

## ICMJE DISCLOSURE FORM

Date: June 24, 2021

Your Name: Tingting Li

Manuscript Title: Rare multiple teratomas of the omentum and giant fused teratomas of the bilateral ovaries: a case report and review of the literature

Manuscript number (if known): \_\_\_\_\_

In the interest of transparency, we ask you to disclose all relationships/activities/interests listed below that are related to the content of your manuscript. "Related" means any relation with for-profit or not-for-profit third parties whose interests may be affected by the content of the manuscript. Disclosure represents a commitment to transparency and does not necessarily indicate a bias. If you are in doubt about whether to list a relationship/activity/interest, it is preferable that you do so.

The following questions apply to the author's relationships/activities/interests as they relate to the current manuscript only.

The author's relationships/activities/interests should be defined broadly. For example, if your manuscript pertains to the epidemiology of hypertension, you should declare all relationships with manufacturers of antihypertensive medication, even if that medication is not mentioned in the manuscript.

In item #1 below, report all support for the work reported in this manuscript without time limit. For all other items, the time frame for disclosure is the past 36 months.

		Name all entities with whom you have this relationship or indicate none (add rows as needed)	Specifications/Comments (e.g., if payments were made to you or to your institution)
<b>Time frame: Since the initial planning of the work</b>			
1	All support for the present manuscript (e.g., funding, provision of study materials, medical writing, article processing charges, etc.) <b>No time limit for this item.</b>	<input checked="" type="checkbox"/> X <input type="checkbox"/> None	
<b>Time frame: past 36 months</b>			
2	Grants or contracts from any entity (if not indicated in item #1 above).	<input checked="" type="checkbox"/> X <input type="checkbox"/> None	
3	Royalties or licenses	<input type="checkbox"/> X <input checked="" type="checkbox"/> None	
4	Consulting fees	<input type="checkbox"/> X <input checked="" type="checkbox"/> None	

5	Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or educational events	<input checked="" type="checkbox"/> X <input type="checkbox"/> None	
6	Payment for expert testimony	<input checked="" type="checkbox"/> X <input type="checkbox"/> None	
7	Support for attending meetings and/or travel	<input checked="" type="checkbox"/> X <input type="checkbox"/> None	
8	Patents planned, issued or pending	<input checked="" type="checkbox"/> X <input type="checkbox"/> None	
9	Participation on a Data Safety Monitoring Board or Advisory Board	<input checked="" type="checkbox"/> X <input type="checkbox"/> None	
10	Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid	<input checked="" type="checkbox"/> X <input type="checkbox"/> None	
11	Stock or stock options	<input checked="" type="checkbox"/> X <input type="checkbox"/> None	
12	Receipt of equipment, materials, drugs, medical writing, gifts or other services	<input checked="" type="checkbox"/> X <input type="checkbox"/> None	
13	Other financial or non-financial interests	<input checked="" type="checkbox"/> X <input type="checkbox"/> None	

**Please summarize the above conflict of interest in the following box:**

I declare that I have no competing interests.

**Please place an "X" next to the following statement to indicate your agreement:**

X  I certify that I have answered every question and have not altered the wording of any of the questions on this form.

## ICMJE DISCLOSURE FORM

Date: \_\_\_\_\_ June 24, 2021 \_\_\_\_\_

Your Name: \_\_\_\_\_ Wenli Zhang \_\_\_\_\_

Manuscript Title: Rare multiple teratomas of the omentum and giant fused teratomas of the bilateral ovaries: a case report and review of the literature

Manuscript number (if known): \_\_\_\_\_

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## ICMJE DISCLOSURE FORM

Date: June 24, 2021

Your Name: Jingwen Huang

Manuscript Title: Rare multiple teratomas of the omentum and giant fused teratomas of the bilateral ovaries: a case report and review of the literature

Manuscript number (if known): \_\_\_\_\_

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## ICMJE DISCLOSURE FORM

Date: June 24, 2021

Your Name: Yangmei Shen

Manuscript Title: Rare multiple teratomas of the omentum and giant fused teratomas of the bilateral ovaries: a case report and review of the literature

