

ICMJE Form for Disclosure of Potential Conflicts of Interest

Instructions

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2. The work under consideration for publication.

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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)

Tarinee

2. Surname (Last Name)

Kucchal

3. Date

11-September-2020

4. Are you the corresponding author?

Yes No

5. Manuscript Title

International Organisations in Global Surgery: Challenges and Opportunities.

6. Manuscript Identifying Number (if you know it)

Section 2. The Work Under Consideration for Publication

Did you or your institution **at any time** receive payment or services from a third party (government, commercial, private foundation, etc.) for any aspect of the submitted work (including but not limited to grants, data monitoring board, study design, manuscript preparation, statistical analysis, etc.)?

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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

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Dr. Kucchal 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) Manon	2. Surname (Last Name) Pigeolet	3. Date 11-September-2020
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Dr Tarinee Kucchal
5. Manuscript Title International Organisations in Global Surgery: Challenges and Opportunities.		
6. Manuscript Identifying Number (if you know it) _____		

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

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Dr. Pigeolet has nothing to disclose.

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Section 1. Identifying Information

1. Given Name (First Name) Myrone	2. Surname (Last Name) Rolle	3. Date 11-September-2020
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Dr Tarinee Kucchal
5. Manuscript Title International Organisations in Global Surgery: Challenges and Opportunities.		
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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name) Walter	2. Surname (Last Name) Johnson	3. Date 14-September-2020
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Dr Tarinee Kucchal
5. Manuscript Title International Organisations in Global Surgery: Challenges and Opportunities		
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Kee

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Park

3. Date

11-September-2020

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Yes No

Corresponding Author's Name

Dr Tarinee Kucchal

5. Manuscript Title

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Dr. Park has nothing to disclose.

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