

#### **Instructions**

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patent

Bilbao 1



| Section 1. Identifying Info                            | rmation   |   |
|--|---|---|
| 1. Given Name (First Name)<br>Jorge                    | 2. Surname (Last Name)<br>Bilbao  | 3. Date<br>24-February-2017   |
| 4. Are you the corresponding author?                   | Yes No  |   |
| 5. Manuscript Title<br>Consenso de Enfermedad Tromboer | nbólica Crónica, Profilaxis y Situaciones   | Especiales  |
| 6. Manuscript Identifying Number (if you               | ı know it)  |   |
|  |   |   |
| Section 2. The Work Under                              | r Consideration for Publication   |   |
| Did you or your institution at any time re             | eceive payment or services from a third party<br>ling but not limited to grants, data monitorin | y (government, commercial, private foundation, etc.) for<br>ng board, study design, manuscript preparation,                                     |
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| of compensation) with entities as de-                  | scribed in the instructions. Use one line report relationships that were <b>present</b>         | nave financial relationships (regardless of amount for each entity; add as many lines as you need by during the 36 months prior to publication. |
| Section 4. Intellectual Prop                           | perty Patents & Copyrights  |   |
| Do you have any patents, whether pl                    | lanned, pending or issued, broadly relev  | vant to the work? ☐ Yes 🗸 No  |

Bilbao 2



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|--|---|--|--|
| 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. Bilbao has no  | othing to disclose.   |  |  |

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Bilbao 3



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Bluro 1



| Section 1. Identifying In                            | formation   |   |
|--|---|---|
| 1. Given Name (First Name)<br>Ignacio                | 2. Surname (Last Name)<br>Bluro   | 3. Date<br>24-February-2017   |
| 4. Are you the corresponding author?                 | Yes No  |   |
| 5. Manuscript Title<br>Consenso de Enfermedad Trombo | embólica Crónica, Profilaxis y Situaciones  | Especiales  |
| 6. Manuscript Identifying Number (if y               | ou know it)   |   |
|  |   |   |
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| Do you have any patents, whether                     | planned, pending or issued, broadly relev   | ant to the work? ☐ Yes ✓ No   |

Bluro 2



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| Dr. Bluro has not  | thing to disclose.  |  |  |

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Bonorino 1



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|--|--|--|
| 1. Given Name (First Name)<br>José                   | 2. Surname (Last Name)<br>Bonorino   | 3. Date<br>24-February-2017  |
| 4. Are you the corresponding author?                 | Yes No   |  |
| 5. Manuscript Title<br>Consenso de Enfermedad Trombo | pembólica Crónica, Profilaxis y Situaciones E  | speciales  |
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Bonorino 2



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Cáneva 1



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|---|---|---|
| 1. Given Name (First Name)<br>Jorge                 | 2. Surname (Last Name)<br>Cáneva  | 3. Date<br>24-February-2017   |
| 4. Are you the corresponding autho                  | r? Yes No   |   |
| 5. Manuscript Title<br>Consenso de Enfermedad Tromb | ocembólica Crónica, Profilaxis y Situaciones E  | speciales   |
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Cáneva 2



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Casey 1



| Section 1. Identifying Inform                           | nation   |                                  |
|---|--|----------------------------------|
| Given Name (First Name)  Marcelo                        | 2. Surname (Last Name)<br>Casey  | 3. Date<br>24-February-2017      |
| 4. Are you the corresponding author?                    | Yes No   |                                  |
| 5. Manuscript Title<br>Consenso de Enfermedad Tromboemb | ólica Crónica, Profilaxis y Situaciones Especiales   |                                  |
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Casey 2



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Ceresetto 1



| Section 1. Identify                             | ring Information   |  |
|---|--|--|
| 1. Given Name (First Name)<br>José              | 2. Surname (Last Name)<br>Ceresetto  | 3. Date<br>24-February-2017                      |
| 4. Are you the corresponding                    | author? Yes No   |  |
| 5. Manuscript Title<br>Consenso de Enfermedad T | Fromboembólica Crónica, Profilaxis y Situaciones E   | speciales  |
| 6. Manuscript Identifying Nun                   | nber (if you know it)  |  |
|   |  |  |
| Section 2. The Wor                              | rk Under Consideration for Publication   |  |
| Did you or your institution <b>at a</b>         | any time receive payment or services from a third party ork (including but not limited to grants, data monitoring  |  |
| Section 3. Relevan                              | t financial activities outside the submitted   | work.  |
| of compensation) with enti-                     | oriate boxes in the table to indicate whether you hat ties as described in the instructions. Use one line for a should report relationships that were <b>present d</b> flicts of interest? | or each entity; add as many lines as you need by |
| Section 4. Intellect                            | tual Property Patents & Copyrights   |  |
|   | hether planned, pending or issued, broadly releva  | ant to the work? Yes V No                        |

