

ICMJE Form for Disclosure of Potential Conflicts of Interest

Instructions

The purpose of this form is to provide readers of your manuscript with information about your other interests that could influence how they receive and understand your work. The form is designed to be completed electronically and stored electronically. It contains programming that allows appropriate data display. Each author should submit a separate form and is responsible for the accuracy and completeness of the submitted information. The form is in six parts.

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".

3. Relevant financial activities outside the submitted work.

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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4. Intellectual Property.

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

5. Relationships not covered above.

Use this section to report other relationships or activities that readers could perceive to have influenced, or that give the appearance of potentially influencing, what you wrote in the submitted work.

Definitions.

Entity: government agency, foundation, commercial sponsor, academic institution, etc.

Grant: A grant from an entity, generally [but not always] paid to your organization

Personal Fees: Monies paid to you for services rendered, generally honoraria, royalties, or fees for consulting, lectures, speakers bureaus, expert testimony, employment, or other affiliations

Non-Financial Support: Examples include drugs/equipment supplied by the entity, travel paid by the entity, writing assistance, administrative support, etc.

Other: Anything not covered under the previous three boxes

Pending: The patent has been filed but not issued

Issued: The patent has been issued by the agency

Licensed: The patent has been licensed to an entity, whether earning royalties or not

Royalties: Funds are coming in to you or your institution due to your patent

ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name) Rolf	2. Surname (Last Name) Wachter	3. Date 19-January-2017
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Philipp Wild
5. Manuscript Title		
6. Manuscript Identifying Number (if you know it) manuscript 84840-JCI-CMED-RV-3		

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

Section 3. Relevant financial activities outside the submitted work.

Place a check in the appropriate boxes in the table to indicate whether you have financial relationships (regardless of amount of compensation) with entities as described in the instructions. Use one line for each entity; add as many lines as you need by clicking the "Add +" box. You should report relationships that were **present during the 36 months prior to publication**.

Are there any relevant conflicts of interest? Yes No

If yes, please fill out the appropriate information below.

Name of Entity	Grant?	Personal Fees?	Non-Financial Support?	Other?	Comments
Novartis	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Fees for inclusion of study subjects, advisory board, speaker
Boehringer Ingelheim	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Grant and fees for inclusion of study subjects
European Union	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Horizon 2020
Bundesministerium für Bildung und Forschung	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	KNHI und DZHK
Bayer and CVRx	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Speaker's bureau, Fees for inclusion of study subjects

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Medtronic	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Speaker's bureau, Steering Committee membership, fees for inclusion of study objects
Johnson & Johnson	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Fees for inclusion of study subjects
Servier	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Speaker's bureau, national study coordinator
Sanofi, Pfizer	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Speaker's bureau

Section 4. Intellectual Property -- Patents & Copyrights

Do you have any patents, whether planned, pending or issued, broadly relevant to the work? Yes No

Section 5. Relationships not covered above

Are there other relationships or activities that readers could perceive to have influenced, or that give the appearance of potentially influencing, what you wrote in the submitted work?

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Dr. Wachter reports personal fees and other from Novartis, grants and other from Boehringer Ingelheim, grants from European Union, grants from Bundesministerium für Bildung und Forschung, other from Bayer and CVRx, personal fees from Medtronic, other from Johnson & Johnson, personal fees and other from Servier, personal fees from Sanofi, Pfizer, outside the submitted work; .

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)

TAMARA

2. Surname (Last Name)

HARRIS

3. Date

24-February-2017

4. Are you the corresponding author?

 Yes No

Corresponding Author's Name

5. Manuscript Title

New Genetic variants for Cardiac Structure and Function – The EchoGen Consortium

6. Manuscript Identifying Number (if you know it)

84840-JCI-CMED-RV-3

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Are there any relevant conflicts of interest? Yes No

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Section 4. Intellectual Property -- Patents & Copyrights

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Section 1. Identifying Information

1. Given Name (First Name) Wolfgang	2. Surname (Last Name) Lieb	3. Date 19-January-2017
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Philipp S. Wild
5. Manuscript Title New Genetic variants for Cardiac Structure and Function – The EchoGen Consortium		
6. Manuscript Identifying Number (if you know it) 84840-JCI-CMED-RV-3		

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Dr. Lieb has nothing to disclose.

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Royalties: Funds are coming in to you or your institution due to your patent

ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name) Winfried

2. Surname (Last Name) März

3. Date 13-January-2017

4. Are you the corresponding author? Yes No Corresponding Author's Name Philipp S. Wild

5. Manuscript Title New Genetic variants for Cardiac Structure and Function – The EchoGen Consortium

6. Manuscript Identifying Number (if you know it) 84840-JCI-CMED-RV-3

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Are there any relevant conflicts of interest? Yes No

If yes, please fill out the appropriate information below. If you have more than one entity press the "ADD" button to add a row. Excess rows can be removed by pressing the "X" button.

Name of Institution/Company	Grant?	Personal Fees?	Non-Financial Support?	Other?	Comments
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

Section 3. Relevant financial activities outside the submitted work.

Place a check in the appropriate boxes in the table to indicate whether you have financial relationships (regardless of amount of compensation) with entities as described in the instructions. Use one line for each entity; add as many lines as you need by clicking the "Add +" box. You should report relationships that were **present during the 36 months prior to publication**.

Are there any relevant conflicts of interest? Yes No

If yes, please fill out the appropriate information below.

Name of Entity	Grant?	Personal Fees?	Non-Financial Support?	Other?	Comments
Siemens Diagnostics	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Aegerion Pharmaceuticals	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
AMGEN	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

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Name of Entity	Grant?	Personal Fees?	Non-Financial Support?	Other?	Comments
Astrazeneca	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Danone Research	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Sanofi/Genzyme	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Hoffmann LaRoche	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
MSD	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Pfizer	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Sanofi	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Synageva	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
BASF	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Abbott Diagnostics	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Numares AG	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Synlab Holding Deutschland GmbH	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Employment

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Section 1. Identifying Information

1. Given Name (First Name) Vincent	2. Surname (Last Name) Jaddoe	3. Date 20-January-2017
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Philipp S. Wild
5. Manuscript Title New Genetic variants for Cardiac Structure and Function – The EchoGen Consortium		
6. Manuscript Identifying Number (if you know it) 84840-JCI-CMED-RV-3		

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

Section 3. Relevant financial activities outside the submitted work.

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Are there any relevant conflicts of interest? 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

ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 5. Relationships not covered above

Are there other relationships or activities that readers could perceive to have influenced, or that give the appearance of potentially influencing, what you wrote in the submitted work?

- Yes, the following relationships/conditions/circumstances are present (explain below):
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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)

Vilmundur

2. Surname (Last Name)

Gudnason

3. Date

18-January-2017

4. Are you the corresponding author?

 Yes No

Corresponding Author's Name

Philipp S. Wild

5. Manuscript Title

New Genetic variants for Cardiac Structure and Function – The EchoGen Consortium

6. Manuscript Identifying Number (if you know it)

84840-JCI-CMED-RV-3

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Dr. Gudnason has nothing to disclose.

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Section 1. Identifying Information

1. Given Name (First Name)
Vera

2. Surname (Last Name)
Grossmann

3. Date
23-January-2017

4. Are you the corresponding author?

Yes No

Corresponding Author's Name
Philipp S. Wild

5. Manuscript Title
New Genetic variants for Cardiac Structure and Function – The EchoGen Consortium

6. Manuscript Identifying Number (if you know it)
84840-JCI-CMED-RV-3

Section 2. The Work Under Consideration for Publication

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Dr. Grossmann 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)
Ramachandran

2. Surname (Last Name)
Vasan

3. Date
19-January-2017

4. Are you the corresponding author?

Yes No

Corresponding Author's Name
Philipp S. Wild

5. Manuscript Title
New Genetic variants for Cardiac Structure and Function – The EchoGen Consortium

6. Manuscript Identifying Number (if you know it)
84840-JCI-CMED-RV-3

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)
Uwe

2. Surname (Last Name)
Völker

3. Date
20-January-2017

4. Are you the corresponding author? Yes No
Corresponding Author's Name
Philipp S. Wild, Marcus Dörr

5. Manuscript Title
New Genetic variants for Cardiac Structure and Function – The EchoGen Consortium

6. Manuscript Identifying Number (if you know it)
84840-JCI-CMED-DN-2

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Are there any relevant conflicts of interest? Yes No

If yes, please fill out the appropriate information below. If you have more than one entity press the "ADD" button to add a row. Excess rows can be removed by pressing the "X" button.

Name of Institution/Company	Grant?	Personal Fees?	Non-Financial Support?	Other?	Comments
DZHK, BMBF	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

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Dr. Völker reports grants from DZHK, BMBF, during the conduct of the study; .

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name) Ulrich	2. Surname (Last Name) Broeckel	3. Date 19-January-2017
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Philipp S. Wild
5. Manuscript Title New Genetic variants for Cardiac Structure and Function – The EchoGen Consortium		
6. Manuscript Identifying Number (if you know it) 84840-JCI-CMED-RV-3		

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Are there any relevant conflicts of interest? Yes No

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Dr. Broeckel 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) Tune	2. Surname (Last Name) Pers	3. Date 19-January-2017
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name
5. Manuscript Title New Genetic variants for Cardiac Structure and Function – The EchoGen Consortium		
6. Manuscript Identifying Number (if you know it) 84840-JCI-CMED-RV-3		

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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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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)
Thomas

2. Surname (Last Name)
Muenzel

3. Date
18-January-2017

4. Are you the corresponding author? Yes No Corresponding Author's Name

5. Manuscript Title
New Genetic variants for Cardiac Structure and Function –
The EchoGen Consortium

6. Manuscript Identifying Number (if you know it)

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name) Thomas 2. Surname (Last Name) Cappola 3. Date 19-January-2017

4. Are you the corresponding author? Yes No Corresponding Author's Name
Philipp S. Wild

5. Manuscript Title
New Genetic variants for Cardiac Structure and Function – The EchoGen Consortium

6. Manuscript Identifying Number (if you know it)
84840-JCI-CMED-RV-3

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Are there any relevant conflicts of interest? Yes No

If yes, please fill out the appropriate information below. If you have more than one entity press the "ADD" button to add a row. Excess rows can be removed by pressing the "X" button.

