

ICMJE Form for Disclosure of Potential Conflicts of Interest

Instructions

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This section asks about patents and copyrights, whether pending, issued, licensed and/or receiving royalties.

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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)
Fares

2. Surname (Last Name)
Kosseifi

3. Date
19-June-2020

4. Are you the corresponding author? Yes No

5. Manuscript Title
Penile glans augmentation for the treatment of Premature Ejaculation: a review.

6. Manuscript Identifying Number (if you know it)
TAU-20-102

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Dr. Kosseifi has nothing to disclose.

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Section 1. Identifying Information

1. Given Name (First Name)
Ala

2. Surname (Last Name)
CHEBBI

3. Date
19-June-2020

4. Are you the corresponding author?

Yes No

Corresponding Author's Name
Fares Kosseifia

5. Manuscript Title
Penile glans augmentation for the treatment of Premature Ejaculation: a review.

6. Manuscript Identifying Number (if you know it)
TAU-20-1026

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Section 1. Identifying Information

| | | |
|--|---|--|
| 1. Given Name (First Name) Nehme | 2. Surname (Last Name) RAAD | 3. Date 20-June-2020 |
| 4. Are you the corresponding author? | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | Corresponding Author's Name Fares Kosseifia |
| 5. Manuscript Title Penile glans augmentation for the treatment of Premature Ejaculation: a review. | | |
| 6. Manuscript Identifying Number (if you know it) TAU-20-1026 | | |

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| | | |
|--|---|--|
| 1. Given Name (First Name) Antoinette | 2. Surname (Last Name) NDAYRA | 3. Date 20-June-2020 |
| 4. Are you the corresponding author? | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | Corresponding Author's Name Fares Kosseifia |
| 5. Manuscript Title Penile glans augmentation for the treatment of Premature Ejaculation: a review. | | |
| 6. Manuscript Identifying Number (if you know it) TAU-20-1026 | | |

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| 1. Given Name (First Name) Kamal | 2. Surname (Last Name) ACHKAR | 3. Date 20-June-2020 |
| 4. Are you the corresponding author? | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | Corresponding Author's Name Fares Kosseifia |
| 5. Manuscript Title Penile glans augmentation for the treatment of Premature Ejaculation: a review. | | |
| 6. Manuscript Identifying Number (if you know it) TAU-20-1026 | | |

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1. Given Name (First Name)
Xavier

2. Surname (Last Name)
DURAND

3. Date
20-June-2020

4. Are you the corresponding author?

Yes No

Corresponding Author's Name
Fares Kosseifia

5. Manuscript Title
Penile glans augmentation for the treatment of Premature Ejaculation: a review.

6. Manuscript Identifying Number (if you know it)
TAU-20-1026

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| | | |
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| 4. Are you the corresponding author? | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | Corresponding Author's Name Fares Kosseifia |
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