

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.

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earning royalties or not

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

Albina 1



Section 1. Identifying Info	ormation		
1. Given Name (First Name) Gastón	2. Surname (Last Name) Albina	3. Date 30-August-2017	
4. Are you the corresponding author?	✓ Yes No		
por catéter		acterísticas clínicas, multi-imágenes y ablación	
6. Manuscript Identifying Number (if yo	u know it)		
Section 2. The Work Under	r Consideration for Publication		
		ry (government, commercial, private foundation, etc.) for ng board, study design, manuscript preparation,	
Are there any relevant conflicts of interest?			
Section 3. Relevant finance	ial activities outside the submitte	d work.	
of compensation) with entities as de	escribed in the instructions. Use one line	have financial relationships (regardless of amount for each entity; add as many lines as you need by during the 36 months prior to publication.	
Are there any relevant conflicts of in	· <u> </u>		
Section 4. Intellectual Pro	perty Patents & Copyrights		
Do you have any patents, whether p	olanned, pending or issued, broadly rele	vant to the work? ☐ Yes 🗸 No	

Albina 2



Section 5.	
Section 5.	Relationships not covered above
	lationships or activities that readers could perceive to have influenced, or that give the appearance of ncing, what you wrote in the submitted work?
Yes, the follow	ving relationships/conditions/circumstances are present (explain below):
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Dr. Albina has not	thing to disclose.

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Caro 1



Section 1.	Identifying Inform	nation				
1. Given Name (Fi Milagros	rst Name)	2. Surname (Caro	Last Name)		3. Date 30-August-2017	
4. Are you the cor	responding author?	✓ Yes	No			
5. Manuscript Title Arritmias origina por catéter		apilares del ve	ntrículo izquierdo: ca	racterísticas clínica	as, multi-imágenes y ablación	
6. Manuscript Ide	ntifying Number (if you kr	now it)				
Section 2.	The Work Under C	onsideratio	n for Publication			
any aspect of the s statistical analysis,	submitted work (including	g but not limited			mmercial, private foundation, etc sign, manuscript preparation,	:.) for
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Place a check in of compensation clicking the "Add	n) with entities as descr	in the table to ibed in the ins port relationsh	indicate whether you tructions. Use one lin	ı have financial rel e for each entity; a	ationships (regardless of amound as many lines as you need nonths prior to publication.	
Section 4.	Intellectual Prope	rty Patont	s & Convrights			
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Do you have any	patents, whether plan	ned, pending	or issued, broadly rel	evant to the work?	Yes ✓ No	

Caro 2



Section 5.	
Section 3.	Relationships not covered above
	lationships or activities that readers could perceive to have influenced, or that give the appearance of ncing, what you wrote in the submitted work?
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Mondragón 1



Section 1.	Identifying Inform	nation		
1. Given Name (Fi	rst Name)	2. Surname Mondragó	e (Last Name) ón	3. Date 30-August-2017
4. Are you the cor	responding author?	✓ Yes	No	
por catéter		•	ventrículo izquierdo: características cli	nicas, multi-imágenes y ablación
Section 2.	The Work Under C	onsideratio	on for Publication	
any aspect of the s statistical analysis, Are there any rel	ubmitted work (including	but not limit	red to grants, data monitoring board, stud	, commercial, private foundation, etc.) for y design, manuscript preparation,
Section 3.	Relevant financial	activities c	outside the submitted work.	
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Section 4.	Intellectual Prope	rty Paten	nts & Copyrights	
Do you have any	patents, whether plan	ned, pendin	g or issued, broadly relevant to the w	ork?

Mondragón 2



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Reinoso 1



Section 1. Identifying Inform	nation			
1. Given Name (First Name) Marcelo	2. Surname (Last Name) Reinoso	3. Date 30-August-2017		
4. Are you the corresponding author?	✓ Yes No			
por catéter	apilares del ventrículo izquierdo: características clír	nicas, multi-imágenes y ablación		
6. Manuscript Identifying Number (if you k	now it)			
Section 2. The Work Under C	Consideration for Publication			
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Are there any relevant conflicts of interest?				
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of compensation) with entities as descri	in the table to indicate whether you have financial ribed in the instructions. Use one line for each entity port relationships that were present during the 3 0	y; add as many lines as you need by		
Are there any relevant conflicts of inter	· · ·			
Section 4. Intellectual Prope	rty Patents & Copyrights			
Do you have any patents, whether plar	nned, pending or issued, broadly relevant to the wo	rk? Yes 🗸 No		