Name of Institution/Company	Grant?	Personal Fees?	Non-Financial Support?	Other?	Comments
NHLBI	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

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Are there any relevant conflicts of interest? Yes No

If yes, please fill out the appropriate information below.

Name of Entity	Grant?	Personal Fees?	Non-Financial Support?	Other?	Comments
Novartis	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Service on a Data Safety Monitoring Board
Genetech	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Scientific Consulting

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Section 4. Intellectual Property -- Patents & Copyrights

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Dr. Cappola reports grants from NHLBI, during the conduct of the study; personal fees from Novartis, personal fees from Genetech, outside the submitted work; .

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1. Given Name (First Name) Terho	2. Surname (Last Name) Lehtimäki	3. Date 19-January-2017
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Philipp S. Wild
5. Manuscript Title New Genetic variants for Cardiac Structure and Function – The EchoGen Consortium		
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Section 1. Identifying Information

1. Given Name (First Name) Teresa	2. Surname (Last Name) Nutile	3. Date 19-January-2017
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name P. S. Wild, J. F. Felix, R.S. Vasan, M. Dörr
5. Manuscript Title New Genetic variants for Cardiac Structure and Function – The EchoGen Consortium		
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Dr. Nutile has nothing to disclose.

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Royalties: Funds are coming in to you or your institution due to your patent

ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name) Tanja	2. Surname (Last Name) Zeller	3. Date 18-January-2017
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Philipp Wild
5. Manuscript Title New Genetic variants for Cardiac Structure and Function – The EchoGen Consortium		
6. Manuscript Identifying Number (if you know it) 84840-JCI-CMED-RV-3		

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

Section 3. Relevant financial activities outside the submitted work.

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Are there any relevant conflicts of interest? 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

ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 5. Relationships not covered above

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Section 6. Disclosure Statement

Based on the above disclosures, this form will automatically generate a disclosure statement, which will appear in the box below.

Dr. Zeller has nothing to disclose.

Evaluation and Feedback

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name) Tandaw	2. Surname (Last Name) Samdarshi	3. Date 19-January-2017
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Philipp S. Wild
5. Manuscript Title New Genetic variants for Cardiac Structure and Function – The EchoGen Consortium		
6. Manuscript Identifying Number (if you know it) 84840-JCI-CMED-RV-3		

Section 2. The Work Under Consideration for Publication

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Are there any relevant conflicts of interest? Yes No

Section 3. Relevant financial activities outside the submitted work.

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Are there any relevant conflicts of interest? 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

ICMJE Form for Disclosure of Potential Conflicts of Interest

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Section 6. Disclosure Statement

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Dr. Samdarshi has nothing to disclose.

Evaluation and Feedback

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name) Susan	2. Surname (Last Name) Cheng	3. Date 19-January-2017
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Philipp S. Wild
5. Manuscript Title New Genetic variants for Cardiac Structure and Function – The EchoGen Consortium		
6. Manuscript Identifying Number (if you know it) 84840-JCI-CMED-RV-3		

Section 2. The Work Under Consideration for Publication

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Are there any relevant conflicts of interest? Yes No

Section 3. Relevant financial activities outside the submitted work.

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Are there any relevant conflicts of interest? 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. Cheng 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) Stephan B.	2. Surname (Last Name) Felix	3. Date 19-January-2017
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Philipp S. Wild
5. Manuscript Title New Genetic variants for Cardiac Structure and Function – The EchoGen Consortium		
6. Manuscript Identifying Number (if you know it) 84840-JCI-CMED-RV-3		

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Are there any relevant conflicts of interest? Yes No

Section 3. Relevant financial activities outside the submitted work.

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Are there any relevant conflicts of interest? Yes No

Section 4. Intellectual Property -- Patents & Copyrights

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)
Stefania

2. Surname (Last Name)
Nappo

3. Date
19-January-2017

4. Are you the corresponding author?

Yes No

Corresponding Author's Name
Philipp S. Wild

5. Manuscript Title
New Genetic variants for Cardiac Structure and Function – The EchoGen Consortium

6. Manuscript Identifying Number (if you know it)
84840-JCI-CMED-RV-3

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Dr. Stefania Nappo 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)
Stefan

2. Surname (Last Name)
Blankenberg

3. Date
19-January-2017

4. Are you the corresponding author? Yes No
Corresponding Author's Name
Philipp S. Wild

5. Manuscript Title
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6. Manuscript Identifying Number (if you know it)
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Are there any relevant conflicts of interest? Yes No

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Are there any relevant conflicts of interest? Yes No

If yes, please fill out the appropriate information below.

Name of Entity	Grant?	Personal Fees?	Non-Financial Support?	Other?	Comments
Abbott	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	lecture
Abbott Diagnostics	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	lecture
Bayer	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	lecture, advisory board
Boehringer Ingelheim	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	lecture, advisory board
Thermo Fisher	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	lecture, advisory board
Siemens	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	lecture
Medtronic	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	lecture
Pfizer	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	lecture

ICMJE Form for Disclosure of Potential Conflicts of Interest

Name of Entity	Grant?	Personal Fees?	Non-Financial Support?	Other?	Comments
Roche	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	lecture, advisory board
Siemens Diagnostics	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	lecture
Novartis	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	advisory board

Section 4. Intellectual Property -- Patents & Copyrights

Do you have any patents, whether planned, pending or issued, broadly relevant to the work? Yes No

Section 5. Relationships not covered above

Are there other relationships or activities that readers could perceive to have influenced, or that give the appearance of potentially influencing, what you wrote in the submitted work?

- Yes, the following relationships/conditions/circumstances are present (explain below):
- No other relationships/conditions/circumstances that present a potential conflict of interest

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Section 6. Disclosure Statement

Based on the above disclosures, this form will automatically generate a disclosure statement, which will appear in the box below.

Dr. Blankenberg reports grants and personal fees from Abbott, grants and personal fees from Abbott Diagnostics, grants and personal fees from Bayer, grants and personal fees from Boehringer Ingelheim, grants and personal fees from Thermo Fisher, grants and personal fees from Siemens, personal fees from Medtronic, personal fees from Pfizer, personal fees from Roche, personal fees from Siemens Diagnostics, personal fees from Novartis, outside the submitted work; .

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Evaluation and Feedback

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4. Intellectual Property.

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name) Solomon	2. Surname (Last Name) Musani	3. Date 19-January-2017
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Philipp S. Wild
5. Manuscript Title New Genetic variants for Cardiac Structure and Function – The EchoGen Consortium		
6. Manuscript Identifying Number (if you know it) 84840-JCI-CMED-RV-3		

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

Section 3. Relevant financial activities outside the submitted work.

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Are there any relevant conflicts of interest? Yes No

Section 4. Intellectual Property -- Patents & Copyrights

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Dr. Musani 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) Simon

2. Surname (Last Name) Thom

3. Date 19-January-2017

4. Are you the corresponding author? Yes No

Corresponding Author's Name Philipp S. Wild

5. Manuscript Title New Genetic variants for Cardiac Structure and Function – The EchoGen Consortium

6. Manuscript Identifying Number (if you know it) 84840-JCI-CMED-RV-3

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Are there any relevant conflicts of interest? Yes No

If yes, please fill out the appropriate information below. If you have more than one entity press the "ADD" button to add a row. Excess rows can be removed by pressing the "X" button.

Name of Institution/Company	Grant?	Personal Fees?	Non-Financial Support?	Other?	Comments
Pfizer pharma ltd.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Investigator led research grant

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Section 4. Intellectual Property -- Patents & Copyrights

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Dr. Thom reports grants from Pfizer pharma ltd., during the conduct of the study; .

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name) Setia	2. Surname (Last Name) Pramana	3. Date 21-January-2017
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name
5. Manuscript Title New Genetic variants for Cardiac Structure and Function – The EchoGen Consortium		
6. Manuscript Identifying Number (if you know it) 84840-JCI-CMED-RV-3		

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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Dr. Pramana 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) Sebastian	2. Surname (Last Name) Nuding	3. Date 20-January-2017
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Philipp S. Wild
5. Manuscript Title New Genetic variants for Cardiac Structure and Function – The EchoGen Consortium		
6. Manuscript Identifying Number (if you know it) 84840-JCI-CMED-RV-3		

Section 2. The Work Under Consideration for Publication

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Are there any relevant conflicts of interest? Yes No

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Dr. Nuding 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) Sanjiv	2. Surname (Last Name) Shah	3. Date 19-January-2017
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Philipp S. Wild
5. Manuscript Title New Genetic variants for Cardiac Structure and Function – The EchoGen Consortium		
6. Manuscript Identifying Number (if you know it) 84840-JCI-CMED-RV-3		

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Are there any relevant conflicts of interest? Yes No

Section 3. Relevant financial activities outside the submitted work.

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Dr. Shah has nothing to disclose.

