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)  
   Zuilma

2. Surname (Last Name)  
   Vásquez Ortiz

3. Date  
   16-April-2019

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

5. Manuscript Title  
   Left Atrial Function by Speckle Tracking in Liver Cirrhosis. A Crosssectional Study

6. Manuscript Identifying Number (if you know it)

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Dr. Vásquez Ortiz has nothing to disclose.

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Rendón Bravo

1
ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)  
   Verónica

2. Surname (Last Name)  
   Rendón Bravo

3. Date  
   16-April-2019

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

5. Manuscript Title  
   Left Atrial Function by Speckle Tracking in Liver Cirrhosis. A Crosssectional Study

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Dr. Rendón Bravo has nothing to disclose.

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Pablo

2. Surname (Last Name)  
Reyes Hernández

3. Date  
16-April-2019

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<tbody>
<tr>
<td>Jorge</td>
<td>Osequera Moguel</td>
<td>16-April-2019</td>
</tr>
</tbody>
</table>

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