



ICMJE Form for Disclosure of Potential Conflicts of Interest

Instructions

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4. Intellectual Property.

This section asks about patents and copyrights, whether pending, issued, licensed and/or receiving royalties.

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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)
Jorge

2. Surname (Last Name)
Thierer

3. Date
17-November-2021

4. Are you the corresponding author? Yes No

5. Manuscript Title
Insuficiencia cardíaca crónica en Argentina. OFFICE IC AR, un registro conjunto de la Sociedad Argentina de Cardiología y de la Federación Argentina de Cardiología

6. Manuscript Identifying Number (if you know it)

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Dr. Thierer 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)

Eduardo R.

2. Surname (Last Name)

Perna

3. Date

17-November-2021

4. Are you the corresponding author?

Yes No

5. Manuscript Title

Insuficiencia cardíaca crónica en Argentina. OFFICE IC AR, un registro conjunto de la Sociedad Argentina de Cardiología y de la Federación Argentina de Cardiología

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Section 1. Identifying Information

1. Given Name (First Name)

Javier

2. Surname (Last Name)

Marino

3. Date

17-November-2021

4. Are you the corresponding author?

Yes No

5. Manuscript Title

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Dr. Marino has nothing to disclose.

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Section 1. Identifying Information

1. Given Name (First Name)

María Lorena

2. Surname (Last Name)

Coronel

3. Date

17-November-2021

4. Are you the corresponding author?

Yes No

5. Manuscript Title

Insuficiencia cardíaca crónica en Argentina. OFFICE IC AR, un registro conjunto de la Sociedad Argentina de Cardiología y de la Federación Argentina de Cardiología

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Section 1. Identifying Information

1. Given Name (First Name)

José Luis

2. Surname (Last Name)

Barisani

3. Date

17-November-2021

4. Are you the corresponding author?

Yes No

5. Manuscript Title

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1. Given Name (First Name)

Daniela

2. Surname (Last Name)

García Brasca

3. Date

17-November-2021

4. Are you the corresponding author?

Yes No

5. Manuscript Title

Insuficiencia cardíaca crónica en Argentina. OFFICE IC AR, un registro conjunto de la Sociedad Argentina de Cardiología y de la Federación Argentina de Cardiología

6. Manuscript Identifying Number (if you know it)

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Section 4. Intellectual Property -- Patents & Copyrights

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1. Given Name (First Name)

Paula

2. Surname (Last Name)

Pérez Terns

3. Date

17-November-2021

4. Are you the corresponding author?

Yes No

5. Manuscript Title

Insuficiencia cardíaca crónica en Argentina. OFFICE IC AR, un registro conjunto de la Sociedad Argentina de Cardiología y de la Federación Argentina de Cardiología

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1. Given Name (First Name)

Juan Pablo

2. Surname (Last Name)

Cimbaro Canella

3. Date

17-November-2021

4. Are you the corresponding author?

Yes No

5. Manuscript Title

Insuficiencia cardíaca crónica en Argentina. OFFICE IC AR, un registro conjunto de la Sociedad Argentina de Cardiología y de la Federación Argentina de Cardiología

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Section 1. Identifying Information

1. Given Name (First Name)

Stella Maris

2. Surname (Last Name)

Pereiro González

3. Date

17-November-2021

4. Are you the corresponding author?

Yes No

5. Manuscript Title

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