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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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Royalties: Funds are coming in to you or your institution due to your patent

ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name) Saku	2. Surname (Last Name) Ruohonen	3. Date 20-January-2017
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Philipp S. Wild
5. Manuscript Title New Genetic variants for Cardiac Structure and Function – The EchoGen Consortium		
6. Manuscript Identifying Number (if you know it) 84840-JCI-CMED-RV-3		

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

Section 3. Relevant financial activities outside the submitted work.

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Are there any relevant conflicts of interest? 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. Ruohonen 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)
Rossella

2. Surname (Last Name)
Sorice

3. Date
19-January-2017

4. Are you the corresponding author?

Yes No

Corresponding Author's Name
Philipp S. Wild, MD, MSc

5. Manuscript Title
New Genetic variants for Cardiac Structure and Function – The EchoGen Consortium

6. Manuscript Identifying Number (if you know it)

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Dr. Sorice 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)
Robert

2. Surname (Last Name)
Zweiker

3. Date
19-January-2017

4. Are you the corresponding author?

Yes No

Corresponding Author's Name
Philipp S. Wild

5. Manuscript Title
New Genetic variants for Cardiac Structure and Function – The EchoGen Consortium

6. Manuscript Identifying Number (if you know it)
84840-JCI-CMED-RV-3

Section 2. The Work Under Consideration for Publication

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Section 4. Intellectual Property -- Patents & Copyrights

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Dr. Zweiker 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)
Reinhold

2. Surname (Last Name)
Schmidt

3. Date
19-January-2017

4. Are you the corresponding author?

Yes No

Corresponding Author's Name
Philipp S. Wild

5. Manuscript Title
New Genetic variants for Cardiac Structure and Function – The EchoGen Consortium

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

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Section 1. Identifying Information

1. Given Name (First Name) Ralpa 2. Surname (Last Name) Sacco 3. Date 19-January-2017

4. Are you the corresponding author? Yes No Corresponding Author's Name
Philipp S. Wild

5. Manuscript Title
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Are there any relevant conflicts of interest? Yes No

If yes, please fill out the appropriate information below. If you have more than one entity press the "ADD" button to add a row. Excess rows can be removed by pressing the "X" button.

Name of Institution/Company	Grant?	Personal Fees?	Non-Financial Support?	Other?	Comments
NIH Northern Manhattan Study	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

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Dr. Sacco reports grants from NIH Northern Manhattan Study, during the conduct of the study; .

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)
Rafael

2. Surname (Last Name)
Laskowski

3. Date
24-January-2017

4. Are you the corresponding author?

Yes No

Corresponding Author's Name
Philipp S. Wild

5. Manuscript Title
New Genetic variants for Cardiac Structure and Function – The EchoGen Consortium

6. Manuscript Identifying Number (if you know it)
84840-JCI-CMED-RV-3

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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Are there any relevant conflicts of interest? 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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Section 5. Relationships not covered above

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Section 6. Disclosure Statement

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Dr. Laskowski 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)
Praveen

2. Surname (Last Name)
Surendran

3. Date
21-January-2017

4. Are you the corresponding author?

Yes No

Corresponding Author's Name
Philipp S. Wild

5. Manuscript Title
New Genetic variants for Cardiac Structure and Function – The EchoGen Consortium

6. Manuscript Identifying Number (if you know it)

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Royalties: Funds are coming in to you or your institution due to your patent

ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)
Philipp S.

2. Surname (Last Name)
Wild

3. Date
19-January-2017

4. Are you the corresponding author? Yes No

5. Manuscript Title
New Genetic variants for Cardiac Structure and Function – The EchoGen Consortium

6. Manuscript Identifying Number (if you know it)
84840-JCI-CMED-RV-3

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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Are there any relevant conflicts of interest? Yes No

If yes, please fill out the appropriate information below.

Name of Entity	Grant?	Personal Fees?	Non-Financial Support?	Other?	Comments
Boehringer Ingelheim	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Lecture and Consulting
Philips Medical Systems	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Sanofi-Aventis	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Lecture
Bayer Vital	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Lecture and Consulting
Daiichi Sankyo	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Portavita B.V.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
AstraZeneca	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Lecture

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Dr. Wild reports grants and personal fees from Boehringer Ingelheim, grants from Philips Medical Systems, grants and personal fees from Sanofi-Aventis, grants and personal fees from Bayer Vital, grants from Daiichi Sankyo, non-financial support from Portavita B.V., personal fees from AstraZeneca, outside the submitted work; .

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)
Peter P.

2. Surname (Last Name)
Pramstaller

3. Date
25-January-2017

4. Are you the corresponding author?

Yes No

Corresponding Author's Name
Philipp S. Wild

5. Manuscript Title
New Genetic variants for Cardiac Structure and Function – The EchoGen Consortium

6. Manuscript Identifying Number (if you know it)
84840-JCI-CMED-RV-3

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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) Peter M	2. Surname (Last Name) Nilsson	3. Date 18-January-2017
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Philipp Wilde
5. Manuscript Title New Genetic variants for Cardiac Structure and Function – The EchoGen Consortium		
6. Manuscript Identifying Number (if you know it) 84840-JCI-CMED-1		

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.)?

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name) Oscar	2. Surname (Last Name) Franco	3. Date 19-January-2017
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Philipp S. Wild
5. Manuscript Title New Genetic variants for Cardiac Structure and Function – The EchoGen Consortium		
6. Manuscript Identifying Number (if you know it) 84840-JCI-CMED-RV-3		

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Grant from metagenics to evaluate womens health
Grant from nestle on child health

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Dr. Franco reports and Grant from metagenics to evaluate womens health
Grant from nestle on child health.

Evaluation and Feedback

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)

Olli

2. Surname (Last Name)

Raitakari

3. Date

19-January-2017

4. Are you the corresponding author?

Yes No

Corresponding Author's Name

Philipp Wild

5. Manuscript Title

New Genetic variants for Cardiac Structure and Function – The EchoGen Consortium

6. Manuscript Identifying Number (if you know it)

84840-JCI-CMED-RV-3

Section 2. The Work Under Consideration for Publication

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Are there any relevant conflicts of interest? Yes No

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Are there any relevant conflicts of interest? 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. Raitakari 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) Olle	2. Surname (Last Name) Melander	3. Date 19-January-2017
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Philipp Wild
5. Manuscript Title		
6. Manuscript Identifying Number (if you know it) 84840-JCI-CMED-RV-3		

Section 2. The Work Under Consideration for Publication

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Dr. Melander 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) Nona	2. Surname (Last Name) Sotoodehnia	3. Date 19-January-2017
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Philipp S. Wild
5. Manuscript Title New Genetic variants for Cardiac Structure and Function – The EchoGen Consortium		
6. Manuscript Identifying Number (if you know it) 84840-JCI-CMED-RV-3		

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Dr. Sotoodehnia 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) Nicole	2. Surname (Last Name) Dueker	3. Date 18-January-2017
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Philipp Wild
5. Manuscript Title New Genetic variants for Cardiac Structure and Function – The EchoGen Consortium		
6. Manuscript Identifying Number (if you know it) _____		

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Section 4. Intellectual Property -- Patents & Copyrights

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Dr. Dueker has nothing to disclose.

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Dr. Smith has nothing to disclose.

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Royalties: Funds are coming in to you or your institution due to your patent

ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name) Nele	2. Surname (Last Name) Friedrich	3. Date 19-January-2017
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Philipp S. Wild
5. Manuscript Title New Genetic variants for Cardiac Structure and Function – The EchoGen Consortium		
6. Manuscript Identifying Number (if you know it) 84840-JCI-CMED-RV-3		

Section 2. The Work Under Consideration for Publication

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Are there any relevant conflicts of interest? Yes No

Section 3. Relevant financial activities outside the submitted work.

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Are there any relevant conflicts of interest? 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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Section 5. Relationships not covered above

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Section 6. Disclosure Statement

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Dr. Friedrich has nothing to disclose.

Evaluation and Feedback

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name) Myriam	2. Surname (Last Name) Fornage	3. Date 19-January-2017
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Philipp S. Wild
5. Manuscript Title New Genetic variants for Cardiac Structure and Function – The EchoGen Consortium		
6. Manuscript Identifying Number (if you know it) 84840-JCI-CMED-RV-3		

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Dr. Fornage 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)
Ming-Huei

2. Surname (Last Name)
Chen

3. Date
18-January-2017

4. Are you the corresponding author?

Yes No

Corresponding Author's Name
Philipp S. Wild

5. Manuscript Title
New Genetic variants for Cardiac Structure and Function – The EchoGen Consortium

6. Manuscript Identifying Number (if you know it)
84840-JCI-CMED-RV-3

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)

Mika

2. Surname (Last Name)

Kähönen

3. Date

19-January-2017

4. Are you the corresponding author?

 Yes No

Corresponding Author's Name

Philipp S. Wild

5. Manuscript Title

New Genetic variants for Cardiac Structure and Function – The EchoGen Consortium

6. Manuscript Identifying Number (if you know it)

84840-JCI-CMED-RV-3

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Are there any relevant conflicts of interest?

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Are there any relevant conflicts of interest?

 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

ICMJE Form for Disclosure of Potential Conflicts of Interest

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Dr. Kähönen 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) Michael	2. Surname (Last Name) Morley	3. Date 18-January-2017
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Philipp Wild
5. Manuscript Title New Genetic variants for Cardiac Structure and Function – The EchoGen Consortium		
6. Manuscript Identifying Number (if you know it) 84840-JCI-CMED-RV-3		

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Dr. Morley 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)
Melanie

2. Surname (Last Name)
Sohns

3. Date
26-January-2017

4. Are you the corresponding author?

Yes No

Corresponding Author's Name
Philipp S. Wild

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

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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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Royalties: Funds are coming in to you or your institution due to your patent

ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name) Martina	2. Surname (Last Name) Müller-Nurasyid	3. Date 19-January-2017
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Philipp S. Wild
5. Manuscript Title New Genetic variants for Cardiac Structure and Function – The EchoGen Consortium		
6. Manuscript Identifying Number (if you know it) 84840-JCI-CMED-RV-3		

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

Section 3. Relevant financial activities outside the submitted work.

