Date: 15.07.2021

Your Name: Andreas Martens

Manuscript Title: Direct open aortic cannulation under temporary retrograde cerebral flush perfusion in Acute Aortic

Dissection Stanford Type A – A case report.

Manuscript number (if known):

In the interest of transparency, we ask you to disclose all relationships/activities/interests listed below that are related to the content of your manuscript. "Related" means any relation with for-profit or not-for-profit third parties whose interests may be affected by the content of the manuscript. Disclosure represents a commitment to transparency and does not necessarily indicate a bias. If you are in doubt about whether to list a relationship/activity/interest, it is preferable that you do so.

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		Time frame: pas	st 36 months
2	Grants or contracts from any entity (if not indicated in item #1 above).	None	
3	Royalties or licenses	None	
4	Consulting fees	None	

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Pri te	ducational events rayment for expert estimony	X	
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St	estimony	None	
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	upport for attending neetings and/or travel	None	
P;	atents planned, issued or	None	
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Pa	articipation on a Data	None	
Sa	afety Monitoring Board or dvisory Board		
-	eadership or fiduciary role	None	
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	roup, paid or unpaid tock or stock options	X None	
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D.	eceipt of equipment,	None	
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	ervices		
83,037	ther financial or non-	XNone	
fir	nancial interests		
ease	summarize the above co	offlict of interest in the follow	wing box:

Date: 15.07.2021

Your Name: Erik Beckmann

Manuscript Title: Direct open aortic cannulation under temporary retrograde cerebral flush perfusion in Acute Aortic

Dissection Stanford Type A - A case report.

Manuscript number (if known):

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	THE RESERVE TO SERVE THE PARTY OF THE PARTY	Time frame: pas	it 36 months
2	Grants or contracts from any entity (if not indicated in item #1 above).	None	
3	Royalties or licenses	None	
4	Consulting fees	None	

,	Payment or honoraria for	None
	lectures, presentations,	
	speakers bureaus,	
	manuscript writing or	
	educational events	Y
	Payment for expert testimony	None
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	Support for attending meetings and/or travel	None
3	Patents planned, issued or	None
	pending	
	Participation on a Data	None
	Safety Monitoring Board or Advisory Board	
0	Leadership or fiduciary role	\(\sigma_1\)
U	in other board, society,	None
	committee or advocacy	
	group, paid or unpaid	
1	Stock or stock options	None
2	Receipt of equipment,	None
	materials, drugs, medical	
	writing, gifts or other	
_	services	X
3	Other financial or non- financial interests	None
	illiancial interests	

I certify that I have answered every question and have not altered the wording of any of the questions on this form.

Eik Bed 15.07.21

Date: 15.07.2021

Your Name: Tim Kaufeld

Manuscript Title: Direct open aortic cannulation under temporary retrograde cerebral flush perfusion in Acute Aortic

Dissection Stanford Type A – A case report.

Manuscript number (if known):

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	THE RESIDENCE AND PROPERTY.	Time frame: pas	t 36 months
2	Grants or contracts from any entity (if not indicated in item #1 above).	None	
3	Royalties or licenses	None	
4	Consulting fees	None	

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0	Payment or honoraria for	None	
	lectures, presentations,		
	speakers bureaus,		
	manuscript writing or		
	educational events	X	
6	Payment for expert	None	
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7	Support for attending	None	
	meetings and/or travel		
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8	Patents planned, issued or	None	
	pending		
9	Participation on a Data Safety Monitoring Board or	None	
	Advisory Board	V	
10	Leadership or fiduciary role	None	
	in other board, society,		
	committee or advocacy		
	group, paid or unpaid		
11	Stock or stock options	XNone	
12	Receipt of equipment,	None	
	materials, drugs, medical		
	writing, gifts or other		
	services		
13	Other financial or non-	None	
	financial interests	- Z Notice	
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I certify that I have answered every question and have not altered the wording of any of the questions on this form.

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Date: 15.07.2021

Your Name: Felix Fleissner

Manuscript Title: Direct open aortic cannulation under temporary retrograde cerebral flush perfusion in Acute Aortic

Dissection Stanford Type A – A case report.

Manuscript number (if known):

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1	All support for the present manuscript (e.g., funding, provision of study materials, medical writing, article processing charges, etc.) No time limit for this item.	None None	al planning of the work
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2	Grants or contracts from any entity (if not indicated in item #1 above).	None	
3	Royalties or licenses	None	
4	Consulting fees	None	

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in othe comm group,	rship or fiduciary role	None		
comm group,	er board, society,	None		
	nittee or advocacy , paid or unpaid			
II Stock	or stock options	None		
	or stock options	None		
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	ials, drugs, medical			
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13 Other	financial or non-	None		Carried State of Stat
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	ial interests			

I certify that I have answered every question and have not altered the wording of any of the questions on this 15/7/2021 RU

Date: 15.07.2021 Your Name: Morsi Arar

Manuscript Title: Direct open aortic cannulation under temporary retrograde cerebral flush perfusion in Acute Aortic

Dissection Stanford Type A – A case report.

