

ICMJE Form for Disclosure of Potential Conflicts of Interest

Instructions

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)
RUBÉN

2. Surname (Last Name)
MARTÍN PAYO

3. Date
22-May-2020

4. Are you the corresponding author? Yes No

5. Manuscript Title
APPS FOR INDIVIDUALS DIAGNOSED WITH BREAST CANCER; A PRELIMINARY ASSESSMENT OF THE CONTENT AND QUALITY OF COMMERCIALY AVAILABLE APPS IN SPANISH

6. Manuscript Identifying Number (if you know it)
mHealth-19-191-MS-6624

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Dr. Rubén Martín Payo nothing to disclose.

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LLARA

2. Surname (Last Name)

FERRERAS LOSILLA

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22-May-2020

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 Yes No

Corresponding Author's Name

RUBÉN MARTÍN PAYO

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Llora Ferreras Losilla nothing to disclose.

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XANA

2. Surname (Last Name)
GONZÁLEZ MÉNDEZ

3. Date
22-May-2020

4. Are you the corresponding author? Yes No

Corresponding Author's Name
RUBÉN MARTÍN PAYO

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APPS FOR INDIVIDUALS DIAGNOSED WITH BREAST CANCER; A PRELIMINARY ASSESSMENT OF THE CONTENT AND QUALITY OF COMMERCIALY AVAILABLE APPS IN SPANISH

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Xana González Méndez nothing to disclose.

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CLAUDIA

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LEIRÓS DÍAZ

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Corresponding Author's Name
RUBÉN MARTÍN PAYO

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Claudia Leirós Díaz nothing to disclose.

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ANDREA

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MARTÍNEZ URQUIJO

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Andrea Martínez Urquijo nothing to disclose.

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Use this section to report other relationships or activities that readers could perceive to have influenced, or that give the appearance of potentially influencing, what you wrote in the submitted work.

Definitions.

Entity: government agency, foundation, commercial sponsor, academic institution, etc.

Grant: A grant from an entity, generally [but not always] paid to your organization

Personal Fees: Monies paid to you for services rendered, generally honoraria, royalties, or fees for consulting, lectures, speakers bureaus, expert testimony, employment, or other affiliations

Non-Financial Support: Examples include drugs/equipment supplied by the entity, travel paid by the entity, writing assistance, administrative support, etc.

Other: Anything not covered under the previous three boxes

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Issued: The patent has been issued by the agency

Licensed: The patent has been licensed to an entity, whether earning royalties or not

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)
MARÍA DEL MAR

2. Surname (Last Name)
FERNÁNDEZ ÁLVAREZ

3. Date
22-May-2020

4. Are you the corresponding author? Yes No

Corresponding Author's Name
RUBÉN MARTÍN PAYO

5. Manuscript Title
APPS FOR INDIVIDUALS DIAGNOSED WITH BREAST CANCER; A PRELIMINARY ASSESSMENT OF THE CONTENT AND QUALITY OF COMMERCIALY AVAILABLE APPS IN SPANISH

6. Manuscript Identifying Number (if you know it)
mHealth-19-191-MS-6624

Section 2. The Work Under Consideration for Publication

Did you or your institution **at any time** receive payment or services from a third party (government, commercial, private foundation, etc.) for any aspect of the submitted work (including but not limited to grants, data monitoring board, study design, manuscript preparation, statistical analysis, etc.)?

Are there any relevant conflicts of interest? Yes No

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Place a check in the appropriate boxes in the table to indicate whether you have financial relationships (regardless of amount of compensation) with entities as described in the instructions. Use one line for each entity; add as many lines as you need by clicking the "Add +" box. You should report relationships that were **present during the 36 months prior to publication**.

Are there any relevant conflicts of interest? Yes No

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Do you have any patents, whether planned, pending or issued, broadly relevant to the work? Yes No

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Based on the above disclosures, this form will automatically generate a disclosure statement, which will appear in the box below.

María del Mar Fernández Álvarez nothing to disclose.

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