

ICMJE DISCLOSURE FORM

Date: February 8th/2024

Your Name: Alejandra Aristizabal

Manuscript Title: Is immediate lymphatic reconstruction the future of lymphedema prevention?

Manuscript number (if known): GS-23-536

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**.

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		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)
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3	Royalties or licenses	__X__None	
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5	Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or educational events	<input checked="" type="checkbox"/> None	
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Please summarize the above conflict of interest in the following box:

None

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

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Date: February 8th/2024

Your Name: Pedro Ciudad

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Date: February 8th/2024
 Your Name: Hung Chi Chen
 Manuscript Title: Is immediate lymphatic reconstruction the future of lymphedema prevention? __
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Date: February 8th/2024

Your Name: Michele Maruccia

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Your Name: Rahim Nazerali

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Date: February 8th/2024

Your Name: Oscar J. Manrique

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