ICMJE Form for Disclosure of Potential Conflicts of Interest

Instructions

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1. Identifying information.
2. The work under consideration for publication.
   
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3. Relevant financial activities outside the submitted work.
   
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**Royalties:** Funds are coming in to you or your institution due to your patent
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Section 1. Identifying Information

1. Given Name (First Name)  José
2. Surname (Last Name)  Picco
3. Date  16-April-2019
4. Are you the corresponding author?  Yes  No

5. Manuscript Title  Cardiac Fatigue in Ultra-Marathon Runners Measured with Novel Techniques in Echocardiography
6. Manuscript Identifying Number (if you know it)

Section 2. The Work Under Consideration for Publication

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Dr. Picco has nothing to disclose.

Evaluation and Feedback

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Section 1. Identifying Information

1. Given Name (First Name)  Sebastián
2. Surname (Last Name)  Wolff
3. Date  16-April-2019
4. Are you the corresponding author?  ☑ No  Corresponding Author’s Name  José Picco

5. Manuscript Title  Cardiac Fatigue in Ultra-Marathon Runners Measured with Novel Techniques in Echocardiography
6. Manuscript Identifying Number (if you know it)

Section 2. The Work Under Consideration for Publication

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Dr. Wolff has nothing to disclose.

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Section 1. Identifying Information

1. Given Name (First Name)  Emanuel
2. Surname (Last Name)  González Davila
3. Date  16-April-2019
4. Are you the corresponding author?  Yes  No  Corresponding Author’s Name  José Picco
5. Manuscript Title  Cardiac Fatigue in Ultra-Marathon Runners Measured with Novel Techniques in Echocardiography
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Dr. González Davila has nothing to disclose.

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1. Given Name (First Name)  
   David

2. Surname (Last Name)  
   Wolff

3. Date  
   16-April-2019

4. Are you the corresponding author?  
   ☑ No  
   Corresponding Author’s Name  
   José Picco

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