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Are there any relevant conflicts of interest? 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. Müller-Nurasyid 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) Martin	2. Surname (Last Name) Russ	3. Date 19-January-2017
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Philipp S. Wild
5. Manuscript Title New Genetic variants for Cardiac Structure and Function – The EchoGen Consortium		
6. Manuscript Identifying Number (if you know it) 84840-JCI-CMED-RV-3		

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Are there any relevant conflicts of interest? Yes No

Section 3. Relevant financial activities outside the submitted work.

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Are there any relevant conflicts of interest? 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

ICMJE Form for Disclosure of Potential Conflicts of Interest

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Dr. Russ 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) Martin	2. Surname (Last Name) Larson	3. Date 20-January-2017
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Philipp S. Wild
5. Manuscript Title New Genetic variants for Cardiac Structure and Function – The EchoGen Consortium		
6. Manuscript Identifying Number (if you know it) 84840-JCI-CMED-RV-3		

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.)?

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Section 3. Relevant financial activities outside the submitted work.

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Are there any relevant conflicts of interest? 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

ICMJE Form for Disclosure of Potential Conflicts of Interest

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Dr. Larson has nothing to disclose.

Evaluation and Feedback

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Royalties: Funds are coming in to you or your institution due to your patent

ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name) Maarten J.G.	2. Surname (Last Name) Leening	3. Date 19-January-2017
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Philipp S. Wild
5. Manuscript Title New Genetic variants for Cardiac Structure and Function – The EchoGen Consortium		
6. Manuscript Identifying Number (if you know it) 84840-JCI-CMED-RV-3		

Section 2. The Work Under Consideration for Publication

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Are there any relevant conflicts of interest? Yes No

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Are there any relevant conflicts of interest? 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. Leening 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) Marina	2. Surname (Last Name) Ciullo	3. Date 19-January-2017
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Philipp S. Wild
5. Manuscript Title New Genetic variants for Cardiac Structure and Function – The EchoGen Consortium		
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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)
Marguerite

2. Surname (Last Name)
Irvin

3. Date
18-January-2017

4. Are you the corresponding author? Yes No

5. Manuscript Title
New Genetic variants for Cardiac Structure and Function –
The EchoGen Consortium

6. Manuscript Identifying Number (if you know it)

Section 2. The Work Under Consideration for Publication

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Are there any relevant conflicts of interest? Yes No

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Are there any relevant conflicts of interest? 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

ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 5. Relationships not covered above

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Evaluation and Feedback

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Royalties: Funds are coming in to you or your institution due to your patent

ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name) Margret	2. Surname (Last Name) Leosdottir	3. Date 24-January-2017
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Philipp S. Wild
5. Manuscript Title New Genetic variants for Cardiac Structure and Function – The EchoGen Consortium		
6. Manuscript Identifying Number (if you know it) 84840-JCI-CMED-RV-3		

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Are there any relevant conflicts of interest? Yes No

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Dr. Leosdottir 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) Marcus	2. Surname (Last Name) Kleber	3. Date 20-January-2017
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Philipp S. Wild
5. Manuscript Title New Genetic variants for Cardiac Structure and Function – The EchoGen Consortium		
6. Manuscript Identifying Number (if you know it) 84840-JCI-CMED-RV-3		

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Dr. Kleber 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) Marcus	2. Surname (Last Name) Dörr	3. Date 18-January-2017
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Philipp Wild
5. Manuscript Title New Genetic variants for Cardiac Structure and Function – The EchoGen Consortium		
6. Manuscript Identifying Number (if you know it) 84840-JCI-CMED-RV-3		

Section 2. The Work Under Consideration for Publication

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Section 4. Intellectual Property -- Patents & Copyrights

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Dr. Dörr has nothing to disclose.

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1. Given Name (First Name) Marco

2. Surname (Last Name) Di Tullio

3. Date 18-January-2017

4. Are you the corresponding author? Yes No Corresponding Author's Name Philipp Wild, MD

5. Manuscript Title New Genetic Variants for Cardiac Structure and Function – The EchoGen Consortium

6. Manuscript Identifying Number (if you know it) 84840-JCI-CMED-REV-3

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Are there any relevant conflicts of interest? Yes No

If yes, please fill out the appropriate information below. If you have more than one entity press the "ADD" button to add a row. Excess rows can be removed by pressing the "X" button.

Name of Institution/Company	Grant?	Personal Fees?	Non-Financial Support?	Other?	Comments
NINDS	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

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Dr. Di Tullio reports grants from NINDS, during the conduct of the study; .

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ICMJE Form for Disclosure of Potential Conflicts of Interest

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1. Given Name (First Name) Lude	2. Surname (Last Name) Franke	3. Date 24-January-2017
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Dr. Franke 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)
Leo-Pekka

2. Surname (Last Name)
Lyytikäinen

3. Date
18-January-2017

4. Are you the corresponding author?

Yes No

Corresponding Author's Name
Philipp S Wild

5. Manuscript Title
New Genetic variants for Cardiac Structure and Function – The EchoGen Consortium

6. Manuscript Identifying Number (if you know it)
84840-JCI-CMED-RV-3

Section 2. The Work Under Consideration for Publication

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Are there any relevant conflicts of interest? Yes No

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Are there any relevant conflicts of interest? 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. Lyytikäinen has nothing to disclose.

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Section 1. Identifying Information

1. Given Name (First Name)
LENORE

2. Surname (Last Name)
LAUNER

3. Date
19-January-2017

4. Are you the corresponding author?

Yes No

Corresponding Author's Name
Philipp S. Wild

5. Manuscript Title
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6. Manuscript Identifying Number (if you know it)
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Dr. LAUNER 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) Lars	2. Surname (Last Name) Lind	3. Date 19-January-2017
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Philipp S. Wild
5. Manuscript Title New Genetic variants for Cardiac Structure and Function – The EchoGen Consortium		
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Dr. Lind has nothing to disclose.

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1. Given Name (First Name) Lars	2. Surname (Last Name) Lannfelt	3. Date 19-January-2017
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Philipp S. Wild
5. Manuscript Title New Genetic variants for Cardiac Structure and Function – The EchoGen Consortium		
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Dr. Lannfelt has nothing to disclose.

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Section 1. Identifying Information

1. Given Name (First Name)

Kiang

2. Surname (Last Name)

Liu

3. Date

20-January-2017

4. Are you the corresponding author?

Yes

No

Corresponding Author's Name

Philipp S. Wild

5. Manuscript Title

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4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Philipp Wild
5. Manuscript Title New Genetic variants for Cardiac Structure and Function – The EchoGen Consortium		
6. Manuscript Identifying Number (if you know it) 84840-JCI-CMED-RV-3		

Section 2. The Work Under Consideration for Publication

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Are there any relevant conflicts of interest? Yes No

Section 3. Relevant financial activities outside the submitted work.

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Are there any relevant conflicts of interest? 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

ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 5. Relationships not covered above

Are there other relationships or activities that readers could perceive to have influenced, or that give the appearance of potentially influencing, what you wrote in the submitted work?

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Section 6. Disclosure Statement

Based on the above disclosures, this form will automatically generate a disclosure statement, which will appear in the box below.

Dr. Rice has nothing to disclose.

Evaluation and Feedback

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ICMJE Form for Disclosure of Potential Conflicts of Interest

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Royalties: Funds are coming in to you or your institution due to your patent

ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name) Karl	2. Surname (Last Name) Lackner	3. Date 19-January-2017
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Philipp S. Wild
5. Manuscript Title New Genetic variants for Cardiac Structure and Function – The EchoGen Consortium		
6. Manuscript Identifying Number (if you know it) 84840-JCI-CMED-RV-3		

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Are there any relevant conflicts of interest? Yes No

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Dr. Lackner has nothing to disclose.

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Royalties: Funds are coming in to you or your institution due to your patent

ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name) Joshua	2. Surname (Last Name) Bis	3. Date 18-January-2017
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Philipp Wild
5. Manuscript Title New Genetic variants for Cardiac Structure and Function – The EchoGen Consortium		
6. Manuscript Identifying Number (if you know it) 84840-JCI-CMED-RV-3		

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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Section 4. Intellectual Property -- Patents & Copyrights

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Dr. Bis 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) Johan	2. Surname (Last Name) Sundstrom	3. Date 19-January-2017
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Philipp S. Wild
5. Manuscript Title New Genetic variants for Cardiac Structure and Function – The EchoGen Consortium		
6. Manuscript Identifying Number (if you know it) 84840-JCI-CMED-RV-3		

Section 2. The Work Under Consideration for Publication

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Are there any relevant conflicts of interest? Yes No

Section 3. Relevant financial activities outside the submitted work.

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Are there any relevant conflicts of interest? 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

ICMJE Form for Disclosure of Potential Conflicts of Interest

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name) _____
Joel

2. Surname (Last Name) _____
Hirschhorn

3. Date _____
19-January-2017

4. Are you the corresponding author? Yes No
Corresponding Author's Name _____
Philipp S. Wild

5. Manuscript Title _____
New Genetic variants for Cardiac Structure and Function – The EchoGen Consortium

6. Manuscript Identifying Number (if you know it) _____
84840-JCI-CMED-RV-3

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Are there any relevant conflicts of interest? Yes No

If yes, please fill out the appropriate information below. If you have more than one entity press the "ADD" button to add a row. Excess rows can be removed by pressing the "X" button.

