’s Name  Emmanuel Lansac
5. Manuscript Title  Aortic valve repair – Pearls and Pitfalls
6. Manuscript Identifying Number (if you know it)

Section 2. The Work Under Consideration for Publication

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Dr. Diakov has nothing to disclose.

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<th>3. Date</th>
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<tbody>
<tr>
<td>Jean Luc</td>
<td>Monin</td>
<td>29-April-2020</td>
</tr>
</tbody>
</table>

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

Corresponding Author’s Name
Emmanuel Lansac

5. Manuscript Title
Aortic valve repair – Pearls and Pitfalls

6. Manuscript Identifying Number (if you know it)

## Section 2. The Work Under Consideration for Publication

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Dr. Monin has nothing to disclose.

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<tr>
<th>1. Given Name (First Name)</th>
<th>Mathieu</th>
</tr>
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<tbody>
<tr>
<td>2. Surname (Last Name)</td>
<td>Debauchez</td>
</tr>
<tr>
<td>3. Date</td>
<td>29-April-2020</td>
</tr>
<tr>
<td>4. Are you the corresponding author?</td>
<td>No</td>
</tr>
</tbody>
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**Corresponding Author’s Name**

Emmanuel Lansac

**5. Manuscript Title**

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

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Debauchez
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