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)  Guillermo
2. Surname (Last Name)  Bartoli
3. Date  09-March-2021

4. Are you the corresponding author?  Yes  No

5. Manuscript Title  Aneurismas coronarios gigantes y síndrome coronario agudo

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

Section 4. Intellectual Property -- Patents & Copyrights

Do you have any patents, whether planned, pending or issued, broadly relevant to the work?  Yes  No
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Dr. Bartoli 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)  Camila
2. Surname (Last Name)  Chort
3. Date  09-March-2021
4. Are you the corresponding author?  Yes  No

5. Manuscript Title  Aneurismas coronarios gigantes y síndrome coronario agudo

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. Chort 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)  
   Ramiro

2. Surname (Last Name)  
   Ayala

3. Date  
   09-March-2021

4. Are you the corresponding author?  
   Yes  
   No

5. Manuscript Title  
   Aneurismas coronarios gigantes y síndrome coronario agudo

6. Manuscript Identifying Number (if you know it)

Section 2. The Work Under Consideration for Publication

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   No

Section 4. Intellectual Property -- Patents & Copyrights

Do you have any patents, whether planned, pending or issued, broadly relevant to the work?  
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Dr. Ayala has nothing to disclose.

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Section 1. Identifying Information

1. Given Name (First Name) Kenneth
2. Surname (Last Name) Schmidt
3. Date 09-March-2021
4. Are you the corresponding author? Yes No
5. Manuscript Title Aneurismas coronarios gigantes y síndrome coronario agudo
6. Manuscript Identifying Number (if you know it)

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Section 1. Identifying Information

1. Given Name (First Name)  
   Jorge

2. Surname (Last Name)  
   Montecinos

3. Date  
   09-March-2021

4. Are you the corresponding author?  
   ☑ Yes  ☐ No

5. Manuscript Title  
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Dr. Mantilla has nothing to disclose.

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**Section 1.** Identifying Information

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   Augusto

2. Surname (Last Name)  
   Lavalle Cobo

3. Date  
   09-March-2021

4. Are you the corresponding author?  
   ☑ Yes   ☐ No

5. Manuscript Title
   Aneurismas coronarios gigantes y síndrome coronario agudo

6. Manuscript Identifying Number (if you know it)

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**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 interest?  
   ☑ Yes   ☐ No

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**Section 3.** Relevant financial activities outside the submitted work.

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Are there any relevant conflicts of interest?  
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Do you have any patents, whether planned, pending or issued, broadly relevant to the work?  
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Dr. Mantilla has nothing to disclose.

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