ICMJE DISCLOSURE FORM

Date: May. 11th, 2022
Your Name: Amelio Ercolino
Manuscript Title: Myoid gonadal stromal tumor managed with testis sparing surgery: a case report and review of the literature
Manuscript number (if known):

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.

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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)
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).	__X__None	
3	Royalties or licenses	__X__None	
4	Consulting fees	__X__None	

5	Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or educational events	__X__None	
6	Payment for expert testimony	__X__None	
7	Support for attending meetings and/or travel	__X__None	
8	Patents planned, issued or pending	__X__None	
9	Participation on a Data Safety Monitoring Board or Advisory Board	__X__None	
10	Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid	__X__None	
11	Stock or stock options	__X__None	
12	Receipt of equipment, materials, drugs, medical writing, gifts or other services	__X_None	
13	Other financial or non-financial interests	__X__None	

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

None.

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

ICMJE DISCLOSURE FORM

Date: May. 11th, 2022
Your Name: Francesco Manes
Manuscript Title: Myoid gonadal stromal tumor managed with testis sparing surgery: a case report and review of the literature
Manuscript number (if known):

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ICMJE DISCLOSURE FORM

Date: May. 11th, 2022
Your Name: Francesco Vasuri
Manuscript Title: Myoid gonadal stromal tumor managed with testis sparing surgery: a case report and review of the literature
Manuscript number (if known):

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ICMJE DISCLOSURE FORM

Date: May. 11th, 2022
Your Name: Lorenzo Bianchi
Manuscript Title: Myoid gonadal stromal tumor managed with testis sparing surgery: a case report and review of the literature
Manuscript number (if known):

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ICMJE DISCLOSURE FORM

Date: May. 11th, 2022
Your Name: Marco Garofalo
Manuscript Title: Myoid gonadal stromal tumor managed with testis sparing surgery: a case report and review of the literature
Manuscript number (if known):

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ICMJE DISCLOSURE FORM

Date: May. 11th, 2022
Your Name: Pietro Piazza
Manuscript Title: Myoid gonadal stromal tumor managed with testis sparing surgery: a case report and review of the literature
Manuscript number (if known):

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ICMJE DISCLOSURE FORM

Date: May. 11th, 2022
Your Name: Beniamino Corcioni
Manuscript Title: Myoid gonadal stromal tumor managed with testis sparing surgery: a case report and review of the literature
Manuscript number (if known):

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ICMJE DISCLOSURE FORM

Date: May. 11th, 2022
Your Name: Riccardo Schiavina
Manuscript Title: Myoid gonadal stromal tumor managed with testis sparing surgery: a case report and review of the literature
Manuscript number (if known):

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ICMJE DISCLOSURE FORM

Date: May. 11th, 2022
Your Name: Rita Golfieri
Manuscript Title: Myoid gonadal stromal tumor managed with testis sparing surgery: a case report and review of the literature
Manuscript number (if known):

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ICMJE DISCLOSURE FORM

Date: May. 11th, 2022
Your Name: Michelangelo Fiorentino
Manuscript Title: Myoid gonadal stromal tumor managed with testis sparing surgery: a case report and review of the literature
Manuscript number (if known):

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ICMJE DISCLOSURE FORM

Date: May. 11th, 2022
Your Name: Maurizio Colecchia
Manuscript Title: Myoid gonadal stromal tumor managed with testis sparing surgery: a case report and review of the literature
Manuscript number (if known):

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ICMJE DISCLOSURE FORM

Date: May. 11th, 2022
Your Name: Eugenio Brunocilla
Manuscript Title: Myoid gonadal stromal tumor managed with testis sparing surgery: a case report and review of the literature
Manuscript number (if known): _____

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3	Royalties or licenses	__X__None	
4	Consulting fees	__X__None	

5	Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or educational events	__X__None	
6	Payment for expert testimony	__X__None	
7	Support for attending meetings and/or travel	__X__None	
8	Patents planned, issued or pending	__X__None	
9	Participation on a Data Safety Monitoring Board or Advisory Board	__X__None	
10	Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid	__X__None	
11	Stock or stock options	__X__None	
12	Receipt of equipment, materials, drugs, medical writing, gifts or other services	__X_None	
13	Other financial or non-financial interests	__X__None	

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

None.

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.