

ICMJE Form for Disclosure of Potential Conflicts of Interest

Instructions

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)
Emanuele

2. Surname (Last Name)
Botteri

3. Date
22-April-2020

4. Are you the corresponding author? Yes No

5. Manuscript Title
New technology minimally invasive for the treatment of gastro-esophageal reflux disease: LINX.

6. Manuscript Identifying Number (if you know it)
LS-2020-GERD-04(LS-20-65)

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Dr. Botteri has nothing to disclose.

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Section 1. Identifying Information

1. Given Name (First Name)

Sarah

2. Surname (Last Name)

Molfino

3. Date

22-April-2020

4. Are you the corresponding author?

Yes

No

Corresponding Author's Name

Emanuele Botteri

5. Manuscript Title

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6. Manuscript Identifying Number (if you know it)

LS-2020-GERD-04(LS-20-65)

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Yes

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Dr. Molfino has nothing to disclose.

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1. Given Name (First Name)

Michela

2. Surname (Last Name)

Caprioli

3. Date

22-April-2020

4. Are you the corresponding author?

Yes No

Corresponding Author's Name

Emanuele Botteri

5. Manuscript Title

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1. Given Name (First Name)

Cecilia

2. Surname (Last Name)

Turolo

3. Date

22-April-2020

4. Are you the corresponding author?

Yes No

Corresponding Author's Name

Emanuele Botteri

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Nereo

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Vettoretto

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Corresponding Author's Name

Emanuele Botteri

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