ICMJE Form for Disclosure of Potential Conflicts of Interest

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Section 1. Identifying Information

1. Given Name (FirstName)  Juan
2. Surname (LastName)  Meca Aguirrezabalaga
3. Date  28/03/2020
4. Are you the corresponding author?  ☑ Yes  ☐ No

5. Manuscript Title
Pulmonary regurgitation after repaired Tetralogy of Fallot: surgical versus percutaneous treatment

6. Manuscript Identifying Number (if you know it)
ATM-2019-SHD-02

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### Section 1. Identifying Information

1. Given Name (FirstName)  
   Jacobo

2. Surname (LastName)  
   Silva Guisasola

3. Date  
   28/03/2020

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

5. Manuscript Title
   **Pulmonary regurgitation after repaired Tetralogy of Fallot: surgical versus percutaneous treatment**

6. Manuscript Identifying Number (if you know it)
   ATM-2019-SHD-02

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1. Given Name (FirstName)
   Rocío

2. Surname (LastName)
   Díaz Méndez

3. Date
   28/03/2020

4. Are you the corresponding author?
   □ Yes  ✗ No

5. Manuscript Title
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1. Given Name (FirstName)  
   Alain

2. Surname (LastName)  
   Escalera Veizaga

3. Date  
   28/03/2020

4. Are you the corresponding author?  
   Yes  No

5. Manuscript Title  
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6. Manuscript Identifying Number (if you know it)  
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1. Given Name (FirstName)  
   Daniel  

2. Surname (LastName)  
   Hernández-Vaquero Panizo  

3. Date  
   28/03/2020  

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

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