Date: 22 June, 2021

Your Name: Fernando de la Guia Galipienso

Manuscript Title: Cardiac Magnetic Resonance in the Diagnosis of the Unusually Detected Acute Myocarditis in the

Young People: A Case Report

Manuscript number (if known): ACR-21-24-R1

In the interest of transparency, we ask you to disclose all relationships/activities/interests listed below that are related to the content of your manuscript. "Related" means any relation with for-profit or not-for-profit third parties whose interests may be affected by the content of the manuscript. Disclosure represents a commitment to transparency and does not necessarily indicate a bias. If you are in doubt about whether to list a relationship/activity/interest, it is preferable that you do so.

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		Name all entities with whom you have this relationship or indicate none (add rows as needed) Time frame: Since the initial	Specifications/Comments (e.g., if payments were made to you or to your institution)
1	All support for the present manuscript (e.g., funding, provision of study materials, medical writing, article processing charges, etc.) No time limit for this item.	X None	
		Time frame: past	36 months
2	Grants or contracts from any entity (if not indicated in item #1 above).	X None	
3	Royalties or licenses	X None	
4	Consulting fees	X None	

5	Payment or honoraria for	X None	
	lectures, presentations,		
	speakers bureaus,		
	manuscript writing or		
	educational events		
6	Payment for expert	X None	
	testimony		
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7	Support for attending	X None	
	meetings and/or travel		
	g,		
8	Patents planned, issued or	X None	
	pending		
9	Participation on a Data	X None	
	Safety Monitoring Board or		
	Advisory Board		
10	Leadership or fiduciary role	X None	
	in other board, society,		
	committee or advocacy		
	group, paid or unpaid		
11	Stock or stock options	X None	
12	Receipt of equipment,	X None	
	materials, drugs, medical		
	writing, gifts or other		
	services		
13	Other financial or non-	X None	
	financial interests		
Ple	ease summarize the above c	onflict of interest in the fo	lowing box:
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Date: June 22, 2021

Your Name: Pilar García González

Manuscript Title: Cardiac Magnetic Resonance in the Diagnosis of the Unusually Detected Acute Myocarditis in the

Young People: A Case Report

Manuscript number (if known): ACR-21-24-R1

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3	Grants or contracts from any entity (if not indicated in item #1 above). Royalties or licenses	X None X None	36 months
4	Consulting fees	X None	

5	Payment or honoraria for lectures, presentations,	X None		
	speakers bureaus,			_
	manuscript writing or			
	educational events			
6	Payment for expert	X None		
	testimony			
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7	Support for attending meetings and/or travel	X None		
8	Patents planned, issued or	X None		
	pending			
9	Participation on a Data	X None		
	Safety Monitoring Board or			
	Advisory Board			
10	Leadership or fiduciary role	X None		
	in other board, society,			
	committee or advocacy			
11	group, paid or unpaid Stock or stock options	X None		_
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12	Receipt of equipment,	X None		
	materials, drugs, medical			
	writing, gifts or other services			
13	Other financial or non-	X None		
	financial interests			
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		ICMJE DISCLOSURE	FORM		
Date: 22	th / note	1201			
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Myocarditis in Manuscript nur	the Young People mber (if known):	ACR-21-24-R1			
that are		we ask you to disclose nanuscript. "Related" n			
parties whose	interests may be	affected by the conten	t of the manuscript. [Disclosure repr	resents a

relationship/activity/interest, it is preferable that you do so.

The following questions apply to the author's relationships/activities/interests as they relate to the

to transparency and does not necessarily indicate a bias. If you are in doubt about whether to list a

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to the epidemiology of hypertension, you should declare all relationships with manufacturers of antihypertensive medication, even if that medication is not mentioned in the manuscript.

In item #1 below, report all support for the work reported in this manuscript without time limit. For all other items,

the time frame for disclosure is the past 36 months.

		Name all entities with whom you have this relationship or indicate none (add rows as needed)	Specifications/Comments (e.g., if payments were mad institution)
		Time frame: Since the initial planning of	the work
1	All support for the present manuscript (e.g., funding, provision of study materials, medical writing, article processing charges, etc.) No time limit for this item.	None	
		Time frame: past 36 months	
2	Grants or contracts from any entity (if not indicated in item #1 above).	None 1	

	Royalties or licenses	None	
		∧/ None	
	Consulting fees	X	
	Payment or honoraria for	None	
	lectures, presentations,		
	speakers bureaus,		
	manuscript writing or		
	educational events		
5	Payment for expert	None	
	testimony		
7	Support for attending	XNone	
,	Support for attending meetings and/or travel		
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		∧ None	
8	Patents planned, issued or	X None	
	pending		
9	Participation on a Data Safety Monitoring Board or	None	
	Advisory Board		
10		<u></u> X None	
	in other board, society,		
	committee or advocacy		
	group, paid or unpaid		
11	Stock or stock options	A/None	
12	Receipt of equipment,	<u></u> None	
	Receipt of equipment, materials, drugs, medical		
	writing, gifts or other		
	services		
13	Other financial or non- financial interests	None	
	financial interests		
1000000			

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

2

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

certify that I have answered every question and have not altered the wording of any of the

