ICMJE Form for Disclosure of Potential Conflicts of Interest

Instructions

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**Section 1. Identifying Information**

1. Given Name (First Name)  
Mercedes

2. Surname (Last Name)  
Lluch

3. Date  
22-July-2014

4. Are you the corresponding author?  
Yes ☐ No ☑

Corresponding Author’s Name  
Julia Carracedo

5. Manuscript Title  
Changes in endothelial microparticles and endothelial progenitor cells in obese patients in response to surgical stress

6. Manuscript Identifying Number (if you know it)  
JBJS-D-14-00570R1

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1. Given Name (First Name)  
   Maria Victoria

2. Surname (Last Name)  
   Noci

3. Date  
   22-July-2014

4. Are you the corresponding author?  
   ✔ No

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   Julia Carracedo

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   Mariano

2. Surname (Last Name)  
   Rodriguez

3. Date  
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   Julia Carracedo

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## Section 1. Identifying Information

1. **Given Name (First Name)**  
   JULIA

2. **Surname (Last Name)**  
   CARRACEDO

3. **Date**  
   23-October-2014

4. **Are you the corresponding author?**  
   ✔ Yes   
   No

5. **Manuscript Title**  
   Endothelial damage in obese patients in response to surgical stress

6. **Manuscript Identifying Number (if you know it)**  

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Are there any relevant conflicts of interest?  
✔ Yes   
No

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2. Surname (Last Name) RAMÍREZ
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