

ICMJE Form for Disclosure of Potential Conflicts of Interest

Instructions

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

ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)
Martín F.

2. Surname (Last Name)
Parodi

3. Date
02-November-2020

4. Are you the corresponding author? Yes No

5. Manuscript Title
Insuficiencia cardíaca por fístula arteriovenosa ilíaca externa post-ablación con láser de la vena safena

6. Manuscript Identifying Number (if you know it)

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Dr. Parodi has nothing to disclose.

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Section 1. Identifying Information

1. Given Name (First Name) Mariano	2. Surname (Last Name) Norese	3. Date 02-November-2020
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Martín F. Parodi
5. Manuscript Title Insuficiencia cardíaca por fístula arteriovenosa ilíaca externa post-ablación con láser de la vena safena		
6. Manuscript Identifying Number (if you know it)		

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Section 1. Identifying Information

1. Given Name (First Name) Sergio	2. Surname (Last Name) Ferreya Fernández	3. Date 02-November-2020
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Martín F. Parodi
5. Manuscript Title Insuficiencia cardíaca por fístula arteriovenosa ilíaca externa post-ablación con láser de la vena safena		
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Dr. Ferreyra Fernández has nothing to disclose.

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1. Given Name (First Name) Yamil	2. Surname (Last Name) Ponce	3. Date 02-November-2020
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Martín F. Parodi
5. Manuscript Title Insuficiencia cardíaca por fístula arteriovenosa ilíaca externa post-ablación con láser de la vena safena		
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José

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Escalante

3. Date

02-November-2020

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Yes No

Corresponding Author's Name

Martín F. Parodi

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ICMJE Form for Disclosure of Potential Conflicts of Interest

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1. Given Name (First Name) Gustavo	2. Surname (Last Name) Andersen	3. Date 02-November-2020
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Martín F. Parodi
5. Manuscript Title Insuficiencia cardíaca por fístula arteriovenosa ilíaca externa post-ablación con láser de la vena safena		
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Dr. Andersen has nothing to disclose.

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