

ICMJE DISCLOSURE FORM

Date: 26/01/2026

Your Name: Ignacio Juaneda

Manuscript Title: Reemplazo percutáneo de válvula pulmonar en tracto de salida nativo. Técnica de implante en "un paso" con válvula balón expandible: experiencia inicial en Argentina

Manuscript Number (if known): https://doi.org/10.7775/rac.es.v93.i6.20952

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6	Payment for expert testimony	<input checked="" type="checkbox"/> None <table border="1" data-bbox="371 803 1520 903"> <tr><td> </td><td> </td></tr> <tr><td> </td><td> </td></tr> </table>							
7	Support for attending meetings and/or travel	<input checked="" type="checkbox"/> None <table border="1" data-bbox="371 1005 1520 1105"> <tr><td> </td><td> </td></tr> <tr><td> </td><td> </td></tr> </table>							
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13	Other financial or non-financial interests <input checked="" type="checkbox"/> None 	

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

Dr. IGNACIO JUANEDA
 M.P. 29475 - M.E. 13721
 CIRUGIA CARDIOPATIAS CONGENITAS

ICMJE DISCLOSURE FORM

Date: 26/01/2026

Your Name: Ernesto Juaneda

Manuscript Title: Reemplazo percutáneo de válvula pulmonar en tracto de salida nativo. Técnica de implante en "un paso" con válvula balón expandible: experiencia inicial en Argentina

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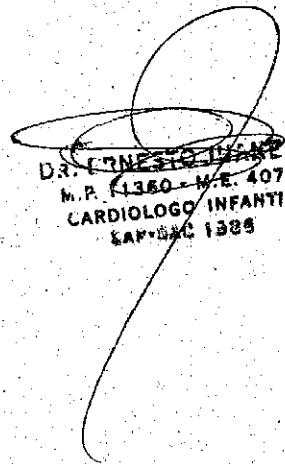
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6	Payment for expert testimony	<input checked="" type="checkbox"/> None 	
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 DR. ERNESTO JIMENEZ
 M.P. 11360 - M.E. 4076
 CARDIOLOGO INFANTIL
 SAP-DAC 1388

ICMJE DISCLOSURE FORM

Date: 26/01/2026

Your Name: Alejandro Allub

Manuscript Title: Reemplazo percutáneo de válvula pulmonar en tracto de salida nativo. Técnica de implante en "un paso" con válvula balón expandible: experiencia inicial en Argentina

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ALLIE ALEJANDRO
 Médico Cirujano - M.P. 29562-3
 Esp. Pediatría - M.P. 16956
 Cardiología Pediátrica

ICMJE DISCLOSURE FORM

Date: 26/01/2026

Your Name: Marcelo Cabrera

Manuscript Title: Reemplazo percutáneo de válvula pulmonar en tracto de salida nativo. Técnica de implante en "un paso" con válvula balón expandible: experiencia inicial en Argentina

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[Handwritten Signature]
DR. MARCELO S. GARRERA
MEDICO CIRUJANO
ESP. CARDIOLOGIA
C.P. 25614/8 M.E. 13130

ICMJE DISCLOSURE FORM

Date: 26/01/2026

Your Name: Nora Bueno

Manuscript Title: Reemplazo percutáneo de válvula pulmonar en tracto de salida nativo. Técnica de implante en "un paso" con válvula balón expandible: experiencia inicial en Argentina

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[Signature]
DR. BUENO NOBA
 Jefe de la Clínica Profesional 13369
 Cardiología Pediátrica 12394
 Pediatría 3627

ICMJE DISCLOSURE FORM

Date: 26/01/2026

Your Name: Aléjandro Contreras

Manuscript Title: Reemplazo percutáneo de válvula pulmonar en tracto de salida nativo. Técnica de implante en "un paso" con válvula balón expandible: experiencia inicial en Argentina

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Time frame: past 36 months						
2	Grants or contracts from any entity (if not indicated in item #1 above).	<input checked="" type="checkbox"/> None <table border="1" style="width: 100%; height: 40px; margin-top: 5px;"> <tr><td style="width: 50%;"></td><td style="width: 50%;"></td></tr> <tr><td style="width: 50%;"></td><td style="width: 50%;"></td></tr> </table>				
3	Royalties or licenses	<input checked="" type="checkbox"/> None <table border="1" style="width: 100%; height: 40px; margin-top: 5px;"> <tr><td style="width: 50%;"></td><td style="width: 50%;"></td></tr> <tr><td style="width: 50%;"></td><td style="width: 50%;"></td></tr> </table>				