Reinoso 2



Section 5.	elationships not covered above	
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Ricapito 1



Section 1. Identifying Inform	nation		
1. Given Name (First Name) María de la Paz	2. Surname (Last Name) Ricapito	3. Date 30-August-2017	
4. Are you the corresponding author?	✓ Yes No		
por catéter	apilares del ventrículo izquierdo: características clínic	as, multi-imágenes y ablación	
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Are there any relevant conflicts of interest? Yes Vo			
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Ricapito 2



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Rivera 1



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6. Manuscript Identifying Number (if you	know it)			
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.)?				
Are there any relevant conflicts of into	Are there any relevant conflicts of interest?			
Section 3. Relevant financia	al activities outside the submitted	d work.		
of compensation) with entities as des	cribed in the instructions. Use one line	have financial relationships (regardless of amount for each entity; add as many lines as you need by during the 36 months prior to publication.		
Are there any relevant conflicts of into	erest? Yes Vo			
Section 4. Intellectual Prop	erty Patents & Copyrights			
Do you have any patents, whether pla	anned, pending or issued, broadly relev	vant to the work? ☐ Yes 🗸 No		

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Section 5. Rolat	ionshine not sovered above
Relat	ionships not covered above
	hips or activities that readers could perceive to have influenced, or that give the appearance of what you wrote in the submitted work?
Yes, the following rel	ationships/conditions/circumstances are present (explain below):
✓ No other relationship	s/conditions/circumstances that present a potential conflict of interest
	t acceptance, journals will ask authors to confirm and, if necessary, update their disclosure statements by ask authors to disclose further information about reported relationships.
Section 6. Disclo	
Disclo	sure Statement
Based on the above discibelow.	osures, this form will automatically generate a disclosure statement, which will appear in the box
Dr. Rivera has nothing to	o disclose.

Evaluation and Feedback

Please visit http://www.icmje.org/cgi-bin/feedback to provide feedback on your experience with completing this form.

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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.

For grants you have received for work outside the submitted work, you should disclose support ONLY from entities that could be perceived to be affected financially by the published work, such as drug companies, or foundations supported by entities that could be perceived to have a financial stake in the outcome. Public funding sources, such as government agencies, charitable foundations or academic institutions, need not be disclosed. For example, if a government agency sponsored a study in which you have been involved and drugs were provided by a pharmaceutical company, you need only list the pharmaceutical company.

4. Intellectual Property.

This section asks about patents and copyrights, whether pending, issued, licensed and/or receiving royalties.

Relationships not covered above.

Use this section to report 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.

Definitions.

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

Grant: A grant from an entity, generally [but not always] paid to your organization

Personal Fees: Monies paid to you for services rendered, generally honoraria, royalties, or fees for consulting, lectures, speakers bureaus, expert testimony, employment, or other affiliations

Non-Financial Support: Examples include drugs/equipment supplied by the entity, travel paid by the entity, writing assistance, administrative support, etc.

Other: Anything not covered under the previous three boxes

Pending: The patent has been filed but not issued

Issued: The patent has been issued by the agency

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

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Section 1.	Identifying Information					
Given Name (First Name) Leandro		2. Surname (Last Name) Tomás		3. Date 30-August-2017		
4. Are you the corresponding author?		✓ Yes	No			
5. Manuscript Title Arritmias originadas en los músculos papilares del ventrículo izquierdo: características clínicas, multi-imágenes y ablación por catéter						
6. Manuscript Identifying Number (if you know it)						
Section 2.	The Work Under C	onsiderat	ion 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.)? Are there any relevant conflicts of interest? Yes No						
Section 3.						
	•		outside the submitt			
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 present during the 36 months prior to publication .						
Are there any relevant conflicts of interest? Yes Vo						
Section 4.	Intellectual Prope	ty Pate	nts & Copyrights			
Do you have any	patents, whether plan	ned, pendi	ng or issued, broadly rel	evant to the work?	? ☐ Yes ✓ No	

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Section 5. Polationships 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?					
Yes, the following relationships/conditions/circumstances are present (explain below):					
✓ 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 above disclosures, this form will automatically generate a disclosure statement, which will appear in the box below.					
Dr. Tomás has nothing to disclose.					

Evaluation and Feedback

Please visit http://www.icmje.org/cgi-bin/feedback to provide feedback on your experience with completing this form.

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