ICMJE DISCLOSURE FORM

Date: 2021.09.13
Your Name: Mayu Asano
Manuscript Title: Cerebral oximetry-guided pulmonary artery banding for end-stage heart failure in a child with non-compaction left ventricular cardiomyopathy, a case report
Manuscript number (if known): TP-21-340

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.

The following questions apply to the author’s relationships/activities/interests as they relate to the current manuscript only.

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In item #1 below, report all support for the work reported in this manuscript without time limit. For all other items, the time frame for disclosure is the past 36 months.

| Item | Description | Time frame: Since the initial planning of the work | Time frame: past 36 months |
|------|-------------|-----------------------------------------------------|----------------------------|
| 1    | All support for the present manuscript (e.g., funding, provision of study materials, medical writing, article processing charges, etc.)<br>No time limit for this item. | _X_ None | |
| 2    | Grants or contracts from any entity (if not indicated in item #1 above). | _X_ None | |
| 3    | Royalties or licenses | _X_ None | |
| 4    | Consulting fees | _X_ None | |
|   |                                                                                           | _X_None |
|---|-------------------------------------------------------------------------------------------|---------|
| 5 | Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or educational events |         |
| 6 | Payment for expert testimony                                                               | _X_None |
| 7 | Support for attending meetings and/or travel                                               | _X_None |
| 8 | Patents planned, issued or pending                                                         | _X_None |
| 9 | Participation on a Data Safety Monitoring Board or Advisory Board                          | _X_None |
|10 | Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid | _X_None |
|11 | Stock or stock options                                                                     | _X_None |
|12 | Receipt of equipment, materials, drugs, medical writing, gifts or other services           | _X_None |
|13 | Other financial or non-financial interests                                                 | _X_None |

**Please summarize the above conflict of interest in the following box:**

I have no conflict of interest.

**Please place an “X” next to the following statement to indicate your agreement:**

_X_ 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: 2021.09.13
Your Name: Kenji Doi
Manuscript Title: Cerebral oximetry-guided pulmonary artery banding for end-stage heart failure in a child with non-compaction left ventricular cardiomyopathy, a case report
Manuscript number (if known): TP-21-340

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| # | Description                                                                 | X  |
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Date: 2021.09.13
Your Name: Minoru Nomura
Manuscript Title: Cerebral oximetry-guided pulmonary artery banding for end-stage heart failure in a child with non-compaction left ventricular cardiomyopathy, a case report
Manuscript number (if known): TP-21-340

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|    | **No time limit for this item.**                                                               |                                                                                  |
| 2  | Grants or contracts from any entity (if not indicated in item #1 above).                       | _X_None                                                                          |
| 3  | Royalties or licenses                                                                          | _X_None                                                                          |
| 4  | Consulting fees                                                                                | _X_None                                                                          |

Time frame: Since the initial planning of the work

Time frame: past 36 months
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Date: 2021.09.13
Your Name: Yasuko Nagasaka
Manuscript Title: Cerebral oximetry-guided pulmonary artery banding for end-stage heart failure in a child with non-compaction left ventricular cardiomyopathy, a case report
Manuscript number (if known): TP-21-340

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| 3 | Royalties or licenses                                                                            | X None                                                                              |
| 4 | Consulting fees                                                                                  | X None                                                                              |
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