Ceresetto 2



| · -  |   |  |  |
|--|---|--|--|
| 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 follo   | wing relationships/conditions/circumstances are present (explain below):                                    |  |  |
| No other rela  | No other relationships/conditions/circumstances that present a potential conflict of interest               |  |  |
| At the time of manuscript acceptance, journals will ask authors to confirm and, if necessary, update their disclosure statements On occasion, journals may ask authors to disclose further information about reported relationships. |   |  |  |
| Section 6.   | Disclosure Statement  |  |  |
| Based on the abo<br>below.   | ove disclosures, this form will automatically generate a disclosure statement, which will appear in the box |  |  |
| Dr. Ceresetto ha   | s nothing to disclose.  |  |  |

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Ceresetto 3



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Jaimovich 1



| Section 1. Identi   | ifying Information  |                             |
|---|---|-----------------------------|
| 1. Given Name (First Name)<br>Guillermo   | ) 2. Surname (Last Name)<br>Jaimovich   | 3. Date<br>24-February-2017 |
| 4. Are you the corresponding  | ng author? Yes No   |                             |
| 5. Manuscript Title<br>Consenso de Enfermedad   | d Tromboembólica Crónica, Profilaxis y Situaciones I  | Especiales                  |
| 6. Manuscript Identifying N   | lumber (if you know it)   |                             |
|   |   |                             |
| Section 2. The W  | ork Under Consideration for Publication   |                             |
| Did you or your institution <b>a</b>  | at any time receive payment or services from a third party<br>I work (including but not limited to grants, data monitorin |                             |
| Section 3. Releva   | ant financial activities outside the submitted  | l 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 <b>present during the 36 months prior to publication</b> .  Are there any relevant conflicts of interest? Yes Vo |   |                             |
| Section 4. Intelle  | ectual Property Patents & Copyrights  |                             |
| Do you have any patents   | , whether planned, pending or issued, broadly relev   | ant to the work? ☐ Yes ✓ No |

Jaimovich 2



| Section 5.  | Relationships not covered above   |  |  |
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|   | 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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Lescano 1



| Section 1.   | dentifying Informa   | tion   |                               |   |
|--|--|--|-------------------------------|---|
| 1. Given Name (First I<br>Adrián   | •  | 2. Surname (Last Name)<br>Lescano                              |                               | 3. Date<br>24-February-2017   |
| 4. Are you the corresp   | oonding author?  | Yes No   |                               |   |
| 5. Manuscript Title<br>Consenso de Enferr                                      | nedad Tromboembóli   | ica Crónica, Profilaxis y Si                                   | tuaciones Especiales          |   |
| 6. Manuscript Identify   | ying Number (if you knov                                     | w it)  |                               |   |
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| Section 2.   | he Work Under Cor  | nsideration for Public   | ation                         |   |
| Did you or your institu<br>any aspect of the subr<br>statistical analysis, etc | ution <b>at any time</b> receive<br>mitted work (including b | e payment or services from a<br>out not limited to grants, dat | a third party (government, co | mmercial, private foundation, etc.) for<br>esign, manuscript preparation,                             |
| Section 3.   | elevant financial ac   | ctivities outside the s  | ubmitted work.                |   |
| of compensation) w<br>clicking the "Add +"                                     | vith entities as describe                                    | ed in the instructions. Use<br>ort relationships that were     | e one line for each entity; a | lationships (regardless of amount<br>add as many lines as you need by<br>nonths prior to publication. |
| Section 4.   | itellectual Property   | y Patents & Copyrig  | hts                           |   |
| Do you have any pa   | tents, whether planne  | ed, pending or issued, bro                                     | padly relevant to the work?   | ? Yes 🗸 No  |

