

## ICMJE DISCLOSURE FORM

**Date:** 01/10/2023  
**Your Name:** Trossero Romina Elizabeth  
**Manuscript Title:** **Impacto de un Heart Team en pacientes con estenosis aórtica candidatos a reemplazo percutáneo**  
**Manuscript Number (if known):** http://dx.doi.org/10.7775/rac.es.v91.i4.20646

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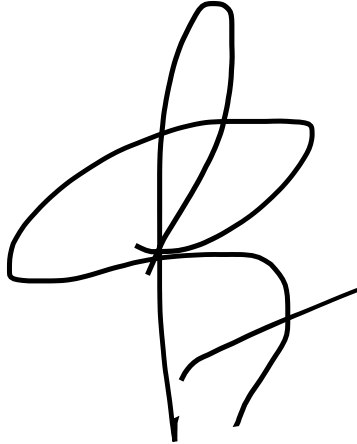
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6	Payment for expert testimony	<input checked="" type="checkbox"/> None	
7	Support for attending meetings and/or travel	<input checked="" type="checkbox"/> None	
8	Patents planned, issued or pending	<input checked="" type="checkbox"/> None	
9	Participation on a Data Safety Monitoring Board or Advisory Board	<input checked="" type="checkbox"/> None	
10	Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid	<input checked="" type="checkbox"/> None	
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Please place an "X" next to the following statement to indicate your agreement:

I certify that I have answered every question and have not altered the wording of any of the questions on this form.



## ICMJE DISCLOSURE FORM

**Date:** 17/07/2023  
**Your Name:** Marcelo Trivi  
**Manuscript Title:** **Impacto de un Heart Team en pacientes con estenosis aórtica candidatos a reemplazo percutáneo**  
**Manuscript Number (if known):** http://dx.doi.org/10.7775/rac.es.v91.i4.20646

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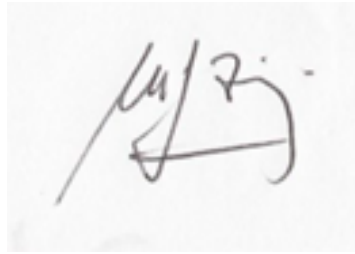
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Dr. Marcelo Trivi  
DNI 13481198

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**Date:** 17/07/2023  
**Your Name:** Ricardo E Ronderos  
**Manuscript Title:** **Impacto de un Heart Team en pacientes con estenosis aórtica candidatos a reemplazo percutáneo**  
**Manuscript Number (if known):** http://dx.doi.org/10.7775/rac.es.v91.i4.20646

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Prof Dr Ricardo E Ronderos MEFAC FACC FASE 14/10/2023

## ICMJE DISCLOSURE FORM

**Date:** 26/09/2023  
**Your Name:** Ruth Henquin  
**Manuscript Title:** **Impacto de un Heart Team en pacientes con estenosis aórtica candidatos a reemplazo percutáneo**  
**Manuscript Number (if known):** http://dx.doi.org/10.7775/rac.es.v91.i4.20646

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