

## ICMJE Form for Disclosure of Potential Conflicts of Interest

### Instructions

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#### 1. Identifying information.

#### 2. The work under consideration for publication.

This section asks for information about the work that you have submitted for publication. The time frame for this reporting is that of the work itself, from the initial conception and planning to the present. The requested information is about resources that you received, either directly or indirectly (via your institution), to enable you to complete the work. Checking "No" means that you did the work without receiving any financial support from any third party – that is, the work was supported by funds from the same institution that pays your salary and that institution did not receive third-party funds with which to pay you. If you or your institution received funds from a third party to support the work, such as a government granting agency, charitable foundation or commercial sponsor, check "Yes".

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#### 4. Intellectual Property.

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

#### 5. Relationships not covered above.

Use this section to report other relationships or activities that readers could perceive to have influenced, or that give the appearance of potentially influencing, what you wrote in the submitted work.

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## ICMJE Form for Disclosure of Potential Conflicts of Interest

### Section 1. Identifying Information

1. Given Name (First Name) Pio	2. Surname (Last Name) Maniscalco	3. Date 13-January-2020
4. Are you the corresponding author? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
5. Manuscript Title Titanium mesh in chest wall stabilization and reconstruction: a single center experience		
6. Manuscript Identifying Number (if you know it) CCTS-2019-TSB-03(CCTS-19-52)		

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Are there any relevant conflicts of interest? ☐ Yes ☒ No

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Do you have any patents, whether planned, pending or issued, broadly relevant to the work? ☐ Yes ☒ No



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### Section 6.

#### Disclosure Statement

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Dr. Maniscalco has nothing to disclose.

### Evaluation and Feedback

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## ICMJE Form for Disclosure of Potential Conflicts of Interest

### Section 1. Identifying Information

1. Given Name (First Name) Nicolò	2. Surname (Last Name) Fabbri	3. Date 13-January-2020
4. Are you the corresponding author? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Corresponding Author's Name Maniscalco Pio
5. Manuscript Title Titanium mesh in chest wall stabilization and reconstruction: a single center experience		
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Are there any relevant conflicts of interest? ☐ Yes ☒ No

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Dr. Fabbri has nothing to disclose.

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### Section 1. Identifying Information

1. Given Name (First Name) Francesco	2. Surname (Last Name) Quarantotto	3. Date 13-January-2020
4. Are you the corresponding author? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Corresponding Author's Name Maniscalco Pio
5. Manuscript Title Titanium mesh in chest wall stabilization and reconstruction: a single center experience		
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Are there any relevant conflicts of interest? ☐ Yes ☒ No

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Dr. Quarantotto has nothing to disclose.

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### Section 1. Identifying Information

1. Given Name (First Name) Nicola	2. Surname (Last Name) Tamburini	3. Date 13-January-2020
4. Are you the corresponding author? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Corresponding Author's Name Maniscalco Pio
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The author has nothing to disclose

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1. Given Name (First Name)  
Giorgio

2. Surname (Last Name)  
Cavallesco

3. Date  
13-January-2020

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

5. Manuscript Title  
Titanium mesh in chest wall stabilization and reconstruction: a single center experience

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