Manuscript number (if known):

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	processing charges, etc.) No time limit for this item.		
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	any entity (if not indicated in item #1 above).		
3	Royalties or licenses	X.,	
3	Royalties of licenses	None	
4	Consulting fees	V.	
4	Consulting rees	None	

5	Payment or honoraria for	<u>+</u> None	
	lectures, presentations,		
	speakers bureaus, manuscript writing or educational events		
6	Payment for expert testimony	None	
7	Support for attending meetings and/or travel	None	
8	Patents planned, issued or	None	
	pending		
9	Participation on a Data	None	
	Safety Monitoring Board or		
	Advisory Board	V	
10	Leadership or fiduciary role	None	
	in other board, society, committee or advocacy		
	group, paid or unpaid		
11	Stock or stock options	None	
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12	Receipt of equipment,	None	
	materials, drugs, medical writing, gifts or other		
	services		
13	Other financial or non-	None	
	financial interests		
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Please summarize the above conflict of interest in the following box:

Please place an "X" next to the following statement to indicate your agreement:

I certify that I have answered every question and have not altered the wording of any of the questions on this form.

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15.07.2071

Date: 15.07.2021

Your Name: Ruslan Natanov

Manuscript Title: Direct open aortic cannulation under temporary retrograde cerebral flush perfusion in Acute Aortic

Dissection Stanford Type A – A case report.

Manuscript number (if known):

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3	Royalties or licenses	None	
4	Consulting fees	None	

5	Payment or honoraria for	None	
	lectures, presentations,		
	speakers bureaus,		
	manuscript writing or		
	educational events		
5	Payment for expert	None	
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	testimony		
7	Support for attending	None	
	meetings and/or travel		
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3	Patents planned, issued or	None	
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)	Participation on a Data	None	
	Safety Monitoring Board or		
	Advisory Board	1	
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10	Leadership or fiduciary role	None	
	in other board, society,		
	committee or advocacy		
	group, paid or unpaid		
11	Stock or stock options	None	
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2	Receipt of equipment,	None	
	materials, drugs, medical		
	writing, gifts or other		
	services		
.3	Other financial or non-	None	
	financial interests		
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KI certify that I have answered every question and have not altered the wording of any of the questions on this

15.07.2021

form.

Date: 15.07.2021

Your Name: Wilhelm Korte

Manuscript Title: Direct open aortic cannulation under temporary retrograde cerebral flush perfusion in Acute Aortic

Dissection Stanford Type A – A case report.

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2	Grants or contracts from any entity (if not indicated in item #1 above).	None	
3	Royalties or licenses	None	
1	Consulting fees	None	

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	lectures, presentations,		
	speakers bureaus,		
	manuscript writing or		
	educational events		
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7	Support for attending	None	
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8	Patents planned, issued or	XNone	
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9	Participation on a Data	None	
	Safety Monitoring Board or		
	Advisory Board		
10	Leadership or fiduciary role	None	
	in other board, society,		
	committee or advocacy		
	group, paid or unpaid		
11	Stock or stock options	None	
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	writing, gifts or other		
	services		
13	Other financial or non-	None	
	financial interests	<u> 7 T</u> ivone	
Plea	se summarize the above so	nflict of interest in the followi	t
	se sammanze the above co	mict of interest in the followi	ng box:

I certify that I have answered every question and have not altered the wording of any of the questions on this form.

Diala leste 18.07.21

Date: 15.07.2021

Your Name: Malakh Lal Shrestha

Manuscript Title: Direct open aortic cannulation under temporary retrograde cerebral flush perfusion in Acute Aortic

Dissection Stanford Type A - A case report.

Manuscript number (if known):

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	CHARLES THE REAL PROPERTY OF THE	Time frame: Since the initi	al planning of the work
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		Time frame: pas	t 36 months
2	Grants or contracts from any entity (if not indicated in item #1 above).	_X_None	
3	Royalties or licenses	None	
4	Consulting fees	None	

Payment or honoraria for lectures, presentations, speakers bureaus,		
manuscript writing or		
educational events		
Payment for expert	None	
testimony		5.30.5 30.7 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5
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Support for attending meetings and/or travel	None	
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pending	None	
Participation on a Data	X	
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in other board, society,		
committee or advocacy		
group, paid or unpaid	/	
Stock or stock options	None	
	X	
Receipt of equipment,	None	
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