Date: Jan. 03<sup>rd</sup>, 2023

Your Name: CRISTINA MONDELLO

Manuscript Title: Professional liability due to complete esophagus section during thyroidectomy: a rare case report Manuscript number (if known): GS-22-670

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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		Name all entities with whom you have this relationship or indicate none (add rows as needed) Time frame: Since the initial	Specifications/Comments (e.g., if payments were made to you or to your institution) planning of the work
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>	XNone	
		Time frame: past	36 months
2	Grants or contracts from any entity (if not indicated in item #1 above).	XNone	
3	Royalties or licenses	XNone	
4	Consulting fees	XNone	

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

None.

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

Date: Jan. 03<sup>rd</sup>, 2023

Your Name: <u>GENNARO BALDINO</u>

Manuscript Title: Professional liability due to complete esophagus section during thyroidectomy: a rare case report Manuscript number (if known): GS-22-670

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	Advisory Board		
10	Leadership or fiduciary role	XNone	
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	group, paid or unpaid		
11	Stock or stock options	XNone	
12	Receipt of equipment,	X_None	
	materials, drugs, medical		
	writing, gifts or other services		
12	Other financial or non-	V Nana	
13	financial interests	XNone	

None.

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Date: Jan. 03<sup>rd</sup>, 2023

Your Name: VINCENZO CIANCI

Manuscript Title: Professional liability due to complete esophagus section during thyroidectomy: a rare case report Manuscript number (if known): GS-22-670

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-	pending		
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12	Receipt of equipment,	X_None	
	materials, drugs, medical		
	writing, gifts or other services		
12	Other financial or non-	V Nana	
13	financial interests	XNone	

None.

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

Date: Jan. 03<sup>rd</sup>, 2023

Your Name: PATRIZIA GUALNIERA

Manuscript Title: Professional liability due to complete esophagus section during thyroidectomy: a rare case report Manuscript number (if known): GS-22-670

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	meetings and/or traver		
8	Patents planned, issued or	X None	
-	pending		
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	Advisory Board		
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	in other board, society, committee or advocacy		
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11	Stock or stock options	XNone	
12	Receipt of equipment,	X_None	
	materials, drugs, medical		
	writing, gifts or other services		
12	Other financial or non-	V Nana	
13	financial interests	XNone	

None.

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

Date: Jan. 03<sup>rd</sup>, 2023

Your Name: DANIELA SAPIENZA

Manuscript Title: Professional liability due to complete esophagus section during thyroidectomy: a rare case report Manuscript number (if known): GS-22-670

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6	Payment for expert	X None	
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7	Support for attending meetings and/or travel	XNone	
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8	Patents planned, issued or	X None	
-	pending		
9	Participation on a Data	XNone	
	Safety Monitoring Board or		
	Advisory Board		
10	Leadership or fiduciary role	XNone	
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11	Stock or stock options	XNone	
12	Receipt of equipment,	X_None	
	materials, drugs, medical		
	writing, gifts or other services		
12	Other financial or non-	V Nana	
13	financial interests	XNone	

None.

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

Date: Jan. 03<sup>rd</sup>, 2023

Your Name: ALESSIO ASMUNDO

Manuscript Title: Professional liability due to complete esophagus section during thyroidectomy: a rare case report Manuscript number (if known): GS-22-670

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12	Receipt of equipment,	X_None	
	materials, drugs, medical		
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12	Other financial or non-	V Nana	
13	financial interests	XNone	

None.

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Date: Jan. 03<sup>rd</sup>, 2023

Your Name: ELVIRA VENTURA SPAGNOLO

Manuscript Title: Professional liability due to complete esophagus section during thyroidectomy: a rare case report Manuscript number (if known): GS-22-670

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7	Support for attending meetings and/or travel	XNone	
8	Patents planned, issued or	X None	
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9	Participation on a Data	XNone	
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11	Stock or stock options	XNone	
12	Receipt of equipment, materials, drugs, medical writing, gifts or other services	X_None	
12	Other financial or non-	V Nana	
13	financial interests	XNone	

None.

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