ICMJE DISCLOSURE FORM

Date: 2021-11-20

Your Name: Fan Ju

Manuscript Title: The enlargement rate of ventricular septal rupture is a risk factor for 30-day mortality in patients with delayed surgery.

Manuscript number (if known): ATM-21-6243

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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|   | **No time limit for this item.**                                                                |                                                                                   |
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|   | **Time frame: past 36 months**                                                                 |                                                                                   |
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| 3 | Royalties or licenses                                                                          | ____None                                                                          |
| 4 | Consulting fees                                                                               | ____None                                                                          |
5. Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or educational events

6. Payment for expert testimony

7. Support for attending meetings and/or travel

8. Patents planned, issued or pending

9. Participation on a Data Safety Monitoring Board or Advisory Board

10. Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid

11. Stock or stock options

12. Receipt of equipment, materials, drugs, medical writing, gifts or other services

13. Other financial or non-financial interests

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

The author has no conflicts of interest to declare.

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

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**ICMJE DISCLOSURE FORM**

Date: __2021-11-20______________________________

Your Name: __Xin Yuan______________________________

Manuscript Title: _The enlargement rate of ventricular septal rupture is a risk factor for 30-day mortality in patients with delayed surgery._

Manuscript number (if known): ___ATM-21-6243_________________________________________

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| 4 | Consulting fees | _None_ |

Time frame: Since the initial planning of the work

Time frame: past 36 months
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**ICMJE DISCLOSURE FORM**

Date:_2021-11-20_  
Your Name:_Baotong Li_  
Manuscript Title:_The enlargement rate of ventricular septal rupture is a risk factor for 30-day mortality in patients with delayed surgery._  
Manuscript number (if known):__ATM-21-6243_  

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Date: 2021-11-20

Your Name: Xiaokang Luo

Manuscript Title: The enlargement rate of ventricular septal rupture is a risk factor for 30-day mortality in patients with delayed surgery.

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| 3 | Royalties or licenses                                                                         | _None                                                                            |
| 4 | Consulting fees                                                                               | _None                                                                            |
|   | Description                                                                 | Response |
|---|-----------------------------------------------------------------------------|----------|
| 5 | Payment or honoraria for lectures, presentations, speakers bureaus,         | None     |
|   | manuscript writing or educational events                                    |          |
| 6 | Payment for expert testimony                                                | None     |
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|   | group, paid or unpaid                                                        |          |
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|   | services                                                                     |          |
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Date: _2021-11-20_ 
Your Name: __ Hengchao Wu ________________________________
Manuscript Title: _The enlargement rate of ventricular septal rupture is a risk factor for 30-day mortality in patients with delayed surgery._
Manuscript number (if known): ___ ATM-21-6243_____________________________________

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Date: 2021-11-20
Your Name: Tao Yang
Manuscript Title: The enlargement rate of ventricular septal rupture is a risk factor for 30-day mortality in patients with delayed surgery.
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