

ICMJE Form for Disclosure of Potential Conflicts of Interest

Instructions

The purpose of this form is to provide readers of your manuscript with information about your other interests that could influence how they receive and understand your work. The form is designed to be completed electronically and stored electronically. It contains programming that allows appropriate data display. Each author should submit a separate form and is responsible for the accuracy and completeness of the submitted information. The form is in six parts.

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2. The work under consideration for publication.

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3. Relevant financial activities outside the submitted work.

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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.

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name) Michele	2. Surname (Last Name) Mazzola	3. Date 16-November-2019
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Pietro Achilli
5. Manuscript Title Pancreatic ganglioneuroma: a rare entity with a difficult approach: a case report and systematic review		
6. Manuscript Identifying Number (if you know it)		

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Are there any relevant conflicts of interest? Yes No

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Dr. Mazzola has nothing to disclose.

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1. Given Name (First Name) Camillo	2. Surname (Last Name) Bertoglio	3. Date 16-November-2019
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Pietro Achilli
5. Manuscript Title Pancreatic ganglioneuroma: a rare entity with a difficult approach: a case report and systematic review		
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Section 1. Identifying Information

1. Given Name (First Name)
Pietro

2. Surname (Last Name)
Achilli

3. Date
16-November-2019

4. Are you the corresponding author? Yes No

5. Manuscript Title
Pancreatic ganglioneuroma: a rare entity with a difficult approach: a case report and systematic review

6. Manuscript Identifying Number (if you know it)

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Dr. Achilli has nothing to disclose.

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Section 1. Identifying Information

1. Given Name (First Name) Lorenzo	2. Surname (Last Name) Morini	3. Date 16-November-2019
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Pietro Achilli
5. Manuscript Title Pancreatic ganglioneuroma: a rare entity with a difficult approach: a case report and systematic review		
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1. Given Name (First Name) Sara	2. Surname (Last Name) Baleri	3. Date 16-November-2019
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5. Manuscript Title Pancreatic ganglioneuroma: a rare entity with a difficult approach: a case report and systematic review		
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Section 1. Identifying Information

1. Given Name (First Name) Carmelo	2. Surname (Last Name) Magistro	3. Date 16-November-2019
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Pietro Achilli
5. Manuscript Title Pancreatic ganglioneuroma: a rare entity with a difficult approach: a case report and systematic review		
6. Manuscript Identifying Number (if you know it)		

Section 2. The Work Under Consideration for Publication

Did you or your institution **at any time** receive payment or services from a third party (government, commercial, private foundation, etc.) for any aspect of the submitted work (including but not limited to grants, data monitoring board, study design, manuscript preparation, statistical analysis, etc.)?

Are there any relevant conflicts of interest? Yes No

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Are there any relevant conflicts of interest? Yes No

Section 4. Intellectual Property -- Patents & Copyrights

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

ICMJE Form for Disclosure of Potential Conflicts of Interest

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Dr. Magistro 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) Paolo	2. Surname (Last Name) De Martini	3. Date 16-November-2019
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Pietro Achilli
5. Manuscript Title Pancreatic ganglioneuroma: a rare entity with a difficult approach: a case report and systematic review		
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Are there any relevant conflicts of interest? Yes No

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name) Matteo	2. Surname (Last Name) Origi	3. Date 16-November-2019
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Pietro Achilli
5. Manuscript Title Pancreatic ganglioneuroma: a rare entity with a difficult approach: a case report and systematic review		
6. Manuscript Identifying Number (if you know it)		

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Are there any relevant conflicts of interest? Yes No

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Are there any relevant conflicts of interest? Yes No

Section 4. Intellectual Property -- Patents & Copyrights

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name) Edoardo	2. Surname (Last Name) Forti	3. Date 16-November-2019
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Pietro Achilli
5. Manuscript Title Pancreatic ganglioneuroma: a rare entity with a difficult approach: a case report and systematic review		
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1. Given Name (First Name) Giovanni	2. Surname (Last Name) Ferrari	3. Date 16-November-2019
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Pietro Achilli
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