

ICMJE DISCLOSURE FORM

Date: 25th may 2021

Your Name: Daniele Barbaro

Manuscript Title: TOTAL THYROIDECTOMY VS. LOBECTOMY IN DIFFERENTIATED THYROID CANCER : IS THERE A REASONABLE SIZE CUT-OFF FOR DECISION ? -A NARRATIVE REVIEW-

Manuscript number (if known): GS-21-242-CL

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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)
Time frame: Since the initial planning of the work		
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Time frame: past 36 months		
2	Grants or contracts from any entity (if not indicated in item #1 above).	<u>None</u>
3	Royalties or licenses	<u>None</u>

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

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

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.

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Date: 25th May

Your Name: Giancarlo Basili

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Date: 25th May 2021

Your Name: Gabriele Materazzi

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