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Section 1. Identifying Information

1. Given Name (First Name)  Miguel
2. Surname (Last Name)  Allo
3. Date  17-November-2021
4. Are you the corresponding author?  Yes  No

5. Manuscript Title
Efectos cardioprotectores de implantes subcutáneos de liberación crónica de carvedilol en ratas espontáneamente-hipertensas
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Dr. Bin has nothing to disclose.

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Section 1. Identifying Information

1. Given Name (First Name)  
   Yanina

2. Surname (Last Name)  
   Santander Plantamura

3. Date  
   17-November-2021

4. Are you the corresponding author?  
   Yes ☑  No

5. Manuscript Title  
   Efectos cardioprotectores de implantes subcutáneos de liberación crónica de carvedilol en ratas espontáneamente-hipertensas

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Dr. Santander Plantamura has nothing to disclose.

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1. Given Name (First Name)  
   Ezequiel

2. Surname (Last Name)  
   Bernabeu

3. Date  
   17-November-2021

4. Are you the corresponding author?  
   ✔ Yes  □ No

5. Manuscript Title  
   Efectos cardioprotectores de implantes subcutáneos de liberación crónica de carvedilol en ratas espontáneamente-hipertensas

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<thead>
<tr>
<th>1. Given Name (First Name)</th>
<th>2. Surname (Last Name)</th>
<th>3. Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>Eliana</td>
<td>Bin</td>
<td>17-November-2021</td>
</tr>
</tbody>
</table>

4. Are you the corresponding author?  
   - Yes ✔
   - No  

5. Manuscript Title  
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1. Given Name (First Name)  Eliana
2. Surname (Last Name)  Bin
3. Date  17-November-2021
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**Section 1. Identifying Information**

1. Given Name (First Name)  
   Andrea  
2. Surname (Last Name)  
   Carranza  
3. Date  
   17-November-2021  
4. Are you the corresponding author?  
   ✔ Yes  
   No  
5. Manuscript Title  
   Efectos cardioprotectores de implantes subcutáneos de liberación crónica de carvedilol en ratas espontáneamente-hipertensas  
6. Manuscript Identifying Number (if you know it)

**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

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

Place a check in the appropriate boxes in the table to indicate whether you have financial relationships (regardless of amount of compensation) with entities as described in the instructions. Use one line for each entity; add as many lines as you need by clicking the "Add +" box. You should report relationships that were present during the 36 months prior to publication.

**Are there any relevant conflicts of interest?**  
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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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   No
## Section 5. Relationships not covered above

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Dr. Carranza has nothing to disclose.

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1. Identifying information.

2. The work under consideration for publication.

This section asks for information about the work that you have submitted for publication. The time frame for this reporting is that of the work itself, from the initial conception and planning to the present. The requested information is about resources that you received, either directly or indirectly (via your institution), to enable you to complete the work. Checking “No” means that you did the work without receiving any financial support from any third party – that is, the work was supported by funds from the same institution that pays your salary and that institution did not receive third-party funds with which to pay you. If you or your institution received funds from a third party to support the work, such as a government granting agency, charitable foundation or commercial sponsor, check “Yes”.

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For grants you have received for work outside the submitted work, you should disclose support ONLY from entities that could be perceived to be affected financially by the published work, such as drug companies, or foundations supported by entities that could be perceived to have a financial stake in the outcome. Public funding sources, such as government agencies, charitable foundations or academic institutions, need not be disclosed. For example, if a government agency sponsored a study in which you have been involved and drugs were provided by a pharmaceutical company, you need only list the pharmaceutical company.


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Section 1. Identifying Information

1. Given Name (First Name)  Diego
2. Surname (Last Name)  Chiapetta
3. Date  17-November-2021
4. Are you the corresponding author?  Yes  No

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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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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1. **Given Name (First Name)**
   - Christian

2. **Surname (Last Name)**
   - Höcht

3. **Date**
   - 17-November-2021

4. Are you the corresponding author?  
   - Yes ✔  
   - No

5. **Manuscript Title**
   - Efectos cardioprotectores de implantes subcutáneos de liberación crónica de carvedilol en ratas espontáneamente-hipertensas

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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   - Yes  
   - No ✔

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Do you have any patents, whether planned, pending or issued, broadly relevant to the work?  
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