

## ICMJE Form for Disclosure of Potential Conflicts of Interest

### Instructions

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## ICMJE Form for Disclosure of Potential Conflicts of Interest

### Section 1. Identifying Information

1. Given Name (First Name)  
Alejandro

2. Surname (Last Name)  
García Escudero

3. Date  
11-December-2019

4. Are you the corresponding author?  Yes  No

Corresponding Author's Name  
Alfonsina Candiello

5. Manuscript Title  
Impacto de un sistema de evaluación de tiempos a la reperusión en infarto agudo de miocardio con elevación del ST

6. Manuscript Identifying Number (if you know it)

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Dr. García Escudero has nothing to disclose.

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## ICMJE Form for Disclosure of Potential Conflicts of Interest

### Section 1. Identifying Information

1. Given Name (First Name)

Alfonsina

2. Surname (Last Name)

Candiello

3. Date

11-December-2019

4. Are you the corresponding author?

Yes  No

5. Manuscript Title

Impacto de un sistema de evaluación de tiempos a la reperusión en infarto agudo de miocardio con elevación del ST

6. Manuscript Identifying Number (if you know it)

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Dr. Candiello has nothing to disclose.

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## ICMJE Form for Disclosure of Potential Conflicts of Interest

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1. Given Name (First Name)  
Fernando

2. Surname (Last Name)  
Cohen

3. Date  
11-December-2019

4. Are you the corresponding author?

Yes  No

Corresponding Author's Name  
Alfonsina Candiello

5. Manuscript Title

Impacto de un sistema de evaluación de tiempos a la reperusión en infarto agudo de miocardio con elevación del ST

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Dr. Cohen has nothing to disclose.

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### Section 1. Identifying Information

1. Given Name (First Name)

Ignacio

2. Surname (Last Name)

Cigalini

3. Date

11-December-2019

4. Are you the corresponding author?

Yes

No

Corresponding Author's Name

Alfonsina Candiello

5. Manuscript Title

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Dr. Cigalini has nothing to disclose.

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Rubén

2. Surname (Last Name)

Kevorkian

3. Date

11-December-2019

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Yes  No

Corresponding Author's Name

Alfonsina Candiello

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Dr. Kevorkian has nothing to disclose.

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## ICMJE Form for Disclosure of Potential Conflicts of Interest

### Section 1. Identifying Information

1. Given Name (First Name) Leandro	2. Surname (Last Name) Lasave	3. Date 11-December-2019
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Alfonsina Candiello
5. Manuscript Title Impacto de un sistema de evaluación de tiempos a la reperusión en infarto agudo de miocardio con elevación del ST		
6. Manuscript Identifying Number (if you know it)		

### Section 2. The Work Under Consideration for Publication

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Are there any relevant conflicts of interest?  Yes  No

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Are there any relevant conflicts of interest?  Yes  No

### Section 4. Intellectual Property -- Patents & Copyrights

Do you have any patents, whether planned, pending or issued, broadly relevant to the work?  Yes  No

## ICMJE Form for Disclosure of Potential Conflicts of Interest

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Dr. Lasave has nothing to disclose.

### Evaluation and Feedback

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## ICMJE Form for Disclosure of Potential Conflicts of Interest

### Section 1. Identifying Information

1. Given Name (First Name) Guillermo	2. Surname (Last Name) Mulinaris	3. Date 11-December-2019
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Alfonsina Candiello
5. Manuscript Title Impacto de un sistema de evaluación de tiempos a la reperusión en infarto agudo de miocardio con elevación del ST		
6. Manuscript Identifying Number (if you know it)		

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Are there any relevant conflicts of interest?  Yes  No

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Are there any relevant conflicts of interest?  Yes  No

### Section 4. Intellectual Property -- Patents & Copyrights

Do you have any patents, whether planned, pending or issued, broadly relevant to the work?  Yes  No

## ICMJE Form for Disclosure of Potential Conflicts of Interest

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Dr. Mulinaris has nothing to disclose.

### Evaluation and Feedback

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## ICMJE Form for Disclosure of Potential Conflicts of Interest

### Section 1. Identifying Information

1. Given Name (First Name) Lorena	2. Surname (Last Name) Villagra	3. Date 11-December-2019
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Alfonsina Candiello
5. Manuscript Title Impacto de un sistema de evaluación de tiempos a la reperusión en infarto agudo de miocardio con elevación del ST		
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Are there any relevant conflicts of interest?  Yes  No

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Are there any relevant conflicts of interest?  Yes  No

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Do you have any patents, whether planned, pending or issued, broadly relevant to the work?  Yes  No

## ICMJE Form for Disclosure of Potential Conflicts of Interest

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Dr. Villagra has nothing to disclose.

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## ICMJE Form for Disclosure of Potential Conflicts of Interest

### Section 1. Identifying Information

1. Given Name (First Name)  
Pedro

2. Surname (Last Name)  
Zangronis

3. Date  
11-December-2019

4. Are you the corresponding author?

Yes  No

Corresponding Author's Name  
Alfonsina Candiello

5. Manuscript Title

Impacto de un sistema de evaluación de tiempos a la reperusión en infarto agudo de miocardio con elevación del ST

6. Manuscript Identifying Number (if you know it)

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Are there any relevant conflicts of interest?  Yes  No

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Dr. Zangronis has nothing to disclose.

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## ICMJE Form for Disclosure of Potential Conflicts of Interest

### Section 1. Identifying Information

1. Given Name (First Name)

Cesar R.

2. Surname (Last Name)

Zoni

3. Date

11-December-2019

4. Are you the corresponding author?

Yes

No

Corresponding Author's Name

Alfonsina Candiello

5. Manuscript Title

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