

ICMJE Form for Disclosure of Potential Conflicts of Interest

Instructions

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Section 1. Identifying Information

1. Given Name (First Name)

Halil

2. Surname (Last Name)

Özgüç

3. Date

05-October-2020

4. Are you the corresponding author?

Yes No

5. Manuscript Title

Op-7 The Knowledge, Attitude, And Behavioral Levels Of 5Th And 6Th Grade Medical Students On Obesity, Bariatric And Metabolic Surgery: A Survey Study

6. Manuscript Identifying Number (if you know it)

ALES-2019-BMS-18

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Dr. Özgüç has nothing to disclose.

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Section 1. Identifying Information

1. Given Name (First Name)

Mustafa

2. Surname (Last Name)

Narmanlı

3. Date

05-October-2020

4. Are you the corresponding author?

Yes No

5. Manuscript Title

Op-7 The Knowledge, Attitude, And Behavioral Levels Of 5Th And 6Th Grade Medical Students On Obesity, Bariatric And Metabolic Surgery: A Survey Study

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Dr. Narmanlı has nothing to disclose.

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Okan

2. Surname (Last Name)

Aydin

3. Date

05-October-2020

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Yes No

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Hakan

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Çırnak

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