Manuscript number (if known): \_\_\_\_\_

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## ICMJE DISCLOSURE FORM

Date: \_\_\_\_\_ June 24, 2021 \_\_\_\_\_

Your Name: \_\_\_\_\_ Tao Cui \_\_\_\_\_

**Manuscript Title:** Rare multiple teratomas of the omentum and giant fused teratomas of the bilateral ovaries: a case report and review of the literature

**Manuscript number (if known):** \_\_\_\_\_

In the interest of transparency, we ask you to disclose all relationships/activities/interests listed below that are related to the content of your manuscript. "Related" means any relation with for-profit or not-for-profit third parties whose interests may be affected by the content of the manuscript. Disclosure represents a commitment to transparency and does not necessarily indicate a bias. If you are in doubt about whether to list a relationship/activity/interest, it is preferable that you do so.

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X  I certify that I have answered every question and have not altered the wording of any of the questions on this form.

## ICMJE DISCLOSURE FORM

Date: April 27, 2021

Your Name: ANDREA GIANNINI

Manuscript Title: Rare multiple teratomas of the omentum and giant fused teratomas of the bilateral ovaries: a case report

Manuscript number (if known: NA

In the interest of transparency, we ask you to disclose all relationships/activities/interests listed below that are related to the content of your manuscript. "Related" means any relation with for-profit or not-for-profit third parties whose interests may be affected by the content of the manuscript. Disclosure represents a commitment to transparency and does not necessarily indicate a bias. If you are in doubt about whether to list a relationship/activity/interest, it is preferable that you do so.

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Please summarize the above conflict of interest in the following box:

**I have no conflict of interest**

Please place an "X" next to the following statement to indicate your agreement:

**X I certify that I have answered every question and have not altered the wording of any of the questions on this Form**



**ICMJE DISCLOSURE FORM**

Date: 25/04/2021  
 Your Name: Omer Lutfi TAPIS12  
 Manuscript Title: Rare multiple teratomas of the omentum and giant fused teratomas of the bilateral ovaries = a case report.  
 Manuscript number (if known): \_\_\_\_\_

In the interest of transparency, we ask you to disclose all relationships/activities/interests listed below that are related to the content of your manuscript. "Related" means any relation with for-profit or not-for-profit third parties whose interests may be affected by the content of the manuscript. Disclosure represents a commitment to transparency and does not necessarily indicate a bias. If you are in doubt about whether to list a relationship/activity/interest, it is preferable that you do so.

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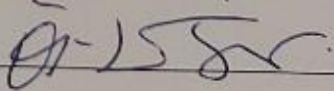
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Please summarize the above conflict of interest in the following box:

- I declare all of the above and indicate no conflict of interest.

Omer Lutfi Tapisiz  


Please place an "X" next to the following statement to indicate your agreement:

I certify that I have answered every question and have not altered the wording of any of the questions on this form.

## ICMJE DISCLOSURE FORM

Date: June 15<sup>th</sup> 2021

Your Name: Ricardo Bassil Lasmar

Manuscript Title: Rare multiple teratomas of theomentum and giant fusedteratomas of the bilateral ovaries: a case reportand review of the literature

Manuscript number (if known): \_\_\_\_\_

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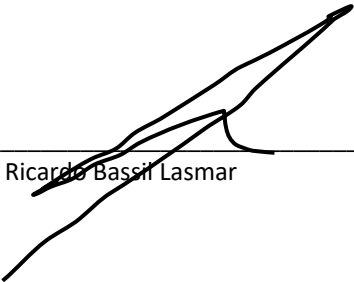
No Conflict
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form.



Dr Ricardo Bassil Lasmar

## ICMJE DISCLOSURE FORM

Date: June 15<sup>th</sup> 2021

Your Name: Bernardo Portugal Lasmar

Manuscript Title: Rare multiple teratomas of theomentum and giant fusedteratomas of the bilateral ovaries: a case reportand review of the literature

Manuscript number (if known): \_\_\_\_\_

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Dr Bernardo Portugal Lasmar

A handwritten signature in black ink, consisting of a stylized, cursive script that appears to be the name 'Bernardo Portugal Lasmar'.