ICMJE Form for Disclosure of Potential Conflicts of Interest

Instructions

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1. Identifying information.

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Section 1. Identifying Information

1. Given Name (First Name)  
Gaetano
2. Surname (Last Name)  
Ruocco
3. Date  
02-April-2020
4. Are you the corresponding author?  
Yes ✔ No

5. Manuscript Title  
Pulmonary Arterial Hypertension and Heart Failure with preserved Ejection Fraction: are they so discordant? Points of convergence and divergence
6. Manuscript Identifying Number (if you know it)  
CDT-19-405

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Section 6. Disclosure Statement

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Dr. Ruocco has nothing to disclose.

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<table>
<thead>
<tr>
<th>1. Given Name (First Name)</th>
<th>Antonello</th>
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</thead>
<tbody>
<tr>
<td>2. Surname (Last Name)</td>
<td>Gavazzi</td>
</tr>
<tr>
<td>3. Date</td>
<td>02-April-2020</td>
</tr>
</tbody>
</table>

4. Are you the corresponding author? [ ] Yes [x] No

Corresponding Author’s Name: Gaetano Ruocco

5. Manuscript Title
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1. Given Name (First Name)  
   Stefano

2. Surname (Last Name)  
   Gonnelli

3. Date  
   02-April-2020

4. Are you the corresponding author?  
   ☐ Yes  ✔ No  
   Corresponding Author’s Name  
   Gaetano Ruocco

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1. Given Name (First Name)  
   Alberto

2. Surname (Last Name)  
   Palazzuoli

3. Date  
   02-April-2020

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   Yes ☐  No ☑

   Corresponding Author’s Name  
   Gaetano Ruocco

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