

## ICMJE Form for Disclosure of Potential Conflicts of Interest

### Instructions

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#### 1. Identifying information.

#### 2. The work under consideration for publication.

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#### 3. Relevant financial activities outside the submitted work.

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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)  
Nicolas

2. Surname (Last Name)  
Pavez

3. Date  
05-April-2020

4. Are you the corresponding author?

Yes  No

Corresponding Author's Name  
Castro R

5. Manuscript Title  
Hypoxia-related parameters during septic shock resuscitation: Pathophysiological determinants and potential clinical implications.

6. Manuscript Identifying Number (if you know it)  
ATM-2020-HDM-20(ATM-20-2048)

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Are there any relevant conflicts of interest?  Yes  No

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Do you have any patents, whether planned, pending or issued, broadly relevant to the work?  Yes  No

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Dr. Pavez 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)  
Eduardo

2. Surname (Last Name)  
Kattan

3. Date  
05-April-2020

4. Are you the corresponding author?

Yes  No

Corresponding Author's Name  
Castro R

5. Manuscript Title  
Hypoxia-related parameters during septic shock resuscitation: Pathophysiological determinants and potential clinical implications.

6. Manuscript Identifying Number (if you know it)  
ATM-2020-HDM-20(ATM-20-2048)

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Dr. Kattan 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)  
Magdalena

2. Surname (Last Name)  
Vera

3. Date  
03-April-2020

4. Are you the corresponding author?

Yes  No

Corresponding Author's Name  
Castro R.

5. Manuscript Title  
Hypoxia-related parameters during septic shock resuscitation: Pathophysiological determinants and potential clinical implications.

6. Manuscript Identifying Number (if you know it)  
ATM-2020-HDM-20(ATM-20-2048)

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Dr. Vera has nothing to disclose.

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1. Given Name (First Name)  
GIORGIO

2. Surname (Last Name)  
FERRI

3. Date  
04-April-2020

4. Are you the corresponding author?

Yes  No

Corresponding Author's Name  
Castro R

5. Manuscript Title  
Hypoxia-related parameters during septic shock resuscitation: Pathophysiological determinants and potential clinical implications.

6. Manuscript Identifying Number (if you know it)  
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Dr. FERRI has nothing to disclose.

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1. Given Name (First Name)  
Emilio Daniel

2. Surname (Last Name)  
Valenzuela

3. Date  
05-April-2020

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Yes  No

Corresponding Author's Name  
Castro R

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Dr. Valenzuela has nothing to disclose.

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This section asks about patents and copyrights, whether pending, issued, licensed and/or receiving royalties.

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## ICMJE Form for Disclosure of Potential Conflicts of Interest

### Section 1. Identifying Information

1. Given Name (First Name) Leyla	2. Surname (Last Name) Alegría	3. Date 06-April-2020
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name R Castro
5. Manuscript Title Hypoxia-related parameters during septic shock resuscitation: Pathophysiological determinants and potential clinical implications.		
6. Manuscript Identifying Number (if you know it) ATM-2020-HDM-20(ATM-20-2048)		

### Section 2. The Work Under Consideration for Publication

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Are there any relevant conflicts of interest?  Yes  No

### Section 3. Relevant financial activities outside the submitted work.

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Are there any relevant conflicts of interest?  Yes  No

### Section 4. Intellectual Property -- Patents & Copyrights

Do you have any patents, whether planned, pending or issued, broadly relevant to the work?  Yes  No

## ICMJE Form for Disclosure of Potential Conflicts of Interest

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### Section 5. Relationships not covered above

Are there other relationships or activities that readers could perceive to have influenced, or that give the appearance of potentially influencing, what you wrote in the submitted work?

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### Section 6. Disclosure Statement

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Dr. Alegría has nothing to disclose.

### Evaluation and Feedback

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## ICMJE Form for Disclosure of Potential Conflicts of Interest

### Section 1. Identifying Information

1. Given Name (First Name)  
Sebastian

2. Surname (Last Name)  
Bravo

3. Date  
05-April-2020

4. Are you the corresponding author?

Yes  No

Corresponding Author's Name  
Castro R

5. Manuscript Title  
Hypoxia-related parameters during septic shock resuscitation: Pathophysiological determinants and potential clinical implications.

6. Manuscript Identifying Number (if you know it)  
ATM-2020-HDM-20(ATM-20-2048)

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Are there any relevant conflicts of interest?  Yes  No

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Are there any relevant conflicts of interest?  Yes  No

### Section 4. Intellectual Property -- Patents & Copyrights

Do you have any patents, whether planned, pending or issued, broadly relevant to the work?  Yes  No

## ICMJE Form for Disclosure of Potential Conflicts of Interest

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Dr. Bravo 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)  
Ronald

2. Surname (Last Name)  
Pairumani

3. Date  
04-April-2020

4. Are you the corresponding author?

Yes  No

Corresponding Author's Name  
Castro R

5. Manuscript Title  
Hypoxia-related parameters during septic shock resuscitation: Pathophysiological determinants and potential clinical implications.