Name of Institution/Company	Grant?	Personal Fees?	Non-Financial Support?	Other?	Comments
NIH	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Government grant for human genetics

Section 3. Relevant financial activities outside the submitted work.

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Are there any relevant conflicts of interest? Yes No

If yes, please fill out the appropriate information below.

Name of Entity	Grant?	Personal Fees?	Non-Financial Support?	Other?	Comments
Pfizer	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Not related to work in manuscript

ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 4. Intellectual Property -- Patents & Copyrights

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Dr. Hirschhorn reports grants from NIH, during the conduct of the study; grants from Pfizer, outside the submitted work; .

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name) Jochen	2. Surname (Last Name) Kruppa	3. Date 19-January-2017
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Philipp S. Wild
5. Manuscript Title New Genetic variants for Cardiac Structure and Function – The EchoGen Consortium		
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Section 4. Intellectual Property -- Patents & Copyrights

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Dr. Kruppa has nothing to disclose.

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4. Intellectual Property.

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

5. Relationships not covered above.

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Royalties: Funds are coming in to you or your institution due to your patent

ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name) Jie	2. Surname (Last Name) Huang	3. Date 19-January-2017
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Philipp S. Wild
5. Manuscript Title New Genetic variants for Cardiac Structure and Function – The EchoGen Consortium		
6. Manuscript Identifying Number (if you know it) 84840-JCI-CMED-RV-3		

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

Section 3. Relevant financial activities outside the submitted work.

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Are there any relevant conflicts of interest? 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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Section 6. Disclosure Statement

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Dr. Huang 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) Jerome 2. Surname (Last Name) Rotter 3. Date 18-January-2017

4. Are you the corresponding author? Yes No Corresponding Author's Name
Philipp Wild

5. Manuscript Title
New genetic variants for cardiac structure and function - The EchoGen Consortium

6. Manuscript Identifying Number (if you know it)
84840-JCI-CMED-1

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

Section 3. Relevant financial activities outside the submitted work.

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Are there any relevant conflicts of interest? Yes No

If yes, please fill out the appropriate information below.

Name of Entity	Grant?	Personal Fees?	Non-Financial Support?	Other?	Comments
NIH	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

Section 4. Intellectual Property -- Patents & Copyrights

Do you have any patents, whether planned, pending or issued, broadly relevant to the work? Yes No

ICMJE Form for Disclosure of Potential Conflicts of Interest

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)
Jennifer

2. Surname (Last Name)
Brody

3. Date
20-January-2017

4. Are you the corresponding author?

Yes No

Corresponding Author's Name
Philipp S. Wild

5. Manuscript Title
New Genetic variants for Cardiac Structure and Function – The EchoGen Consortium

6. Manuscript Identifying Number (if you know it)
84840-JCI-CMED-RV-3

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.)?

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Are there any relevant conflicts of interest? 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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Ms. Brody 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) Jayashri	2. Surname (Last Name) Aragam	3. Date 23-January-2017
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Philipp Wild
5. Manuscript Title "Genetics of Cardiac Structure and Function"		
6. Manuscript Identifying Number (if you know it) 84840-JCI-CMED-RV-3		

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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Are there any relevant conflicts of interest? 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. Aragam 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) Janine	2. Surname (Last Name) Felix	3. Date 18-January-2017
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Philipp Wild
5. Manuscript Title New Genetic variants for Cardiac Structure and Function – The EchoGen Consortium		
6. Manuscript Identifying Number (if you know it) 84840-JCI-CMED-RV-3		

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Dr. Felix 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) Jamil	2. Surname (Last Name) Mayet	3. Date 18-January-2017
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Dr Phillipp Wild
5. Manuscript Title New genetic variants of cardiac structure and function - The EchoGen consortium		
6. Manuscript Identifying Number (if you know it) n		

Section 2. The Work Under Consideration for Publication

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Are there any relevant conflicts of interest? Yes No

Section 3. Relevant financial activities outside the submitted work.

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Are there any relevant conflicts of interest? 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

ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 5. Relationships not covered above

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Section 6. Disclosure Statement

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Dr. Mayet has nothing to disclose.

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Royalties: Funds are coming in to you or your institution due to your patent

ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)

Jaap

2. Surname (Last Name)

Deckers

3. Date

19-January-2017

4. Are you the corresponding author?

Yes

No

Corresponding Author's Name

Philipp S. Wild

5. Manuscript Title

New Genetic variants for Cardiac Structure and Function – The EchoGen Consortium

6. Manuscript Identifying Number (if you know it)

84840-JCI-CMED-RV-3

Section 2. The Work Under Consideration for Publication

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Are there any relevant conflicts of interest?

Yes

No

Section 3. Relevant financial activities outside the submitted work.

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Are there any relevant conflicts of interest?

Yes

No

Section 4. Intellectual Property -- Patents & Copyrights

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Yes

No

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Dr. Deckers 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) Honghuang	2. Surname (Last Name) Lin	3. Date 18-January-2017
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name
5. Manuscript Title New Genetic variants for Cardiac Structure and Function – The EchoGen Consortium		
6. Manuscript Identifying Number (if you know it) 84840-JCI-CMED-RV-3		

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Royalties: Funds are coming in to you or your institution due to your patent

ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name) Heribert	2. Surname (Last Name) Schunkert	3. Date 11-October-1959
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Philipp Wild
5. Manuscript Title New Genetic variants for Cardiac Structure and Function – The EchoGen Consortium		
6. Manuscript Identifying Number (if you know it) 84840-JCI-CMED-RV-3		

Section 2. The Work Under Consideration for Publication

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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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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name) Henry	2. Surname (Last Name) Völzke	3. Date 19-January-2017
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Philipp S. Wild
5. Manuscript Title New Genetic variants for Cardiac Structure and Function – The EchoGen Consortium		
6. Manuscript Identifying Number (if you know it) 84840-JCI-CMED-RV-3		

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Dr. Völzke 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)
Helena

2. Surname (Last Name)
Schmidt

3. Date
19-January-2017

4. Are you the corresponding author?

Yes No

Corresponding Author's Name
Philipp S. Wild

5. Manuscript Title
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4. Intellectual Property.

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

5. Relationships not covered above.

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name) Heike	2. Surname (Last Name) Bickeböllner	3. Date 18-January-2017
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Philipp Wild
5. Manuscript Title New Genetic variants for Cardiac Structure and Function – The EchoGen Consortium		
6. Manuscript Identifying Number (if you know it) 84840-JCI-CMED-1		

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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Are there any relevant conflicts of interest? 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

ICMJE Form for Disclosure of Potential Conflicts of Interest

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Section 6. Disclosure Statement

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Dr. Bickeböller has nothing to disclose.

Evaluation and Feedback

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Royalties: Funds are coming in to you or your institution due to your patent

ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)

J. Gustav

2. Surname (Last Name)

Smith

3. Date

18-January-2017

4. Are you the corresponding author?

Yes No

Corresponding Author's Name

Philipp Wild

5. Manuscript Title

New Genetic variants for Cardiac Structure and Function – The EchoGen Consortium

6. Manuscript Identifying Number (if you know it)

84840-JCI-CMED-RV-3

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

Section 3. Relevant financial activities outside the submitted work.

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Are there any relevant conflicts of interest? 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

ICMJE Form for Disclosure of Potential Conflicts of Interest

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Section 6. Disclosure Statement

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Dr. Smith has nothing to disclose.

Evaluation and Feedback

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name) Gerd	2. Surname (Last Name) Hasenfuss	3. Date 19-January-2017
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Philipp Wild
5. Manuscript Title		
6. Manuscript Identifying Number (if you know it) 84840-JCI-CMED-RV-3"		

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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Are there any relevant conflicts of interest? 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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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name) Gary 2. Surname (Last Name) Mitchell 3. Date 18-January-2017

4. Are you the corresponding author? Yes No Corresponding Author's Name
Philipp Wild, MD, MSc

5. Manuscript Title
New Genetic variants for Cardiac Structure and Function – The EchoGen Consortium

6. Manuscript Identifying Number (if you know it)
84840-JCI-CMED-RV-3

Section 2. The Work Under Consideration for Publication

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Are there any relevant conflicts of interest? Yes No

If yes, please fill out the appropriate information below. If you have more than one entity press the "ADD" button to add a row. Excess rows can be removed by pressing the "X" button.

Name of Institution/Company	Grant?	Personal Fees?	Non-Financial Support?	Other?	Comments
NIH	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Novartis	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Consultant
Servier	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Consultant
Cardiovascular Engineering, Inc	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Owner

Section 3. Relevant financial activities outside the submitted work.

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Are there any relevant conflicts of interest? Yes No

ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 4. Intellectual Property -- Patents & Copyrights

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Section 6. Disclosure Statement

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Dr. Mitchell reports grants from NIH, grants and other from Novartis, other from Servier, other from Cardiovascular Engineering, Inc, during the conduct of the study; .

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)
Frank

2. Surname (Last Name)
Edelmann, Univ.-Prof. Dr. med.

3. Date
19-January-2017

4. Are you the corresponding author? Yes No
Corresponding Author's Name
Philipp S. Wild

5. Manuscript Title
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Are there any relevant conflicts of interest? Yes No

If yes, please fill out the appropriate information below. If you have more than one entity press the "ADD" button to add a row. Excess rows can be removed by pressing the "X" button.

