

ICMJE Form for Disclosure of Potential Conflicts of Interest

Instructions

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4. Intellectual Property.

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)
Leonardo

2. Surname (Last Name)
Seoane

3. Date
10-December-2018

4. Are you the corresponding author? Yes No

5. Manuscript Title
Proyecto de mejora de calidad para reducir errores de prescripción en pacientes internados por patologías cardiovasculares

6. Manuscript Identifying Number (if you know it)

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Dr. Seoane has nothing to disclose.

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Section 1. Identifying Information

1. Given Name (First Name)
Mariano

2. Surname (Last Name)
Benzadón

3. Date
14-March-2017

4. Are you the corresponding author? Yes No

5. Manuscript Title
Proyecto de mejora de calidad para reducir errores de prescripción en pacientes internados por patologías cardiovasculares

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Dr. Benzadón has nothing to disclose.

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Section 1. Identifying Information

1. Given Name (First Name)
Gustavo

2. Surname (Last Name)
Daquarti

3. Date
14-March-2017

4. Are you the corresponding author? Yes No

5. Manuscript Title
Proyecto de mejora de calidad para reducir errores de prescripción
en pacientes internados por patologías cardiovasculares

6. Manuscript Identifying Number (if you know it)

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Section 1. Identifying Information

1. Given Name (First Name)
Soledad

2. Surname (Last Name)
Mitrione

3. Date
14-March-2017

4. Are you the corresponding author? Yes No

5. Manuscript Title
Proyecto de mejora de calidad para reducir errores de prescripción en pacientes internados por patologías cardiovasculares

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Section 1. Identifying Information

1. Given Name (First Name)
Nicolás

2. Surname (Last Name)
Vecchio

3. Date
14-March-2017

4. Are you the corresponding author? Yes No

5. Manuscript Title
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1. Given Name (First Name)
Clara

2. Surname (Last Name)
Ametrano

3. Date
14-March-2017

4. Are you the corresponding author? Yes No

5. Manuscript Title
Proyecto de mejora de calidad para reducir errores de prescripción
en pacientes internados por patologías cardiovasculares

6. Manuscript Identifying Number (if you know it)

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Are there any relevant conflicts of interest? Yes No

Section 4. Intellectual Property -- Patents & Copyrights

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1. Given Name (First Name)

Juan

2. Surname (Last Name)

Furmento

3. Date

14-March-2017

4. Are you the corresponding author?

Yes No

5. Manuscript Title

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1. Given Name (First Name)
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2. Surname (Last Name)
Conde

3. Date
14-March-2017

4. Are you the corresponding author? Yes No

5. Manuscript Title
Proyecto de mejora de calidad para reducir errores de prescripción en pacientes internados por patologías cardiovasculares

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Section 1. Identifying Information

1. Given Name (First Name)
Alberto

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Alves de Lima

3. Date
14-March-2017

4. Are you the corresponding author? Yes No

5. Manuscript Title
Proyecto de mejora de calidad para reducir errores de prescripción en pacientes internados por patologías cardiovasculares

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