

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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Korolov 1



Section 1. Identifying Inform	nation	
1. Given Name (First Name) Eugenio	2. Surname (Last Name) Korolov	3. Date 10-December-2017
4. Are you the corresponding author?	✓ Yes No	
5. Manuscript TitleEl impacto de las reinternaciones en la pacientes operados de cirugía cardíaca6. Manuscript Identifying Number (if you kan a cardíaca)	a	
Section 2. The Work Under C	Consideration for Publication	
Did you or your institution at any time reco	eive payment or services from a third party (government, g but not limited to grants, data monitoring board, study	
Section 3. Relevant financial	activities outside the submitted work.	
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Section 4. Intellectual Prope	rty Patents & Copyrights	
Do you have any patents, whether plan	nned, pending or issued, broadly relevant to the wor	k? Yes V No

Korolov 2



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Lamelas 1



Section 1.	Identifying Inform	nation		
1. Given Name (Fi Pablo	rst Name)	2. Surname (Last Name) Lamelas		3. Date 10-December-2017
4. Are you the cor	responding author?	✓ Yes No		
pacientes opera		mortalidad alejada de los now it)		
Section 2.	The Work Under Co	onsideration for Public	ation	
any aspect of the s statistical analysis,	ubmitted work (including	but not limited to grants, dat		mmercial, private foundation, etc.) for esign, manuscript preparation,
Section 3.	Relevant financial	activities outside the s	ubmitted work.	
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Section 4.	Intellectual Proper	rty Patents & Copyrig	hts	
Do you have any	patents, whether plan	ned, pending or issued, bro	oadly relevant to the work?	Yes Vo

Lamelas 2



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Espinoza 1



Section 1. Id	entifying Information		
1. Given Name (First N Juan	ame) 2. Su Espir	rname (Last Name) 10Za	3. Date 10-December-2017
4. Are you the correspond	onding author?	es No	
pacientes operados	nternaciones en la mortali de cirugía cardíaca ing Number (if you know it)	dad alejada de los	
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Espinoza 2



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Vrancic 1



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1. Given Name (Fi Mariano	rst Name)	2. Surname (Last Name) Vrancic		3. Date 10-December-2017
4. Are you the cor	responding author?	✓ Yes No		
pacientes opera		mortalidad alejada de los now it)		
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Vrancic 2



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Piccinini 1



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Piccinini 2



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Camporrotondo 1



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Camporrotondo 2



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Dr. Camporroton	do has nothing to disclose.

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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.

2. The work under consideration for publication.

This section asks for information about the work that you have submitted for publication. The time frame for this reporting is that of the work itself, from the initial conception and planning to the present. The requested information is about resources that you received, either directly or indirectly (via your institution), to enable you to complete the work. Checking "No" means that you did the work without receiving any financial support from any third party -- that is, the work was supported by funds from the same institution that pays your salary and that institution did not receive third-party funds with which to pay you. If you or your institution received funds from a third party to support the work, such as a government granting agency, charitable foundation or commercial sponsor, check "Yes".

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.

Report all sources of revenue paid (or promised to be paid) directly to you or your institution on your behalf over the 36 months prior to submission of the work. This should include all monies from sources with relevance to the submitted work, not just monies from the entity that sponsored the research. Please note that your interactions with the work's sponsor that are outside the submitted work should also be listed here. If there is any question, it is usually better to disclose a relationship than not to do so.

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Definitions.

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

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Other: Anything not covered under the previous three boxes

Pending: The patent has been filed but not issued

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Licensed: The patent has been licensed to an entity, whether earning royalties or not

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

Navia 1



Section 1.	Identifying Inform	ation			
Given Name (First Name) Daniel		2. Surname (Last Name Navia	2)	3. Date 10-December-2017	
4. Are you the corresponding author?		✓ Yes No			
 5. Manuscript Title El impacto de las reinternaciones en la mortalidad alejada de los pacientes operados de cirugía cardíaca 6. Manuscript Identifying Number (if you know it) 					
Section 2.	The Work Under Co	onsideration for Pul	blication		
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Section 4.	Intellectual Proper	ty Patents & Copy	vriahts		
Do you have any			, broadly relevant to the work?	? ☐ Yes ✓ No	

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Section 6. Disclosure Statement				
Based on the above disclosures, this form will automatically generate a disclosure statement, which will appear in the box below.				
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Benzadon 1



Section 1. Identifying	ng Information				
1. Given Name (First Name) Mariano	2. Surname (Last Name) Benzadon	3. Date 10-December-2017			
4. Are you the corresponding a	uthor? Yes No				
 5. Manuscript Title El impacto de las reinternaciones en la mortalidad alejada de los pacientes operados de cirugía cardíaca 6. Manuscript Identifying Number (if you know it) 					
Section 2. The Work					
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.)? Are there any relevant conflicts of interest? Yes No					
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Section 4. Intellectu	al Property Patents & Copyrights				
Do you have any patents, whether planned, pending or issued, broadly relevant to the work? Yes Vo					

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Section 5.				
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