Name of Institution/Company	Grant?	Personal Fees?	Non-Financial Support?	Other?	Comments
Competence Network Heart Failure (KNHI) Germany	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
German Ministry for Research and Education	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

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Are there any relevant conflicts of interest? Yes No

If yes, please fill out the appropriate information below.

Name of Entity	Grant?	Personal Fees?	Non-Financial Support?	Other?	Comments
Bayer Healthcare	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Consultancy, Speakers honoraria
Stealth Peptides	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	Study Site

ICMJE Form for Disclosure of Potential Conflicts of Interest

Name of Entity	Grant?	Personal Fees?	Non-Financial Support?	Other?	Comments
Novartis	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Board membership, Consultancy, Speakers honoria
Boehringer Ingelheim	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Consultancy, Speakers honoria
Servier	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Board membership, Consultancy, Speakers honoria
German Research Foundation (DFG)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Ex-DHF trial
Merck	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Consultancy, Speakers honoria
Pfizer	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Consultancy, Speakers honoria
Medtronik	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Consultancy
Biotronik	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Consultancy
CVRx	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Consultancy, Speakers honoria

Section 4. Intellectual Property -- Patents & Copyrights

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Univ.-Prof. Dr. med. Edlmann, reports grants from Competence Network Heart Failure (KNHI) Germany, grants from German Ministry for Research and Education, during the conduct of the study; personal fees from Bayer Healthcare, non-financial support and other from Stealth Peptides, personal fees from Novartis, personal fees from Boehringer Ingelheim, personal fees from Servier, grants from German Research Foundation (DFG), personal fees from Merck, personal fees from Pfizer, personal fees from Medtronic, personal fees from Biotronik, personal fees from CVRx, outside the submitted work; .

Evaluation and Feedback

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ICMJE Form for Disclosure of Potential Conflicts of Interest

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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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Royalties: Funds are coming in to you or your institution due to your patent

ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name) FERNANDO	2. Surname (Last Name) RIVADENEIRA	3. Date 20-January-2017
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Philipp S. Wild
5. Manuscript Title New Genetic variants for Cardiac Structure and Function – The EchoGen Consortium		
6. Manuscript Identifying Number (if you know it) 84840-JCI-CMED-RV-3		

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

Section 3. Relevant financial activities outside the submitted work.

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Are there any relevant conflicts of interest? 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. RIVADENEIRA 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)
Fabiola

2. Surname (Last Name)
Del Greco M.

3. Date
18-January-2017

4. Are you the corresponding author?

Yes No

Corresponding Author's Name
Philipp Wild

5. Manuscript Title
New Genetic variants for Cardiac Structure and Function – The EchoGen Consortium

6. Manuscript Identifying Number (if you know it)
84840-JCI-CMED-RV-3

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Are there any relevant conflicts of interest? Yes No

Section 4. Intellectual Property -- Patents & Copyrights

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name) Ervin	2. Surname (Last Name) Fox	3. Date 23-January-2013
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Philipp S. Wild
5. Manuscript Title New Genetic variants for Cardiac Structure and Function – The EchoGen Consortium		
6. Manuscript Identifying Number (if you know it) 84840-JCI-CMED-RV-3		

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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Are there any relevant conflicts of interest? 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. Fox 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)
Erik

2. Surname (Last Name)
Ingelsson

3. Date
18-January-2017

4. Are you the corresponding author? Yes No Corresponding Author's Name _____

5. Manuscript Title
New Genetic variants for Cardiac Structure and Function – The EchoGen Consortium

6. Manuscript Identifying Number (if you know it)
84840-JCI-CMED-RV-3

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Are there any relevant conflicts of interest? Yes No

If yes, please fill out the appropriate information below.

Name of Entity	Grant?	Personal Fees?	Non-Financial Support?	Other?	Comments
Precision Wellness, Inc.	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Cellink	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

Section 4. Intellectual Property -- Patents & Copyrights

Do you have any patents, whether planned, pending or issued, broadly relevant to the work? Yes No

ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 5. Relationships not covered above

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Dr. Ingelsson reports personal fees from Precision Wellness, Inc., personal fees from Cellink, outside the submitted work; .

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name) Emelia

2. Surname (Last Name) Benjamin

3. Date 24-January-2017

4. Are you the corresponding author? Yes No Corresponding Author's Name Philipp S. Wild

5. Manuscript Title New Genetic variants for Cardiac Structure and Function – The EchoGen Consortium

6. Manuscript Identifying Number (if you know it) 84840-JCI-CMED-RV-3

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Are there any relevant conflicts of interest? Yes No

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Are there any relevant conflicts of interest? Yes No

If yes, please fill out the appropriate information below.

Name of Entity	Grant?	Personal Fees?	Non-Financial Support?	Other?	Comments
NIH	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	R01 HL128914
NIH	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	R01HL092577
AHA/NIH	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	P50 HL120163
AHA	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Until 06/30/16; Associate Editor "Circulation"
NIH/NCBI	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	CARDIA Observational Study Monitoring Board

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Dr. Benjamin reports grants from NIH, grants from AHA/NIH, personal fees from AHA, other from NIH/NCBI, outside the submitted work .

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4. Intellectual Property.

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

5. Relationships not covered above.

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Non-Financial Support: Examples include drugs/equipment supplied by the entity, travel paid by the entity, writing assistance, administrative support, etc.

Other: Anything not covered under the previous three boxes

Pending: The patent has been filed but not issued

Issued: The patent has been issued by the agency

Licensed: The patent has been licensed to an entity, whether earning royalties or not

Royalties: Funds are coming in to you or your institution due to your patent

ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)
Egbert

2. Surname (Last Name)
Bisping

3. Date
19-January-2017

4. Are you the corresponding author? Yes No
Corresponding Author's Name
Philipp S. Wild

5. Manuscript Title
New Genetic variants for Cardiac Structure and Function – The EchoGen Consortium

6. Manuscript Identifying Number (if you know it)
84840-JCI-CMED-RV-3

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

If yes, please fill out the appropriate information below. If you have more than one entity press the "ADD" button to add a row. Excess rows can be removed by pressing the "X" button.

Name of Institution/Company	Grant?	Personal Fees?	Non-Financial Support?	Other?	Comments
NGFN (National Genome Research Network)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	to Department of Cardiology, Medical University Graz
KNHI (Competence Network Heart Failure)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	to Department of Cardiology, University Medical Center Göttingen

Section 3. Relevant financial activities outside the submitted work.

Place a check in the appropriate boxes in the table to indicate whether you have financial relationships (regardless of amount of compensation) with entities as described in the instructions. Use one line for each entity; add as many lines as you need by clicking the "Add +" box. You should report relationships that were **present during the 36 months prior to publication**.

Are there any relevant conflicts of interest? 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

ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 5. Relationships not covered above

Are there other relationships or activities that readers could perceive to have influenced, or that give the appearance of potentially influencing, what you wrote in the submitted work?

- Yes, the following relationships/conditions/circumstances are present (explain below):
- No other relationships/conditions/circumstances that present a potential conflict of interest

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Section 6. Disclosure Statement

Based on the above disclosures, this form will automatically generate a disclosure statement, which will appear in the box below.

Dr. Bisping reports grants from NGFN (National Genome Research Network), grants from KNHI (Competence Network Heart Failure), during the conduct of the study; .

Evaluation and Feedback

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name) Edith	2. Surname (Last Name) Hofer	3. Date 19-January-2017
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Philipp S. Wild
5. Manuscript Title New Genetic variants for Cardiac Structure and Function – The EchoGen Consortium		
6. Manuscript Identifying Number (if you know it) 84840-JCI-CMED-RV-3		

Section 2. The Work Under Consideration for Publication

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Are there any relevant conflicts of interest? Yes No

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Are there any relevant conflicts of interest? 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

ICMJE Form for Disclosure of Potential Conflicts of Interest

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Dr. Hofer 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) Dörthe	2. Surname (Last Name) Malzahn	3. Date 19-January-2017
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Philipp S. Wild
5. Manuscript Title New Genetic variants for Cardiac Structure and Function – The EchoGen Consortium		
6. Manuscript Identifying Number (if you know it) 84840-JCI-CMED-RV-3		

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

Section 3. Relevant financial activities outside the submitted work.

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Are there any relevant conflicts of interest? 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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Section 6. Disclosure Statement

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Dr. Malzahn has nothing to disclose.

Evaluation and Feedback

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Royalties: Funds are coming in to you or your institution due to your patent

ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name) Donna	2. Surname (Last Name) Arnett	3. Date 24-January-2017
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Philipp S. Wild
5. Manuscript Title New Genetic variants for Cardiac Structure and Function – The EchoGen Consortium		
6. Manuscript Identifying Number (if you know it) 84840-JCI-CMED-RV-3		

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

Section 3. Relevant financial activities outside the submitted work.

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Are there any relevant conflicts of interest? 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

ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 5. Relationships not covered above

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Section 6. Disclosure Statement

Based on the above disclosures, this form will automatically generate a disclosure statement, which will appear in the box below.

Dr. Arnett has nothing to disclose.

Evaluation and Feedback

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name) Diana	2. Surname (Last Name) Pietzner	3. Date 25-January-2017
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Philipp Wild
5. Manuscript Title New Genetic variants for Cardiac Structure and Function – The EchoGen Consortium		
6. Manuscript Identifying Number (if you know it) 84840-JCI-CMED-RV-3		

Section 2. The Work Under Consideration for Publication

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Are there any relevant conflicts of interest? Yes No

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Are there any relevant conflicts of interest? 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. Pietzner has nothing to disclose.

