

ICMJE Form for Disclosure of Potential Conflicts of Interest

Instructions

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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)
Antonio

2. Surname (Last Name)
Tuoro

3. Date
23-April-2020

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

5. Manuscript Title
MYOCUTANEOUS PEDICLED FLAP IN TREATMENT OF THE TUBERCULOUS BRONCHOPLEURAL FISTULA – A CASE REPORT

6. Manuscript Identifying Number (if you know it)
JOVS-20-61

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Dr. Tuoro 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)

Annalisa

2. Surname (Last Name)

Barbarossa

3. Date

23-April-2020

4. Are you the corresponding author?

☐ Yes ☒ No

Corresponding Author's Name

Antonio Tuoro

5. Manuscript Title

MYOCUTANEOUS PEDICLED FLAP IN TREATMENT OF THE TUBERCULOUS BRONCHOPLEURAL FISTULA – A CASE REPORT

6. Manuscript Identifying Number (if you know it)

JOVS-20-61

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Dr. Barbarossa has nothing to disclose.

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Section 1. Identifying Information

1. Given Name (First Name)
Vincenzo

2. Surname (Last Name)
Aversa

3. Date
23-April-2020

4. Are you the corresponding author?

☐ Yes ☒ No

Corresponding Author's Name
Antonio Tuoro

5. Manuscript Title
MYOCUTANEOUS PEDICLED FLAP IN TREATMENT OF THE TUBERCULOUS BRONCHOPLEURAL FISTULA – A CASE REPORT

6. Manuscript Identifying Number (if you know it)
JOVS-20-61

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Dr. Aversa has nothing to disclose.

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1. Given Name (First Name)
Armando

2. Surname (Last Name)
Puglisi

3. Date
23-April-2020

4. Are you the corresponding author?

☐ Yes

☒ No

Corresponding Author's Name
Antonio Tuoro

5. Manuscript Title

MYOCUTANEOUS PEDICLED FLAP IN TREATMENT OF THE TUBERCULOUS BRONCHOPLEURAL FISTULA – A CASE REPORT

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1. Given Name (First Name)
Carlopietro

2. Surname (Last Name)
Voci

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23-April-2020

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☐ Yes

☒ No

Corresponding Author's Name
Antonio Tuoro

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Dr. Voci has nothing to disclose.

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