ICMJE Form for Disclosure of Potential Conflicts of Interest

Instructions

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### Identifying Information

1. Given Name (First Name)  
   N. Bryce  
2. Surname (Last Name)  
   Robinson  
3. Date  
   04-June-2020  
4. Are you the corresponding author?  
   [ ] Yes  
   ✔ No  
5. Manuscript Title  
   Reoperative repair of adult aortic coarctation with explantation of thoracic stent-graft: A case report  
6. Manuscript Identifying Number (if you know it)  
   JOVS-2020-BVPP-04

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Are there any relevant conflicts of interest?  
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   ✔ No

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Dr. Robinson 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)  
   Woodrow

2. Surname (Last Name)  
   Farrington

3. Date  
   04-June-2020

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

   Corresponding Author’s Name  
   Leonard N. Girardi

5. Manuscript Title  
   Reoperative repair of adult aortic coarctation with explantation of thoracic stent-graft: A case report

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

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### Section 1. Identifying Information

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

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

3. **Date**  
   04-June-2020

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

**Corresponding Author’s Name**  
Leonard N. Girardi

5. **Manuscript Title**  
Reoperative repair of adult aortic coarctation with explantation of thoracic stent-graft: A case report

6. **Manuscript Identifying Number (if you know it)**  
JOVS-2020-BVPP-04

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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  
   ✔
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Dr. Maresca has nothing to disclose.

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Section 1. Identifying Information

1. Given Name (First Name) Irbaz
2. Surname (Last Name) Hameed
3. Date 04-June-2020
4. Are you the corresponding author? ☑ No
5. Manuscript Title
Reoperative repair of adult aortic coarctation with explantation of thoracic stent-graft: A case report
6. Manuscript Identifying Number (if you know it)
JOVS-2020-BVPP-04

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Dr. Hameed has nothing to disclose.

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Section 1. Identifying Information

1. Given Name (First Name) Erin
2. Surname (Last Name) Lannacone
3. Date 04-June-2020
4. Are you the corresponding author? ☐ Yes ☑ No
   Corresponding Author’s Name
   Leonard N. Girardi
5. Manuscript Title
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Dr. Lannacone 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)  
   Christopher

2. Surname (Last Name)  
   Lau

3. Date  
   04-June-2020

4. Are you the corresponding author?  
   - [ ] Yes  
   - [x] No  
   Corresponding Author’s Name  
   Leonard N. Girardi

5. Manuscript Title  
   Reoperative repair of adult aortic coarctation with explantation of thoracic stent-graft: A case report

6. Manuscript Identifying Number (if you know it)  
   JOVS-2020-BVPP-04

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

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

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Do you have any patents, whether planned, pending or issued, broadly relevant to the work?  
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   - [x] No

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Dr. Lau has nothing to disclose.

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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.

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1. Given Name (First Name)  
   Mario

2. Surname (Last Name)  
   Gaudino

3. Date  
   04-June-2020

4. Are you the corresponding author?  
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   Corresponding Author’s Name  
   Leonard N. Girardi

5. Manuscript Title  
   Reoperative repair of adult aortic coarctation with explantation of thoracic stent-graft: A case report

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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?  
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1. Given Name (First Name)  
   Leonard

2. Surname (Last Name)  
   Girardi

3. Date  
   04-June-2020

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

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