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Issued: The patent has been issued by the agency

Licensed: The patent has been licensed to an entity, whether earning royalties or not

Royalties: Funds are coming in to you or your institution due to your patent

ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name) Denis	2. Surname (Last Name) Shields	3. Date 19-January-2017
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Philipp S. Wild
5. Manuscript Title New Genetic variants for Cardiac Structure and Function – The EchoGen Consortium		
6. Manuscript Identifying Number (if you know it) 84840-JCI-CMED-RV-3		

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

Section 3. Relevant financial activities outside the submitted work.

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Are there any relevant conflicts of interest? 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

ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 5. Relationships not covered above

Are there other relationships or activities that readers could perceive to have influenced, or that give the appearance of potentially influencing, what you wrote in the submitted work?

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- No other relationships/conditions/circumstances that present a potential conflict of interest

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Section 6. Disclosure Statement

Based on the above disclosures, this form will automatically generate a disclosure statement, which will appear in the box below.

Dr. Shields has nothing to disclose.

Evaluation and Feedback

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name) Deborah	2. Surname (Last Name) Mascalzoni	3. Date 19-January-2017
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Philipp S. Wild
5. Manuscript Title New Genetic variants for Cardiac Structure and Function – The EchoGen Consortium		
6. Manuscript Identifying Number (if you know it) 84840-JCI-CMED-RV-3		

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Are there any relevant conflicts of interest? Yes No

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Are there any relevant conflicts of interest? Yes No

Section 4. Intellectual Property -- Patents & Copyrights

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Dr. Mascalzoni 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) Daniela	2. Surname (Last Name) Ruggiero	3. Date 19-January-2017
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Philipp S. Wild, Janine F. Felix, Ramachandran S. Vasan, M ⁺
5. Manuscript Title New Genetic variants for Cardiac Structure and Function – The EchoGen Consortium		
6. Manuscript Identifying Number (if you know it) _____		

Section 2. The Work Under Consideration for Publication

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Are there any relevant conflicts of interest? 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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Royalties: Funds are coming in to you or your institution due to your patent

ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name) Daniel	2. Surname (Last Name) Tiller	3. Date 18-January-2017
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Philipp S. Wild
5. Manuscript Title New Genetic variants for Cardiac Structure and Function – The EchoGen Consortium		
6. Manuscript Identifying Number (if you know it) 84840-JCI-CMED-RV-3		

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

Section 3. Relevant financial activities outside the submitted work.

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Are there any relevant conflicts of interest? 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

ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 5. Relationships not covered above

Are there other relationships or activities that readers could perceive to have influenced, or that give the appearance of potentially influencing, what you wrote in the submitted work?

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Section 6. Disclosure Statement

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Dr. Tiller has nothing to disclose.

Evaluation and Feedback

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name) Daniel	2. Surname (Last Name) Medenwald	3. Date 20-January-2017
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Philipp S. Wild
5. Manuscript Title New Genetic variants for Cardiac Structure and Function – The EchoGen Consortium		
6. Manuscript Identifying Number (if you know it) 84840-JCI-CMED-RV-3		

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Are there any relevant conflicts of interest? Yes No

Section 3. Relevant financial activities outside the submitted work.

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Are there any relevant conflicts of interest? Yes No

Section 4. Intellectual Property -- Patents & Copyrights

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Dr. Medenwald 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)
Cosetta

2. Surname (Last Name)
Minelli

3. Date
19-January-2017

4. Are you the corresponding author?

Yes No

Corresponding Author's Name
Philipp S. Wild

5. Manuscript Title
New Genetic variants for Cardiac Structure and Function – The EchoGen Consortium

6. Manuscript Identifying Number (if you know it)
84840-JCI-CMED-RV-3

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Dr. Minelli has nothing to disclose.

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4. Intellectual Property.

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

5. Relationships not covered above.

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Other: Anything not covered under the previous three boxes

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Issued: The patent has been issued by the agency

Licensed: The patent has been licensed to an entity, whether earning royalties or not

Royalties: Funds are coming in to you or your institution due to your patent

ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name) Claire	2. Surname (Last Name) Monnereau	3. Date
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Philipp Wild
5. Manuscript Title New Genetic variants for Cardiac Structure and Function – The EchoGen Consortium		
6. Manuscript Identifying Number (if you know it) 84840-JCI-CMED-RV-3		

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

Section 3. Relevant financial activities outside the submitted work.

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Are there any relevant conflicts of interest? 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

ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 5. Relationships not covered above

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Section 6. Disclosure Statement

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Dr. Monnereau has nothing to disclose.

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Royalties: Funds are coming in to you or your institution due to your patent

ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name) Christina	2. Surname (Last Name) Loley	3. Date 19-January-2017
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Philipp S. Wild
5. Manuscript Title New Genetic variants for Cardiac Structure and Function – The EchoGen Consortium		
6. Manuscript Identifying Number (if you know it) 84840-JCI-CMED-RV-3		

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

Section 3. Relevant financial activities outside the submitted work.

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Are there any relevant conflicts of interest? 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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Based on the above disclosures, this form will automatically generate a disclosure statement, which will appear in the box below.

Dr. Loley 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) Christian	2. Surname (Last Name) Müller	3. Date 18-January-2017
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Philipp S Wild
5. Manuscript Title New Genetic variants for Cardiac Structure and Function – The EchoGen Consortium		
6. Manuscript Identifying Number (if you know it) 84840-JCI-CMED-1		

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

Section 3. Relevant financial activities outside the submitted work.

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Are there any relevant conflicts of interest? 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

ICMJE Form for Disclosure of Potential Conflicts of Interest

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Dr. Müller 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)
Cecilia

2. Surname (Last Name)
Lindgren

3. Date
23-January-2017

4. Are you the corresponding author? Yes No

5. Manuscript Title
New Genetic variants for Cardiac Structure and Function – The EchoGen Consortium

6. Manuscript Identifying Number (if you know it)
84840-JCI-CMED-RV-3

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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Are there any relevant conflicts of interest? 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

ICMJE Form for Disclosure of Potential Conflicts of Interest

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)
Calum

2. Surname (Last Name)
MacRae

3. Date
20-January-2017

4. Are you the corresponding author? Yes No
Corresponding Author's Name
Wild, Felix, Vasan, Dorr

5. Manuscript Title
New Genetic variants for Cardiac Structure and Function – The EchoGen Consortium

6. Manuscript Identifying Number (if you know it)
84840-JCI-CMED-RV-3

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Are there any relevant conflicts of interest? Yes No

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Are there any relevant conflicts of interest? Yes No

If yes, please fill out the appropriate information below.

Name of Entity	Grant?	Personal Fees?	Non-Financial Support?	Other?	Comments
NIH	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
AHA/Verily/Astra Zeneca	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Burroughs Wellcome	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Sanofi	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Merck	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Novartis	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Personome	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Leducq Foundation	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 4. Intellectual Property -- Patents & Copyrights

Do you have any patents, whether planned, pending or issued, broadly relevant to the work? Yes No

If yes, please fill out the appropriate information below. If you have more than one entity press the "ADD" button to add a row. Excess rows can be removed by pressing the "X" button.

Patent?	Pending?	Issued?	Licensed?	Royalties?	Licensee?	Comments
Therapies for cardiomyopathy and vascular disease	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		

Section 5. Relationships not covered above

Are there other relationships or activities that readers could perceive to have influenced, or that give the appearance of potentially influencing, what you wrote in the submitted work?

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Dr. MacRae has nothing to disclose.

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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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Royalties: Funds are coming in to you or your institution due to your patent

ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)
Burkert

2. Surname (Last Name)
Pieske

3. Date
19-January-2017

4. Are you the corresponding author? Yes No
Corresponding Author's Name
Philipp S. Wild

5. Manuscript Title
New Genetic variants for Cardiac Structure and Function – The EchoGen Consortium

6. Manuscript Identifying Number (if you know it)
84840-JCI-CMED-RV-3

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

If yes, please fill out the appropriate information below. If you have more than one entity press the "ADD" button to add a row. Excess rows can be removed by pressing the "X" button.

Name of Institution/Company	Grant?	Personal Fees?	Non-Financial Support?	Other?	Comments
Competence Network Heart Failure (KNHI) Germany	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
German Ministry for Research and Education	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

Section 3. Relevant financial activities outside the submitted work.

Place a check in the appropriate boxes in the table to indicate whether you have financial relationships (regardless of amount of compensation) with entities as described in the instructions. Use one line for each entity; add as many lines as you need by clicking the "Add +" box. You should report relationships that were **present during the 36 months prior to publication**.

Are there any relevant conflicts of interest? Yes No

If yes, please fill out the appropriate information below.

Name of Entity	Grant?	Personal Fees?	Non-Financial Support?	Other?	Comments
Bayer Healthcare	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Board membership
Stealth Peptides	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Board membership

ICMJE Form for Disclosure of Potential Conflicts of Interest

Name of Entity	Grant?	Personal Fees?	Non-Financial Support?	Other?	Comments
Novartis	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Board membership
Astra Zeneca	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Consultancy
Daiichi-Sankyo	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Consultancy
Vifor Pharma	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Consultancy

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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Section 6. Disclosure Statement

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Prof. Dr. Pieske reports personal fees from Bayer Healthcare, personal fees from Stealth Peptides, personal fees from Novartis, personal fees from Astra Zeneca, personal fees from Daiichi-Sankyo, personal fees from vifor Pharma outside the submitted work.

ICMJE Form for Disclosure of Potential Conflicts of Interest

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name) Bruno	2. Surname (Last Name) Stricker	3. Date 18-January-2017
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name _____
5. Manuscript Title Genetics of Cardiac Structure and Function		
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

Section 3. Relevant financial activities outside the submitted work.