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4	Consulting fees	<input checked="" type="checkbox"/> None <table border="1" data-bbox="363 226 1513 369"> <tr><td> </td><td> </td></tr> <tr><td> </td><td> </td></tr> <tr><td> </td><td> </td></tr> </table>							
5	Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or educational events	<input checked="" type="checkbox"/> None <table border="1" data-bbox="363 472 1513 574"> <tr><td> </td><td> </td></tr> <tr><td> </td><td> </td></tr> </table>							
6	Payment for expert testimony	<input checked="" type="checkbox"/> None <table border="1" data-bbox="363 793 1513 895"> <tr><td> </td><td> </td></tr> <tr><td> </td><td> </td></tr> </table>							
7	Support for attending meetings and/or travel	<input checked="" type="checkbox"/> None <table border="1" data-bbox="363 1003 1513 1105"> <tr><td> </td><td> </td></tr> <tr><td> </td><td> </td></tr> </table>							
8	Patents planned, issued or pending	<input checked="" type="checkbox"/> None <table border="1" data-bbox="363 1208 1513 1310"> <tr><td> </td><td> </td></tr> <tr><td> </td><td> </td></tr> </table>							
9	Participation on a Data Safety Monitoring Board or Advisory Board	<input checked="" type="checkbox"/> None <table border="1" data-bbox="363 1412 1513 1514"> <tr><td> </td><td> </td></tr> <tr><td> </td><td> </td></tr> </table>							
10	Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid	<input checked="" type="checkbox"/> None <table border="1" data-bbox="363 1616 1513 1719"> <tr><td> </td><td> </td></tr> <tr><td> </td><td> </td></tr> </table>							

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11	Stock or stock options	<input checked="" type="checkbox"/> None	
12	Receipt of equipment, materials, drugs, medical writing, gifts or other services	<input checked="" type="checkbox"/> None	
13	Other financial or non-financial interests	<input checked="" type="checkbox"/> None	

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.

Dr. ALEJANDRO CONTRERAS
 MEDICO CARDIOLOGO
 MF 25879/3 - M.E. 11357

ICMJE DISCLOSURE FORM

Date: 26/01/2026

Your Name: Alejandro Peirone

Manuscript Title: Reemplazo percutáneo de válvula pulmonar en tracto de salida nativo. Técnica de implante en "un paso" con válvula balón expandible: experiencia inicial en Argentina

Manuscript Number (if known): <https://doi.org/10.7775/rac.es.v93.i6.20952>

In the interest of transparency, we ask you to disclose all relationships/activities/interests listed below that are related to the content of your manuscript. "Related" means any relation with for-profit or not-for-profit third parties whose interests may be affected by the content of the manuscript. Disclosure represents a commitment to transparency and does not necessarily indicate a bias. If you are in doubt about whether to list a relationship/activity/interest, it is preferable that you do so.

The author's relationships/activities/interests should be defined broadly. For example, if your manuscript pertains to the epidemiology of hypertension, you should declare all relationships with manufacturers of antihypertensive medication, even if that medication is not mentioned in the manuscript.

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Dr. ALEJANDRO PEIRONE
 CARDIOLOGÍA PEDIÁTRICA
 M.P. 22928

ICMJE DISCLOSURE FORM

Date: 26/01/2026

Your Name: Edgardo Banille

Manuscript Title: Reemplazo percutáneo de válvula pulmonar en tracto de salida nativo. Técnica de implante en "un paso" con válvula balón expandible: experiencia inicial en Argentina

Manuscript Number (if known): https://doi.org/10.7775/rac.es.v93.i6.20952

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S. Banille
EDGARDO BANILLE
 MAT 13358
 ESPECIALISTA EN PEDIATRÍA - M.E. 5947
 ESP. TERAPIA INTENSIVA PEDIÁTRICA - S.A.P.
 ESP. CARDIOLOGÍA INFANTIL - S.A.P. - S.A.C