

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) Antonio	2. Surname (Last Name) Loforte	3. Date 04-April-2020
4. Are you the corresponding author? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Corresponding Author's Name Maria Benedetto
5. Manuscript Title Heart failure: role and point of view of the anesthetist		
6. Manuscript Identifying Number (if you know it) CDT-2020-HFYO-14(CDT-20-339)		

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Are there any relevant conflicts of interest? ☐ Yes ☒ No

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Dr. Loforte 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) Georgiana Luisa	2. Surname (Last Name) Baca	3. Date 21-April-2020
4. Are you the corresponding author? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Corresponding Author's Name Maria Benedetto
5. Manuscript Title Heart failure: role and point of view of cardiac intensivist		
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. Baca has nothing to disclose.

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Section 1. Identifying Information

1. Given Name (First Name)
Massimo

2. Surname (Last Name)
Baiocchi

3. Date
21-April-2020

4. Are you the corresponding author?

☐ Yes ☒ No

Corresponding Author's Name
Maria Benedetto

5. Manuscript Title
Heart failure: role and point of view of cardiac intensivist

6. Manuscript Identifying Number (if you know it)

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Section 1. Identifying Information

1. Given Name (First Name)
Maria

2. Surname (Last Name)
Benedetto

3. Date
21-April-2020

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

5. Manuscript Title
Heart failure: role and point of view of cardiac intensivist

6. Manuscript Identifying Number (if you know it)

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1. Given Name (First Name) Ludovica	2. Surname (Last Name) Nardozi	3. Date 21-April-2020
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