

ICMJE Form for Disclosure of Potential Conflicts of Interest

Instructions

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4. Intellectual Property.

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)
Rafael

2. Surname (Last Name)
Neto

3. Date
05-January-2017

4. Are you the corresponding author?

Yes No

Corresponding Author's Name
Fernando A. M. Herbella

5. Manuscript Title

Secrets for a successful laparoscopic antireflux surgery: patients with extraesophageal symptoms

6. Manuscript Identifying Number (if you know it)

Section 2. The Work Under Consideration for Publication

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Section 6. Disclosure Statement

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Dr. Neto has nothing to disclose.

Evaluation and Feedback

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Section 1. Identifying Information

1. Given Name (First Name)
Fernando

2. Surname (Last Name)
Herbella

3. Date
05-January-2017

4. Are you the corresponding author? Yes No

5. Manuscript Title
Secrets for a successful laparoscopic antireflux surgery: patients with extraesophageal symptoms

6. Manuscript Identifying Number (if you know it)

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1. Given Name (First Name) Bruno	2. Surname (Last Name) Pinna	3. Date 05-January-2017
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Fernando A. M. Herbella
5. Manuscript Title Secrets for a successful laparoscopic antireflux surgery: patients with extraesophageal symptoms		
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Marco

2. Surname (Last Name)

Patti

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No

Corresponding Author's Name

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