Date: June 22, 2021

Your Name: Aurelio Quesada Dorador

Manuscript Title: Cardiac Magnetic Resonance in the Diagnosis of the Unusually Detected Acute Myocarditis in the

Young People: A Case Report

Manuscript number (if known): ACR-21-24-R1

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4	Consulting fees	X None	

5	Payment or honoraria for lectures, presentations,	X None		
	speakers bureaus,			_
	manuscript writing or			
	educational events			
6	Payment for expert	X None		
	testimony			
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7	Support for attending meetings and/or travel	X None		
8	Patents planned, issued or	X None		
	pending			
9	Participation on a Data	X None		
	Safety Monitoring Board or			
	Advisory Board			
10	Leadership or fiduciary role	X None		
	in other board, society,			
	committee or advocacy			
11	group, paid or unpaid Stock or stock options	X None		_
	Stock of Stock options	XIVOIIC		
12	Receipt of equipment,	X None		
	materials, drugs, medical			
	writing, gifts or other services			
13	Other financial or non-	X None		
	financial interests			
Ple	ase summarize the above co	inflict of interest in the fo	llowing hox:	
			notting work	
- 1				

Date: 22 June 2021

Your Name: Christoph Meyer-Josten

Manuscript Title: Cardiac Magnetic Resonance in the Diagnosis of the Unusually Detected Acute Myocarditis in the

Young People: A Case Report

Manuscript number (if known): ACR-21-24-R1

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3	Royalties or licenses	X None	
4	Consulting fees	X None	

5	Payment or honoraria for	X None			
	lectures, presentations,				
	speakers bureaus,				
	manuscript writing or				
	educational events				
6	Payment for expert	X None			
	testimony				
7	Support for attending	X None			
	meetings and/or travel				
8	Patents planned, issued or	X None			
	pending				
9	Participation on a Data	X None			
	Safety Monitoring Board or				
	Advisory Board				
10	Leadership or fiduciary role	X None			
	in other board, society,				
	committee or advocacy				
	group, paid or unpaid				
11	Stock or stock options	X None			
12	Receipt of equipment,	X None			
	materials, drugs, medical				
	writing, gifts or other				
	services				
13	Other financial or non-	X None			
	financial interests				
6 1					
PIE	ease summarize the above c	onflict of interest in the following box:			
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Date: June 22, 2021 Your Name: Carl J. Lavie

Manuscript Title: Cardiac Magnetic Resonance in the Diagnosis of the Unusually Detected Acute Myocarditis in the

Young People: A Case Report

Manuscript number (if known): ACR-21-24-R1

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4	Consulting fees	X None	

5	Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or educational events	X None		
6	Payment for expert testimony	X None		
7	Support for attending meetings and/or travel	X None		
8	Patents planned, issued or pending	X None		
9	Participation on a Data Safety Monitoring Board or Advisory Board	X None		
10	Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid	X None		
11	Stock or stock options	X None		
12	Receipt of equipment, materials, drugs, medical writing, gifts or other services	X None		
13	Other financial or non- financial interests	X None		
Ple	Please summarize the above conflict of interest in the following box:			

Date: June 22, 2021

Your Name: Daniel P. Morin

Manuscript Title: Cardiac Magnetic Resonance in the Diagnosis of the Unusually Detected Acute Myocarditis in the

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	provision of study materials,				
	medical writing, article				
	processing charges, etc.)				
	No time limit for this item.				
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2	Grants or contracts from	X None			
	any entity (if not indicated				
	in item #1 above).				
3	Royalties or licenses	X None			
4	Consulting fees	X None			

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5	Payment or honoraria for	X None		
	lectures, presentations, speakers bureaus,			_
	manuscript writing or			
	educational events			
6	Payment for expert	X None		
	testimony			
_				
7	Support for attending meetings and/or travel	X None		
8	Patents planned, issued or	X None		
	pending			
9	Participation on a Data	X None		_
	Safety Monitoring Board or	X None		-
	Advisory Board			Т
10	Leadership or fiduciary role	X None		
	in other board, society,			
	committee or advocacy			
11	group, paid or unpaid Stock or stock options	X None		
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12	Receipt of equipment,	X None		
	materials, drugs, medical			
	writing, gifts or other services			
13	Other financial or non-	X None		
	financial interests			
Dle -			allauda a haur	
Piea	ase summarize the above co	milici of interest in the fo	Dirowing box:	

Date: June 22, 2021

Your Name: Fabian Sanchis-Gomar

Manuscript Title: Cardiac Magnetic Resonance in the Diagnosis of the Unusually Detected Acute Myocarditis in the

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5	Payment or honoraria for	X None		
	lectures, presentations, speakers bureaus,			_
	manuscript writing or			
	educational events			
6	Payment for expert	X None		
	testimony			
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7	Support for attending meetings and/or travel	X None		
8	Patents planned, issued or	X None		
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9	Participation on a Data	X None		_
	Safety Monitoring Board or	X None		-
	Advisory Board			Т
10	Leadership or fiduciary role	X None		
	in other board, society,			
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11	group, paid or unpaid Stock or stock options	X None		
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Piea	ase summarize the above co	milici of interest in the fo	Dirowing box:	