

ICMJE Form for Disclosure of Potential Conflicts of Interest

Instructions

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4. Intellectual Property.

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

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Royalties: Funds are coming in to you or your institution due to your patent

ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name) Emilien	2. Surname (Last Name) CHEBIB	3. Date 01-September-2020
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Pr Sophie PERIE
5. Manuscript Title High rate of IIA/IIB neck groups involvement supports complete lateral neck dissection in thyroid carcinoma		
6. Manuscript Identifying Number (if you know it) GS-20-443-R2		

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Are there any relevant conflicts of interest? Yes No

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Dr. CHEBIB has nothing to disclose.

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1. Given Name (First Name) Caroline	2. Surname (Last Name) EYMERIT	3. Date 01-September-2020
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Pr Sophie PERIE
5. Manuscript Title High rate of IIA/IIB neck groups involvement supports complete lateral neck dissection in thyroid carcinoma		
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Section 1. Identifying Information

1. Given Name (First Name) Nathalie	2. Surname (Last Name) CHABBERT-BUFFET	3. Date 01-September-2020
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Pr Sophie PERIE
5. Manuscript Title High rate of IIA/IIB neck groups involvement supports complete lateral neck dissection in thyroid carcinoma		
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Dr. CHABBERT-BUFFET has nothing to disclose.

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1. Given Name (First Name) Bruno	2. Surname (Last Name) ANGELARD	3. Date 01-September-2020
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5. Manuscript Title High rate of IIA/IIB neck groups involvement supports complete lateral neck dissection in thyroid carcinoma		
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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)
Sophie

2. Surname (Last Name)
PERIE

3. Date
01-September-2020

4. Are you the corresponding author? Yes No

5. Manuscript Title
High rate of IIA/IIB neck groups involvement supports complete lateral neck dissection in thyroid carcinoma

6. Manuscript Identifying Number (if you know it)
GS-20-443-R2

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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Dr. PERIE has nothing to disclose.

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