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Are there any relevant conflicts of interest? 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

ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 5. Relationships not covered above

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Dr. Stricker 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) Bruce	2. Surname (Last Name) Psaty	3. Date 19-January-2017
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Philipp S. Wild
5. Manuscript Title New Genetic variants for Cardiac Structure and Function – The EchoGen Consortium		
6. Manuscript Identifying Number (if you know it) 84840-JCI-CMED-RV-3		

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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Are there any relevant conflicts of interest? 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. Psaty 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) Arne	2. Surname (Last Name) Schillert	3. Date 19-January-2017
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Philipp S. Wild
5. Manuscript Title New Genetic variants for Cardiac Structure and Function – The EchoGen Consortium		
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Are there any relevant conflicts of interest? Yes No

Section 4. Intellectual Property -- Patents & Copyrights

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Dr. Schillert has nothing to disclose.

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Royalties: Funds are coming in to you or your institution due to your patent

ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name) Anthony	2. Surname (Last Name) Barron	3. Date 18-January-2017
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Philipp Wild
5. Manuscript Title New Genetic variants for Cardiac Structure and Function – The EchoGen Consortium		
6. Manuscript Identifying Number (if you know it) 84840-JCI-CMED-DN-2		

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

Section 3. Relevant financial activities outside the submitted work.

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Are there any relevant conflicts of interest? 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

ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 5. Relationships not covered above

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Section 6. Disclosure Statement

Based on the above disclosures, this form will automatically generate a disclosure statement, which will appear in the box below.

Dr. Barron has nothing to disclose.

Evaluation and Feedback

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name) Annette	2. Surname (Last Name) Peters	3. Date 19-January-2017
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Philipp S. Wild
5. Manuscript Title New Genetic variants for Cardiac Structure and Function – The EchoGen Consortium		
6. Manuscript Identifying Number (if you know it) 84840-JCI-CMED-RV-3		

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

Section 3. Relevant financial activities outside the submitted work.

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Are there any relevant conflicts of interest? 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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Section 6. Disclosure Statement

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Dr. Peters 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) Anna Maria	2. Surname (Last Name) Töglhofer	3. Date 20-January-2017
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Philipp S. Wild
5. Manuscript Title New Genetic variants for Cardiac Structure and Function – The EchoGen Consortium		
6. Manuscript Identifying Number (if you know it) 84840-JCI-CMED-RV-3		

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

Section 3. Relevant financial activities outside the submitted work.

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Are there any relevant conflicts of interest? 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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Section 6. Disclosure Statement

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Ms. Töglhofer 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) Anke	2. Surname (Last Name) Kockskämper	3. Date 20-January-2017
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Philipp Wild
5. Manuscript Title New Genetic variants for Cardiac Structure and Function – The EchoGen Consortium		
6. Manuscript Identifying Number (if you know it) 84840-JCI-CMED-RV-3		

Section 2. The Work Under Consideration for Publication

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Are there any relevant conflicts of interest? Yes No

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Are there any relevant conflicts of interest? 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

ICMJE Form for Disclosure of Potential Conflicts of Interest

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Dr. Kockskämper has nothing to disclose.

Evaluation and Feedback

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name) Andrew	2. Surname (Last Name) Sharp	3. Date 19-January-2017
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Philipp S. Wild
5. Manuscript Title New Genetic variants for Cardiac Structure and Function – The EchoGen Consortium		
6. Manuscript Identifying Number (if you know it) 84840-JCI-CMED-RV-3		

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Section 4. Intellectual Property -- Patents & Copyrights

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ICMJE Form for Disclosure of Potential Conflicts of Interest

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Dr. Sharp 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) Andrew	2. Surname (Last Name) Morris	3. Date 19-January-2017
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Philipp Wild
5. Manuscript Title New Genetic variants for Cardiac Structure and Function – The EchoGen Consortium		
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Dr. Morris has nothing to disclose.

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Instructions

The purpose of this form is to provide readers of your manuscript with information about your other interests that could influence how they receive and understand your work. The form is designed to be completed electronically and stored electronically. It contains programming that allows appropriate data display. Each author should submit a separate form and is responsible for the accuracy and completeness of the submitted information. The form is in six parts.

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2. The work under consideration for publication.

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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)
Andrew

2. Surname (Last Name)
Hicks

3. Date
19-January-2017

4. Are you the corresponding author?

Yes No

Corresponding Author's Name
Philipp S. Wild

5. Manuscript Title
New Genetic variants for Cardiac Structure and Function – The EchoGen Consortium

6. Manuscript Identifying Number (if you know it)
84840-JCI-CMED-RV-3

Section 2. The Work Under Consideration for Publication

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Are there any relevant conflicts of interest? Yes No

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Are there any relevant conflicts of interest? 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. Hicks 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) Andreas	2. Surname (Last Name) Ziegler	3. Date 26-January-2017
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Philipp S. Wild
5. Manuscript Title New Genetic variants for Cardiac Structure and Function – The EchoGen Consortium		
6. Manuscript Identifying Number (if you know it) 84840-JCI-CMED-RV-3		

Section 2. The Work Under Consideration for Publication

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Are there any relevant conflicts of interest? Yes No

Section 4. Intellectual Property -- Patents & Copyrights

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Dr. Ziegler has nothing to disclose.

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Section 1. Identifying Information

1. Given Name (First Name)
André

2. Surname (Last Name)
Uitterlinden

3. Date
19-January-2017

4. Are you the corresponding author?

Yes No

Corresponding Author's Name
Philipp S. Wild

5. Manuscript Title
New Genetic variants for Cardiac Structure and Function – The EchoGen Consortium

6. Manuscript Identifying Number (if you know it)
84840-JCI-CMED-RV-3

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Dr. Uitterlinden has nothing to disclose.

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Section 1. Identifying Information

1. Given Name (First Name)

ALUN

2. Surname (Last Name)

HUGHES

3. Date

19-January-2017

4. Are you the corresponding author?

Yes No

Corresponding Author's Name

Philipp S. Wild

5. Manuscript Title

New Genetic variants for Cardiac Structure and Function – The EchoGen Consortium

6. Manuscript Identifying Number (if you know it)

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Dr. HUGHES 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) Alice 2. Surname (Last Name) Stanton 3. Date 19-January-2017

4. Are you the corresponding author? Yes No Corresponding Author's Name
Philipp S. Wild

5. Manuscript Title
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Are there any relevant conflicts of interest? Yes No

If yes, please fill out the appropriate information below. If you have more than one entity press the "ADD" button to add a row. Excess rows can be removed by pressing the "X" button.

Name of Institution/Company	Grant?	Personal Fees?	Non-Financial Support?	Other?	Comments
Pfizer, New York, USA	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Servier Research Group, Paris, France	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Leo Laboratories, Copenhagen, Denmark	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Barts, London School of Medicine and Dentistry	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Centre Nationale de Genotypage, Paris	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Irish Research Council	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

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Name of Entity	Grant?	Personal Fees?	Non-Financial Support?	Other?	Comments
ROX Medical	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Research Support
Bayer	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Research Support
Devenish Nutrition	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Research Support
A. Menarini Pharmaceuticals Ireland	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Conference Attendance Support

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. Stanton reports grants from Pfizer, New York, USA, grants from Servier Research Group, Paris, France, grants from Leo Laboratories, Copenhagen, Denmark, grants from Barts, London School of Medicine and Dentistry, grants from Centre Nationale de Genotypage, Paris, grants from Irish Research Council, during the conduct of the study; other from ROX Medical, other from Bayer, other from Devenish Nutrition, other from A. Menarini Pharmaceuticals Ireland, outside the submitted work; .

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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) Alexander	2. Surname (Last Name) Teumer	3. Date 19-January-2017
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Philipp Wild
5. Manuscript Title New Genetic variants for Cardiac Structure and Function – The EchoGen Consortium		
6. Manuscript Identifying Number (if you know it) 84840-JCI-CMED-RV-3		

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

Section 3. Relevant financial activities outside the submitted work.

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Are there any relevant conflicts of interest? 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. Teumer 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)
Albrecht

2. Surname (Last Name)
Schmidt

3. Date
19-January-2017

4. Are you the corresponding author?

Yes No

Corresponding Author's Name
Philipp S. Wild

5. Manuscript Title
New Genetic variants for Cardiac Structure and Function – The EchoGen Consortium

6. Manuscript Identifying Number (if you know it)
84840-JCI-CMED-RV-3

Section 2. The Work Under Consideration for Publication

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Are there any relevant conflicts of interest? Yes No

Section 4. Intellectual Property -- Patents & Copyrights

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Dr. Schmidt 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) Albert Vernon	2. Surname (Last Name) Smith	3. Date 08-January-2017
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Philipp Wild
5. Manuscript Title New Genetic variants for Cardiac Structure and Function – The EchoGen Consortium		
6. Manuscript Identifying Number (if you know it) 84840-JCI-CMED-RV-3		

Section 2. The Work Under Consideration for Publication

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Are there any relevant conflicts of interest? 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. Smith 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) Albert	2. Surname (Last Name) Hofman	3. Date 19-January-2017
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Philipp S. Wild
5. Manuscript Title New Genetic variants for Cardiac Structure and Function – The EchoGen Consortium		
6. Manuscript Identifying Number (if you know it) 84840-JCI-CMED-RV-3		

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Are there any relevant conflicts of interest? Yes No

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Dr. Hofman 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) Alanna	2. Surname (Last Name) Morrison	3. Date 19-January-2017
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Philipp S. Wild
5. Manuscript Title New Genetic variants for Cardiac Structure and Function – The EchoGen Consortium		
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