

ICMJE Form for Disclosure of Potential Conflicts of Interest

Instructions

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Section 1. Identifying Information

1. Given Name (First Name)
Kees

2. Surname (Last Name)
de Mooij

3. Date
02-August-2018

4. Are you the corresponding author? Yes No

5. Manuscript Title
A common procedure with a rare anatomical finding: a case report on a true left-sided gallbladder

6. Manuscript Identifying Number (if you know it)

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Dr. de Mooij has nothing to disclose.

Evaluation and Feedback

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Section 1. Identifying Information

1. Given Name (First Name)

Maikel

2. Surname (Last Name)

Bakens

3. Date

02-August-2018

4. Are you the corresponding author?

Yes No

5. Manuscript Title

A common procedure with a rare anatomical finding: a case report on a true left-sided gallbladder

6. Manuscript Identifying Number (if you know it)

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1. Given Name (First Name)
Erik

2. Surname (Last Name)
de Loos

3. Date
02-August-2018

4. Are you the corresponding author?

Yes No

Corresponding Author's Name
Maikel Bakens

5. Manuscript Title

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Jan

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Stoot

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