

## 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) Daniel J.	2. Surname (Last Name) Abriata	3. Date 30-August-2017
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Matías Calandrelli
5. Manuscript Title Incidencia anual y letalidad del infarto agudo de miocardio en la Ciudad de San Carlos de Bariloche. Estudio REGIBAR		
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. Abriata has nothing to disclose.

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## ICMJE Form for Disclosure of Potential Conflicts of Interest

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1. Given Name (First Name) Antonio	2. Surname (Last Name) Bazán	3. Date 30-August-2017
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Matías Calandrelli
5. Manuscript Title Incidencia anual y letalidad del infarto agudo de miocardio en la Ciudad de San Carlos de Bariloche. Estudio REGIBAR		
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### Section 1. Identifying Information

1. Given Name (First Name)  
Jorge

2. Surname (Last Name)  
Bocián

3. Date  
30-August-2017

4. Are you the corresponding author?

Yes  No

Corresponding Author's Name  
Matías Calandrelli

5. Manuscript Title

Incidencia anual y letalidad del infarto agudo de miocardio en la Ciudad de San Carlos de Bariloche. Estudio REGIBAR

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1. Given Name (First Name)  
Matías E.

2. Surname (Last Name)  
Calandrelli

3. Date  
30-August-2017

4. Are you the corresponding author?  Yes  No

5. Manuscript Title  
Incidencia anual y letalidad del infarto agudo de miocardio en la Ciudad de San Carlos de Bariloche. Estudio REGIBAR

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Mario

2. Surname (Last Name)  
Caminos

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Corresponding Author's Name  
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## ICMJE Form for Disclosure of Potential Conflicts of Interest

### Section 1. Identifying Information

1. Given Name (First Name)  
Jorge

2. Surname (Last Name)  
Grilli

3. Date  
30-August-2017

4. Are you the corresponding author?  Yes  No

Corresponding Author's Name  
Matías Calandrelli

5. Manuscript Title  
Incidencia anual y letalidad del infarto agudo de miocardio en la Ciudad de San Carlos de Bariloche. Estudio REGIBAR

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

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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

## ICMJE Form for Disclosure of Potential Conflicts of Interest

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### Section 6. Disclosure Statement

Based on the above disclosures, this form will automatically generate a disclosure statement, which will appear in the box below.

Dr. Grilli has nothing to disclose.

### Evaluation and Feedback

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## ICMJE Form for Disclosure of Potential Conflicts of Interest

### Section 1. Identifying Information

1. Given Name (First Name) Marisa	2. Surname (Last Name) Parola	3. Date 30-August-2017
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Matías Calandrelli
5. Manuscript Title Incidencia anual y letalidad del infarto agudo de miocardio en la Ciudad de San Carlos de Bariloche. Estudio REGIBAR		
6. Manuscript Identifying Number (if you know it) <hr/>		

### Section 2. The Work Under Consideration for Publication

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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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Dr. Parola 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)  
María E.

2. Surname (Last Name)  
Saavedra

3. Date  
30-August-2017

4. Are you the corresponding author?  Yes  No

Corresponding Author's Name  
Matías Calandrelli

5. Manuscript Title  
Incidencia anual y letalidad del infarto agudo de miocardio en la Ciudad de San Carlos de Bariloche. Estudio REGIBAR

6. Manuscript Identifying Number (if you know it)

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## ICMJE Form for Disclosure of Potential Conflicts of Interest

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Dr. Saavedra 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) Mariano	2. Surname (Last Name) Trevisan	3. Date 30-August-2017
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Matías Calandrelli
5. Manuscript Title Incidencia anual y letalidad del infarto agudo de miocardio en la Ciudad de San Carlos de Bariloche. Estudio REGIBAR		
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Are there any relevant conflicts of interest?  Yes  No

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Are there any relevant conflicts of interest?  Yes  No

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Dr. Trevisan 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)  
María E.

2. Surname (Last Name)  
Zgaib

3. Date  
30-August-2017

4. Are you the corresponding author?

Yes  No

Corresponding Author's Name  
Matías Calandrelli

5. Manuscript Title

Incidencia anual y letalidad del infarto agudo de miocardio en la Ciudad de San Carlos de Bariloche. Estudio REGIBAR

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Dr. Zgaib has nothing to disclose.

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