

ICMJE Form for Disclosure of Potential Conflicts of Interest

Instructions

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Royalties: Funds are coming in to you or your institution due to your patent

ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)

Jenna

2. Surname (Last Name)

Bekeny

3. Date

01-July-2020

4. Are you the corresponding author?

Yes

No

Corresponding Author's Name

Gabriel Del Corral

5. Manuscript Title

Breast Augmentation in the Transgender Patient: Review of Current Techniques and Complications

6. Manuscript Identifying Number (if you know it)

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Yes

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Ms. Bekeny has nothing to disclose.

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Section 1. Identifying Information

1. Given Name (First Name)

Elizabeth

2. Surname (Last Name)

Zolper

3. Date

01-July-2020

4. Are you the corresponding author?

Yes

No

Corresponding Author's Name

Gabriel Del Corral

5. Manuscript Title

Breast Augmentation in the Transgender Patient: Review of Current Techniques and Complications

6. Manuscript Identifying Number (if you know it)

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Section 1. Identifying Information

1. Given Name (First Name)

Oscar

2. Surname (Last Name)

Manrique

3. Date

01-July-2020

4. Are you the corresponding author?

Yes

No

Corresponding Author's Name

Gabriel Del Corral

5. Manuscript Title

Breast Augmentation in the Transgender Patient: Review of Current Techniques and Complications

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Section 1. Identifying Information

1. Given Name (First Name)

Kenneth

2. Surname (Last Name)

Fan

3. Date

01-July-2020

4. Are you the corresponding author?

Yes No

Corresponding Author's Name

Gabriel Del Corral

5. Manuscript Title

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Gabriel

2. Surname (Last Name)

Del Corral

3. Date

01-July-2020

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Yes No

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