

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.

Identifying information.

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4. Intellectual Property.

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

Volz 1



Section 1. Identifying Inform	mation	
Given Name (First Name) Stefan	2. Surname (Last Name) Volz	3. Date 13-May-2016
4. Are you the corresponding author?	✓ Yes No	
5. Manuscript Title Abnormal spikes in ECG caused by Ga	stral Neurostimulator	
6. Manuscript Identifying Number (if you l L16-0002	know it)	
Section 2. The Work Under 0	Consideration for Publication	
	eive payment or services from a third party (government, ag but not limited to grants, data monitoring board, study rest?	
Section 3. Relevant financia	l activities outside the submitted work.	
of compensation) with entities as desc	s in the table to indicate whether you have financial ribed in the instructions. Use one line for each entity eport relationships that were present during the 36 rest?	y; add as many lines as you need by
Section 4. Intellectual Prope	erty Patents & Copyrights	
Do you have any patents, whether pla	nned, pending or issued, broadly relevant to the wo	rk? Yes 🗸 No

Volz 2



Section 5.	Deletionships not servered above				
	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. Volz has nothi	ing to disclose.				

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



Section 1. Identifying Inform	nation			
1. Given Name (First Name) Sebastian	2. Surname (Last Name Reif	·)	3. Date 14-May-2016	
4. Are you the corresponding author?	☐ Yes ✓ No	Correspondii Maximilian	ng Author's Name Tiller	
5. Manuscript Title Abnormal spikes in ECG caused by Gas	tral Neurostimulator.			
6. Manuscript Identifying Number (if you k L16-0002	now it)			
Section 2. The Work Under C	onsideration for Pub	olication		
Did you or your institution at any time rece any aspect of the submitted work (including statistical analysis, etc.)? Are there any relevant conflicts of inter	g but not limited to grants	, data monitoring k		
Section 3. Relevant financial	activities outside th	e submitted w	ork.	
Place a check in the appropriate boxes of compensation) with entities as descrelicking the "Add +" box. You should re Are there any relevant conflicts of interesting the specific out the appropriate information.	ribed in the instructions. port relationships that we rest? Yes No	. Use one line for were present du	each entity; add as many lines as	s you need by
Name of Entity	Grant? Personal Fees?	Non-Financial Support?	Other? Comments	
Medtronic Inc.			✓ Honoraria for lectures	
Biotronik SE & Co. KG			✓ Clinical research	
Medtronic Inc.			✓ Clinical research	
Sorin			✓ Clinical research	
Zoll GmbH			✓ Clinical research	
Boston Scientific GmbH			✓ Fellowship support	
Sorin			✓ Honoraria	
Biotronik SE & Co. KG			✓ Travel expenses	



Name of Entity	Grant?	Personal Fees?	Non-Financial Support?	Other?	Comments	
Boston Scientific GmbH				✓	Travel expenses	
Medtronic Inc.				✓	Travel expenses	
Section 4. Intellectual Propert	y Pate	ents & Co _l	pyrights			
Do you have any patents, whether plann	ed, pend	ing or issue	ed, broadly releva	nt to the	work? Yes V No	
Section 5. Relationships not o	overed	above				
Are there other relationships or activities potentially influencing, what you wrote i Yes, the following relationships/conditions/cir No other relationships/conditions/cir At the time of manuscript acceptance, jo On occasion, journals may ask authors to	in the sub litions/cir cumstan ournals wi	rcumstance ces that pro	rk? es are present (expessent a potential or ers to confirm and	olain belo conflict o	ow): f interest sary, update their disclosure stateme	∙nts.
Section 6. Disclosure Stateme	nt					
Based on the above disclosures, this forn below.	n will auto	omatically (generate a disclo	sure state	ment, which will appear in the box	
Dr. Reif reports other from Medtronic Inc other from Zoll GmbH, other from Bosto Boston Scientific GmbH, other from Med	n Scienti	fic GmbH, c	other from Sorin,	other fror		



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Gundling 1



Section 1. Identifying Inform	mation	
1. Given Name (First Name) Felix	2. Surname (Last Name) Gundling	3. Date 06-August-2016
4. Are you the corresponding author?	✓ Yes No	
5. Manuscript Title Abnormal spikes in ECG caused by Gas	stral Neurostimulator.	
6. Manuscript Identifying Number (if you k	know it)	
Section 2. The Work Under (Consideration for Publication	
	eive payment or services from a third party (governming but not limited to grants, data monitoring board, something board, so	
Section 3. Relevant financia	l activities outside the submitted work.	
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Do you have any patents, whether plan	nned, pending or issued, broadly relevant to the	e work? ☐ Yes ✓ No

Gundling 2



Section 5.	
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Yes, the follo	owing relationships/conditions/circumstances are present (explain below):
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none	

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patent

Maximilian 1



Section 1.	Identifying Inform	ation		
1. Given Name (Fi Tiller	rst Name)	2. Surname (Last Na Maximilian	nme)	3. Date 12-May-2016
4. Are you the cor	responding author?	✓ Yes No		
5. Manuscript Title Abnormal spikes	e in ECG caused by Gast	ral Neurostimulator		
6. Manuscript Ider	ntifying Number (if you kn	ow it)		
Section 2.	The Work Under Co	onsideration for I	Publication	
any aspect of the s statistical analysis,	stitution at any time recei ubmitted work (including	ive payment or service but not limited to gra		commercial, private foundation, etc.) for design, manuscript preparation,
Section 3.	Relevant financial	activities outside	the submitted work.	
of compensation clicking the "Add) with entities as descri	bed in the instruction ort relationships th	ons. Use one line for each entity	relationships (regardless of amount r; add as many lines as you need by is months prior to publication.
Section 4.	Intellectual Proper	tv - Datants & Co	nnyriahte	
			., .	
Do you have any	patents, whether plan	ned, pending or issu	red, broadly relevant to the wor	rk?

Maximilian 2



Section 5. Relationships not severed above
Relationships not covered above
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Maximilian 3



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Schepp 1



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1. Given Name (Fii Wolfgang	rst Name)	2. Surname (Last Name) Schepp	3. Date 09-September-2016
4. Are you the cor	responding author?	Yes ✓ No	Corresponding Author's Name Maximilian Tiller
5. Manuscript Title Neuromodulatio		n Affect the Electrocardiog	ram: A Case Report
6. Manuscript Ider L16-0002	ntifying Number (if you kr	now it)	
Section 2.	The Work Under Co	onsideration for Public	cation
any aspect of the s statistical analysis,	ubmitted work (including	g but not limited to grants, da	a third party (government, commercial, private foundation, etc.) for ta monitoring board, study design, manuscript preparation,
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of compensation clicking the "Add	the appropriate boxes i) with entities as descri	in the table to indicate who ibed in the instructions. Us port relationships that wer	ether you have financial relationships (regardless of amount se one line for each entity; add as many lines as you need by the present during the 36 months prior to publication.
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Schepp 2



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