

Instructions

The purpose of this form is to provide readers of your manuscript with information about your other interests that could influence how they receive and understand your work. The form is designed to be completed electronically and stored electronically. It contains programming that allows appropriate data display. Each author should submit a separate form and is responsible for the accuracy and completeness of the submitted information. The form is in six parts.

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Section 1.	Identifying Infor	mation	
1. Given Name (F Victor	irst Name)	2. Surname (Last Name) Lopez-Lopez	3. Date 20-March-2020
4. Are you the corresponding author?		✓ Yes No	
5. Manuscript Titl Quality of life af		tion of hepatic hemangioma	
6. Manuscript Ide	ntifying Number (if you	know it)	

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.)?

🖌 No

Are there any relevant conflicts of interest?		Yes
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Are there any relevant conflicts of interest?		Yes	\checkmark	No
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Section 4. Intellectual Property -- Patents & Copyrights

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



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Dr. Lopez-Lopez has nothing to disclose.

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1. Given Name (F Juan Jose	irst Name)	2. Surname (Last Name Ruiz-Manzanera) 3. Date 20-March-2020
4. Are you the co	rresponding author?	Yes 🖌 No	Corresponding Author's Name Victor Lopez-Lopez
5. Manuscript Titl Quality of life af		tion of hepatic hemangic	oma
6. Manuscript Ide	ntifying Number (if you l	know it)	
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Section 2.	The Work Under (Consideration for Pul	lication
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Are there any relevant conflicts of interest?

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Yes

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✓ No

Are there any relevant conflicts of interest?	Yes	\checkmark	No
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Do you have any patents, whether planned, pending or issued, broadly relevant to the work?		Yes	N/	0
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Dr. Ruiz-Manzanera has nothing to disclose.

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1. Given Name (F Asunción	irst Name)	2. Surname (Last Name) Lopez Conesa	3. Date 20-March-2020
4. Are you the co	rresponding author?	Yes 🖌 No	Corresponding Author's Name
			Victor Lopez-Lopez
5. Manuscript Titl Quality of life af		ion of hepatic hemangior	na
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Are there any relevant conflicts of interest?		Yes	✓
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No

Are there any relevant conflicts of interest?	Yes	\checkmark	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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1. Given Name (First Name) Roberto	2. Surname (Last Name) Brusadin		3. Date 20-March-2020		
4. Are you the corresponding author?	Yes 🖌 No	Corresponding Author's Name Victor Lopez-Lopez			
5. Manuscript Title Quality of life after laparoscopic resect	ion of hepatic hemangior	na			
6. Manuscript Identifying Number (if you k	know it)				
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Do you have any patents, whether planned, pending or issued, broadly relevant to the work?		Yes		٩٥
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Ricardo		Robles Campos		20-March-2020
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Dr. Robles Campos has nothing to disclose.

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