

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

Angel 1



Section 1.	Identifying Inform	nation		
Given Name (First Name) Adriana		2. Surname (Last N Angel	ame)	3. Date 05-February-2018
4. Are you the cor	responding author?	✓ Yes No		
5. Manuscript Title Prevención card	e iovascular en pacientes	s octononagenarios		
6. Manuscript Ide	ntifying Number (if you kr	now it)		
Section 2.	The Work Under C	onsideration 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.		4:-:4:	. 4	
Place a check in a of compensation clicking the "Add	the appropriate boxes i n) with entities as descri	in the table to indications in the table to indications in the instruction the court relationships the court relations in the court relat	ons. Use one line for eac	nancial relationships (regardless of amount the entity; add as many lines as you need by the 36 months prior to publication.
Section 4.	Intellectual Proper	rty Patents <u>& C</u> e	opyrights	
Do you have any			ued, broadly relevant to	the work? Yes V No

Angel 2



Section 5. Relationships not covered above		
Are there other relationships or activities that readers could perceive to have influenced, or that give the apper potentially influencing, what you wrote in the submitted work?	arance of	
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		
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Dr. Angel has nothing to disclose.		

Evaluation and Feedback

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Angel 3



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Calderón 1



Section 1. Identifying Inform	mation	
1. Given Name (First Name) Gustavo	2. Surname (Last Name) Calderón	3. Date 05-February-2018
4. Are you the corresponding author?	✓ Yes No	
5. Manuscript Title Prevención cardiovascular en paciente	es octononagenarios	
6. Manuscript Identifying Number (if you k	know it)	
Section 2. The Work Under (Consideration for Publication	
	eive payment or services from a third party (government, c g but not limited to grants, data monitoring board, study o rest? Yes V	
Section 3. Relevant financia	activities outside the submitted work.	
Place a check in the appropriate boxes of compensation) with entities as desc	in the table to indicate whether you have financial re ribed in the instructions. Use one line for each entity; eport relationships that were present during the 36	add as many lines as you need by
Section 4. Intellectual Prope	rty Patents & Copyrights	
Do you have any patents, whether plan	nned, pending or issued, broadly relevant to the work	x?

Calderón 2



Section 5.	
Section 5.	Relationships not covered above
	itionships or activities that readers could perceive to have influenced, or that give the appearance of ing, what you wrote in the submitted work?
Yes, the following	ng relationships/conditions/circumstances are present (explain below):
✓ No other relatio	nships/conditions/circumstances that present a potential conflict of interest
	uscript acceptance, journals will ask authors to confirm and, if necessary, update their disclosure statements als may ask authors to disclose further information about reported relationships.
Section 6. D	Pisclosure Statement
Based on the above below.	e disclosures, this form will automatically generate a disclosure statement, which will appear in the box
Dr. Calderón has no	othing to disclose.

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Dávolos 1



Section 1.	Identifying Inform	nation				
1. Given Name (Fi Ignacio	Given Name (First Name)		2. Surname (Last Name) Dávolos		3. Date 05-February-2018	
4. Are you the cor	responding author?	✓ Yes	No			
5. Manuscript Title Prevención card	e iovascular en pacientes	octononager	narios			
6. Manuscript Ide	ntifying Number (if you kr	now it)				
Section 2.	The Work Under C	onsideratio	n for Publicatior	1		
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.	Relevant financial	activities ou	utside the submi	tted 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 present during the 36 months prior to publication . Are there any relevant conflicts of interest? Yes Vo						
Section 4.	Intellectual Prope	ty Patent	s & Copyrights			
Do you have any	patents, whether plan	ned, pending	or issued, broadly	relevant to the work	? Yes 🗸 No	

Dávolos 2



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



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

patent

De Francesca 1



Section 1.	Identifying Inform	ation			
Given Name (First Name) Salvador		Surname (Last Name) De Francesca		3. Date 05-February-2018	
4. Are you the corresponding author?		✓ Yes	No		
5. Manuscript Title Prevención cardi	e iovascular en pacientes	octononager	narios		
6. Manuscript Ider	ntifying Number (if you kr	ow it)			
Section 2.	The Work Under Co	onsideratio	n for Publication		
any aspect of the s statistical analysis,	stitution at any time rece ubmitted work (including	ve payment or but not limited			mmercial, private foundation, etc.) for sign, manuscript preparation,
Section 3.	Relevant financial	activities ou	itside the submitted wo	ork.	
of compensation clicking the "Add) with entities as descri	bed in the ins port relationsh	tructions. Use one line for e	each entity; a	ationships (regardless of amount dd as many lines as you need by conths prior to publication.
Section 4.	Intellectual Proper	ty Patents	s & Copyrights		
Do you have any		<u> </u>	or issued, broadly relevant	to the work?	☐ Yes ✓ No

De Francesca 2



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Masson 1



Section 1.	Identifying Information			
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4. Are you the corresponding author?		✓ Yes No		
5. Manuscript Title Prevención card	e iovascular en pacientes	octononagenarios		
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Do you have any	patents, whether plan	ned, pending or issu	ued, broadly relevant to the worl	k? ☐ Yes ✓ No

Masson 2



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Millan 1



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any aspect of the s statistical analysis,	stitution at any time rece ubmitted work (including	ive payment or services from but not limited to grants, da	a third party (government, co	mmercial, private foundation, etc.) for esign, manuscript preparation,
Section 3.	Relevant financial	activities outside the s	submitted work.	
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