Authors Conflict of Interest Disclosure Questionnaire



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Redefining Resistant Hypertension: A

Comparison of Cardiovascular Risk **Title** Associated with the 2018 versus 2008

American Heart Association Definitions

for Resistant Hypertension

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Instructions for Authors Conflict of Interest Disclosure

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 includes the questions from the International Committee of Medical Journal Editors (ICMJE) Form for Disclosure of Potential Conflicts of Interest and is divided into 6 subsections. Each author should submit a separate form and is responsible for the accuracy and completeness of the submitted information.

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

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

Section 1. Identifying Information

Author: Matthew Gurka

Date: December 17, 2019

□ I am the Corresponding Author

Manuscript Title: Redefining Resistant Hypertension: A Comparison of Cardiovascular Risk Associated with the 2018 versus 2008 American Heart Association Definitions for Resistant

Manuscript Identifying Number: CIRCCQO/2019/005979R2

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

At the time of manuscript acceptance, the journal will ask authors to confirm and, if necessary, update their disclosure statements. On occasion, the journal may ask authors to disclose further information about reported relationships.

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Based on the above disclosures, this form will automatically generate a disclosure statement in the box below after you click the "Generate Disclosure Statement" button. Any subsequent changes will also update the disclosure statement automatically after clicking the "Submit" button.

Dr Gurka has nothing to disclose.

By completing this form, I confirm that the information reported is accurate. I understand that, where appropriate, this information may be disclosed publicly. I further understand that the American Heart Association, Inc., reserves the right to decline to publish my work if the Organization believes a significant conflict of interest exists.

Matthew Gurka

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