

ICMJE Form for Disclosure of Potential Conflicts of Interest

Instructions

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Section 1. Identifying Information

1. Given Name (First Name)

Inés

2. Surname (Last Name)

Abella

3. Date

17-January-2020

4. Are you the corresponding author?

Yes No

5. Manuscript Title

Cardiopulmonary Exercise Testing: Reference Values in Adolescent and Adult Patients with Congenital Heart Diseases

6. Manuscript Identifying Number (if you know it)

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Dr. Abella has nothing to disclose.

Evaluation and Feedback

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1. Given Name (First Name) Claudio G.	2. Surname (Last Name) Moros	3. Date 17-January-2020
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Inés Abella
5. Manuscript Title Cardiopulmonary Exercise Testing: Reference Values in Adolescent and Adult Patients with Congenital Heart Diseases		
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1. Given Name (First Name) María del C.	2. Surname (Last Name) Grippò	3. Date 17-January-2020
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