6. Manuscript Identifying Number (if you know it)  
ATM-2020-HDM-20(ATM-20-2048)

### Section 2. The Work Under Consideration for Publication

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Are there any relevant conflicts of interest?  Yes  No

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Are there any relevant conflicts of interest?  Yes  No

### Section 4. Intellectual Property -- Patents & Copyrights

Do you have any patents, whether planned, pending or issued, broadly relevant to the work?  Yes  No

## ICMJE Form for Disclosure of Potential Conflicts of Interest

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### Section 6. Disclosure Statement

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Dr. Pairumani has nothing to disclose.

### Evaluation and Feedback

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## ICMJE Form for Disclosure of Potential Conflicts of Interest

### Section 1. Identifying Information

1. Given Name (First Name)  
César

2. Surname (Last Name)  
Santis

3. Date  
04-April-2020

4. Are you the corresponding author?

Yes  No

Corresponding Author's Name  
Castro R

5. Manuscript Title  
Hypoxia-related parameters during septic shock resuscitation: Pathophysiological determinants and potential clinical implications.

6. Manuscript Identifying Number (if you know it)  
ATM-2020-HDM-20(ATM-20-2048)

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Are there any relevant conflicts of interest?  Yes  No

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Do you have any patents, whether planned, pending or issued, broadly relevant to the work?  Yes  No

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Dr. Santis has nothing to disclose.

### Evaluation and Feedback

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## ICMJE Form for Disclosure of Potential Conflicts of Interest

### Section 1. Identifying Information

1. Given Name (First Name)  
Vanessa

2. Surname (Last Name)  
Oviedo

3. Date  
06-April-2020

4. Are you the corresponding author?

Yes  No

Corresponding Author's Name  
R Castro

5. Manuscript Title  
Hypoxia-related parameters during septic shock resuscitation: Pathophysiological determinants and potential clinical implications.

6. Manuscript Identifying Number (if you know it)  
ATM-2020-HDM-20(ATM-20-2048)

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Are there any relevant conflicts of interest?  Yes  No

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Dr. Oviedo 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)  
Dagoberto

2. Surname (Last Name)  
Soto

3. Date  
03-April-2020

4. Are you the corresponding author?

Yes  No

Corresponding Author's Name  
Castro R

5. Manuscript Title  
Hypoxia-related parameters during septic shock resuscitation: Pathophysiological determinants and potential clinical implications.

6. Manuscript Identifying Number (if you know it)  
ATM-2020-HDM-20(ATM-20-2048)

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Are there any relevant conflicts of interest?  Yes  No

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Are there any relevant conflicts of interest?  Yes  No

### Section 4. Intellectual Property -- Patents & Copyrights

Do you have any patents, whether planned, pending or issued, broadly relevant to the work?  Yes  No

## ICMJE Form for Disclosure of Potential Conflicts of Interest

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### Section 5. Relationships not covered above

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Dr. Soto has nothing to disclose.

### Evaluation and Feedback

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## ICMJE Form for Disclosure of Potential Conflicts of Interest

### Section 1. Identifying Information

1. Given Name (First Name)  
GUSTAVO

2. Surname (Last Name)  
OSPINA-TASCÓN

3. Date  
05-April-2020

4. Are you the corresponding author?

Yes  No

Corresponding Author's Name  
GLENN HERNANDEZ

5. Manuscript Title  
Hypoxia-related parameters during septic shock resuscitation: Pathophysiological determinants and potential clinical implications.

6. Manuscript Identifying Number (if you know it)  
ATM-2020-HDM-20(ATM-20-2048)

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Dr. OSPINA-TASCÓN 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)

Jan

2. Surname (Last Name)

Bakker

3. Date

04-April-2020

4. Are you the corresponding author?

Yes  No

Corresponding Author's Name

Glenn Hernandez

5. Manuscript Title

Hypoxia-related parameters during septic shock resuscitation: Pathophysiological determinants and potential clinical implications

6. Manuscript Identifying Number (if you know it)

ATM-2020-HDM-20(ATM-20-2048)

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## ICMJE Form for Disclosure of Potential Conflicts of Interest

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Dr. Bakker 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)  
Glenn

2. Surname (Last Name)  
Hernández

3. Date  
03-April-2020

4. Are you the corresponding author?

Yes  No

Corresponding Author's Name  
Castro R

5. Manuscript Title  
Hypoxia-related parameters during septic shock resuscitation: Pathophysiological determinants and potential clinical implications.

6. Manuscript Identifying Number (if you know it)  
ATM-2020-HDM-20(ATM-20-2048)

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Dr. Hernández 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)  
RICARDO

2. Surname (Last Name)  
CASTRO

3. Date  
06-April-2020

4. Are you the corresponding author?  Yes  No

5. Manuscript Title  
Hypoxia-related parameters during septic shock resuscitation: Pathophysiological determinants and potential clinical implications.

6. Manuscript Identifying Number (if you know it)  
ATM-2020-HDM-20(ATM-20-2048)

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Dr. CASTRO has nothing to disclose.

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