

ICMJE Form for Disclosure of Potential Conflicts of Interest

Instructions

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Section 1. Identifying Information

1. Given Name (First Name) FEDERICA 2. Surname (Last Name) FERSINI 3. Date 14 | 12 | 2020
4. Are you the corresponding author? Yes No
5. Manuscript Title
MISDIAGNOSIS OF LEIOMYOSARCOMAS: CASE REPORT AND MEDICO-LEGAL ISSUES
6. Manuscript Identifying Number (if you know it)
GPM-20-66

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VANIA

2. Surname (Last Name)

RUSSELL

3. Date

15/12/2020

4. Are you the corresponding author?

 Yes

 No

5. Manuscript Title

MISDIA GNOSIS OF ELETORNOGNA COMA : CASE REPORT AND PEDIC -LEGAL ISSUE

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GPM. -20- 66

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ELENA

2. Surname (Last Name)

MIAMI

3. Date

15/12/2020

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Yes No

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MIS DIAGNOSIS OF LEIOMYOSARCOMA: CASE REPORT AND MEDICO LEGAL ISSUE

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ALESSANDRA

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DE PALMA

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1. Given Name (First Name) Antonietta	2. Surname (Last Name) D'Errico	3. Date 04-March-2021
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Alessandra De Palma
5. Manuscript Title Misdiagnosis of leiomyosarcoma: case report and medico legal issues		
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Dr. D'Errico has nothing to disclose.

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