Lescano 2



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|---|--|--|
| 1. Given Name (First Name)<br>Miguel  | 2. Surname (Last Name)<br>González   | 3. Date<br>24-February-2017  |
| 4. Are you the corresponding author   | ? Yes No   |  |
| 5. Manuscript Title<br>Consenso de Enfermedad Tromb   | oembólica Crónica, Profilaxis y Situaciones Es   | speciales  |
| 6. Manuscript Identifying Number (if  | you know it)   |  |
|   |  |  |
| Section 2. The Work Up  | der Consideration for Publication  |  |
| Did you or your institution <b>at any tin</b>   | ne receive payment or services from a third party ( cluding but not limited to grants, data monitoring | government, commercial, private foundation, etc.) for board, study design, manuscript preparation, |
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| Section 1.  | Identifying Inform  | nation   |                         |  |
|---|---|--|-------------------------|--|
| 1. Given Name (Firs<br>Nicolás  | st Name)  | 2. Surname (Last Name)<br>González   |                         | 3. Date<br>24-February-2017  |
| 4. Are you the corre  | esponding author?   | Yes No   |                         |  |
| 5. Manuscript Title<br>Consenso de Enfe                                 | ermedad Tromboemb   | ólica Crónica, Profilaxis y Situaci  | ones Especiales         |  |
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| Did you or your inst<br>any aspect of the su<br>statistical analysis, e | itution <b>at any time</b> rece<br>ibmitted work (including | ive payment or services from a third<br>but not limited to grants, data mo | party (government, con  | nmercial, private foundation, etc.) for sign, manuscript preparation,                              |
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## Identifying information.

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### 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.

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earning royalties or not **Royalties:** Funds are coming in to you or your institution due to your

patent

Spennato 1



| Section 1. Identifying Inform   | mation   |                             |
|---|--|-----------------------------|
| 1. Given Name (First Name)<br>Mario César   | 2. Surname (Last Name)<br>Spennato                   | 3. Date<br>24-February-2017 |
| 4. Are you the corresponding author?  | Yes No   |                             |
| 5. Manuscript Title<br>Consenso de Enfermedad Tromboemk   | pólica Crónica, Profilaxis y Situaciones Especiales  |                             |
| 6. Manuscript Identifying Number (if you k  | know it)   |                             |
|   |  |                             |
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| Did you or your institution <b>at any time</b> 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 Prope   | erty Patents & Copyrights                            |                             |
| Do you have any patents, whether plan   | nned, pending or issued, broadly relevant to the wor | k? ☐ Yes ✓ No               |

Spennato 2



| · -   |   |  |  |
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| Section 5.  | Relationships not covered above   |  |  |
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| No other rela   | tionships/conditions/circumstances that present a potential conflict of interest  |  |  |
| At the time of manuscript acceptance, journals will ask authors to confirm and, if necessary, update their disclosure statements. On occasion, journals may ask authors to disclose further information about reported relationships. |   |  |  |
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| Dr. Spennato ha   | s nothing to disclose.  |  |  |

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Ubaldini 1



| Section 1. Identifying                             | Information   |   |
|--|---|---|
| 1. Given Name (First Name)<br>Jorge                | 2. Surname (Last Name)<br>Ubaldini  | 3. Date<br>24-February-2017   |
| 4. Are you the corresponding auth                  | nor? Yes No   |   |
| 5. Manuscript Title<br>Consenso de Enfermedad Trom | nboembólica Crónica, Profilaxis y Situaciones Es <sub>l</sub>   | peciales  |
| 6. Manuscript Identifying Number                   | (if you know it)  |   |
|  |   |   |
| Section 2. The Work U                              | nder Consideration for Publication  |   |
| Did you or your institution <b>at any t</b>        | time receive payment or services from a third party (gincluding but not limited to grants, data monitoring  | government, commercial, private foundation, etc.) for<br>board, study design, manuscript preparation, |
| Section 3. Relevant fir                            | nancial activities outside the submitted w  | vork.   |
| of compensation) with entities                     | e boxes in the table to indicate whether you have as described in the instructions. Use one line for nould report relationships that were <b>present du</b> of interest? Yes V No | r each entity; add as many lines as you need by   |
| Section 4. Intellectual                            | Property Patents & Copyrights   |   |
| Do you have any patents, whet                      | her planned, pending or issued, broadly relevan   | nt to the work? ☐ Yes 🗸 No  |

Ubaldini 2



| Section 5.  | Relationships not covered above   |  |
|---|---|--|
|   | elationships 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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| Dr. Ubaldini has  | nothing to disclose.  |  |

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Vulcano 1



| Section 1. Identifying Info   | ormation                                  |                              |
|---|---|------------------------------|
| 1. Given Name (First Name)<br>Norberto  | 2. Surname (Last Name)<br>Vulcano         | 3. Date<br>24-February-2017  |
| 4. Are you the corresponding author?  | Yes No                                    |                              |
| 5. Manuscript Title<br>Consenso de Enfermedad Tromboe   | mbólica Crónica, Profilaxis y Situaciones | Especiales                   |
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| Section 3. Relevant finance   | ial activities outside the submitted      | d work.                      |
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| Do you have any patents, whether p  | planned, pending or issued, broadly relev | vant to the work? ☐ Yes 🗸 No |

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| · -   |   |  |
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