

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.

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

Fox 1



Section 1. Identifying Inform	nation	
1. Given Name (First Name) Sharon	2. Surname (Last Name) Fox	3. Date 27-July-2020
4. Are you the corresponding author?	✓ Yes No	
5. Manuscript Title Cardiac Endotheliitis and Multisystem	nflammatory Syndrome after Covid-19"	
6. Manuscript Identifying Number (if you k L20-0882	now it)	
Section 2. The Work Under C	onsideration for Publication	
	eive payment or services from a third party (government, cong but not limited to grants, data monitoring board, study donest?	
Section 3. Relevant financial	activities outside the submitted work.	
of compensation) with entities as descri	in the table to indicate whether you have financial relibed in the instructions. Use one line for each entity; port relationships that were present during the 36 sest?	add as many lines as you need by
Section 4. Intellectual Prope	rty Patents & Copyrights	
Do you have any patents, whether plan	nned, pending or issued, broadly relevant to the work	?

Fox 2



Section 5.			
	Relationships not covered above		
	relationships or activities that readers could perceive to have influenced, or that give the appearance of encing, what you wrote in the submitted work?		
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	anuscript acceptance, journals will ask authors to confirm and, if necessary, update their disclosure statements rnals may ask authors to disclose further information about reported relationships.		
Section 6.			
Section 6.	Disclosure Statement		
Based on the abo below.	ove disclosures, this form will automatically generate a disclosure statement, which will appear in the box		
Dr. Fox has noth	ing to disclose.		

Evaluation and Feedback

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Fox 3



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Da Silva Lameira 1



Section 1.	Identifying Inform	nation	
1. Given Name (Fii Fernanda	rst Name)	2. Surname (Last Name) Da Silva Lameira	3. Date 27-July-2020
4. Are you the cor	responding author?	Yes ✓ No	Corresponding Author's Name Sharon E Fox
5. Manuscript Title Cardiac Endothe		nflammatory Syndrome af	ter Covid-19
6. Manuscript Ider	ntifying Number (if you kr	now it)	
Section 2.	The Work Under C	onsideration for Public	ation
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	ı) with entities as descr	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 e present during the 36 months prior to publication.
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Section 4.	Intellectual Prope	rty Patents & Copyric	phts
Do you have any	patents, whether plan	ned, pending or issued, br	oadly relevant to the work? Yes V No

Da Silva Lameira 2



Section 5. Relationships not sovered 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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Based on the above disclosures, this form will automatically generate a disclosure statement, which will appear in the box below.
Dr. Da Silva Lameira has nothing to disclose.

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Rinker 1



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1. Given Name (Fi Elizabeth	. , ,	2. Surname (Last Name) Rinker	3. Date 27-July-2020
4. Are you the cor	responding author?	Yes ✓ No	Corresponding Author's Name Sharon Fox
5. Manuscript Title Cardiac Endothe		nflammatory Syndrome af	ter Covid-19
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Do you have any			oadly relevant to the work? Yes V No

Rinker 2



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Vander Heide 1



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1. Given Name (First Name) Richard	2. Surname (Last Name) Vander Heide	3. Date 27-July-2020
4. Are you the corresponding author?	✓ Yes No	
5. Manuscript Title Cardiac Endotheliitis and Multisystem I	nflammatory Syndrome after Covid-19"	
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Vander Heide 2



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