Date:	8/25/2022
Your Name:	RAFFAELE FALSAPERLA
Manuscript Title:	Impressive efficacy of the ketogenic diet in a KCNQ2 encephalopathy infant: case report and exhaustive literature review
Manuscript Number (if known):	Click or tap here to enter text.

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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)
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		Time frame: past 36 mont	hs
2	Grants or contracts from any entity (if not indicated in item #1 above).	None None	
3	Royalties or licenses	None	

		Name all entities with whom you have this specifications/Comments (e.g., if payments were relationship or indicate none (add rows as needed) made to you or to your institution)
4	Consulting fees	None None
5	Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or educational events	None None None
6	Payment for expert testimony	None None □
7	Support for attending meetings and/or travel	None None None
8	Patents planned, issued or pending	None None
9	Participation on a Data Safety Monitoring Board or Advisory Board	None None
10	Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid	None None

		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)
11	Stock or stock options	None None .
12	Receipt of equipment, materials, drugs, medical writing,	None
ALIES	gifts or other services	None Non
	Other financial or non-financial interests	

Please place an "X" next to the following statement to indicate your agreement:

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

After

Date:	8/25/2022	
Your Name:	SIMONA DOMENICA MARINO	
Manuscript Title:	Impressive efficacy of the ketogenic diet in a KCNQ2 encephalopathy infant: case report and exhaustive literature review	
Manuscript Number (if known):	Click or tap here to enter text.	

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3	any entity (if not indicated in item #1 above). Royalties or licenses	None	

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4	Consulting fees	None	
5	Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or educational events	None	
6	Payment for expert testimony	None	
7	Support for attending meetings and/or travel	None Non	
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11	Stock or stock options	None None	
12	Receipt of equipment, materials, drugs, medical writing, gifts or other services	None None	
13	Other financial or non-financial interests	None None None	

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Date: Your Name: Manuscript Title:			8/25/2022	
			GIULIA SALOMONE	
			Impressive efficacy of the ketogenic diet in a KCNQ2 encephalopathy infant: case report and exhaustive literature review	
Vlar	nuscript Number (if k	nown):	Click or tap here to enter text.	merature review
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		Name a relation	Il entities with whom you have this ship or indicate none (add rows as needed) Time frame: Since the initial planning	Specifications/Comments (e.g., if payments were made to you or to your institution)
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4	Consulting fees	None None
5	Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or educational events	None
6	Payment for expert testimony	None None
7	Support for attending meetings and/or travel	None None
8	Patents planned, issued or pending	None None
9	Participation on a Data Safety Monitoring Board or Advisory Board	None None None
10	Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid	None None

		e all entities with whom you have this ionship or indicate none (add rows as needed)	Specifications/Comments (e.g., if payments were made to you or to your institution)
	Stock or stock options	None	
	Receipt of equipment, materials, drugs, medical writing, gifts or other services	None	
13	Other financial or non-financial interests	None	

Giulio falianione

Date:	8/25/2022
Your Name:	FRANCESCA MADIA
Manuscript Title:	Impressive efficacy of the ketogenic diet in a KCNQ2 encephalopathy infant: case report and exhaustive literature review
Manuscript Number (if known):	Click or tap here to enter text.

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	Time frame: Since the initial planning	of the work
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Grants or contracts from any entity (if not indicated in item #1 above).	None None	
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4	Consulting fees	None None	
5	Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or educational events	None None	
6	Payment for expert testimony	None None	
7	Support for attending meetings and/or travel	None None	
8	Patents planned, issued or pending	None None	
9	Participation on a Data Safety Monitoring Board or Advisory Board	None None	
10	Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid	None None □	

		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)
11	Stock or stock options	None None
	Receipt of equipment, materials, drugs, medical writing, gifts or other services	None Non
13	Other financial or non-financial interests	None None
Ple		e answered every question and have not altered the wording of any of the questions on this form.

Francie

Date:	8/25/2022	
Your Name:	SILVIA MARINO	
Manuscript Title:	Impressive efficacy of the ketogenic diet in a KCNQ2 encephalopathy infant: case report and exhaustive literature review	
Manuscript Number (if known):	Click or tap here to enter text.	

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3	Royalties or licenses	None	

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5	Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or educational events	None None	
6	Payment for expert testimony	None	
7	Support for attending meetings and/or travel	None	
8	Patents planned, issued or pending	None	
9	Participation on a Data Safety Monitoring Board or Advisory Board	None None	
10	Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid	None None	

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	Stock or stock options	None None	
12	Receipt of equipment, materials, drugs, medical writing, gifts or other services	None None	
13	Other financial or non-financial interests	None None None	

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12/13/2021

Date:	8/25/2022	
Your Name:	LUCIA GIOVANNA TARDINO	
Manuscript Title:	Impressive efficacy of the ketogenic diet in a KCNQ2 encephalopathy infant: case report and exhaustive literature review	
Manuscript Number (if known):	Click or tap here to enter text.	
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7	Support for attending meetings and/or travel	None None
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11	Stock or stock options	⊠ None	
12	Receipt of equipment, materials, drugs, medical writing, gifts or other services	None None	
	Other financial or non-financial interests	None	

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Date: Your Name: Manuscript Title:			8/25/2022			
			BRUNA SCALIA			
			Impressive efficacy of the ketogenic diet in a KCNQ2 encephalopathy infant: case report and exhaustive literature review			
N	lanuscript Number (if	known):	Click or tap here to enter text.			
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In fra	item #1 below, report me for disclosure is th	t all suppor ne past 36	rt for the work reported in this manuscript wonths.	ithout time limit. For all other ite ms, the time		
			entities with whom you have this hip or indicate none (add rows as needed)	Specifications/Comments (e.g., if payments were made to you or to your institution)		
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8	Patents planned, issued or pending	None .	
9	Participation on a Data Safety Monitoring Board or Advisory Board	None None None	
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11	Stock or stock options	⊠ None	
12	Receipt of equipment, materials, drugs, medical writing, gifts or other services	None	
	Other financial or non-financial interests	⊠ None	THE RESIDENCE OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PARTY OF THE PROPERTY OF THE PARTY OF TH

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BRODE

Date:	8/25/2022	
Your Name:	MARTINO RUGGIERI	
Manuscript Title:	Impressive efficacy of the ketogenic diet in a KCNQ2 encephalopathy infant: case report and exhaustive literature review	
Manuscript Number (if known):	Click or tap here to enter text.	

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41392.70				Time frame: Since the initial planning	of the work
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