

#### 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.

## 1. Identifying information.

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#### 3. Relevant financial activities outside the submitted work.

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## 4. Intellectual Property.

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

#### 5. Relationships not covered above.

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**Royalties:** Funds are coming in to you or your institution due to your patent



Section 1.	Identifying Inform	nation			
1. Given Name (Fi BEATRICE	rst Name)	2. Surname (Last Name) D'ORAZIO	3. Date 15-November-2020		
4. Are you the corresponding author?		Yes 🖌 No	Corresponding Author's Name Dr Farinella Eleonora		
5. Manuscript Title Laparoscopic Repair of Giant Diaphragmatic Hernia after minimal invasive Esophagectomy: A case Report and review of the literature.					
6. Manuscript Ide	ntifying Number (if you k	now it)			
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# 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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# Section 6. Disclosure Statement

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Dr. D'ORAZIO has nothing to disclose.

#### **Evaluation and Feedback**

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1. Given Name (Fi PERRINE	rst Name)	2. Surname (Last Name) LEDENT		3. Date 15-November-2020
4. Are you the corresponding author?		Yes 🖌 No	Corresponding Author's Name Dr Farinella Eleonora	
5. Manuscript Title Laparoscopic Re literature.		matic Hernia after minim	al invasive Esophagectomy: A	case Report and review of the
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	1 1			



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1. Given Name (F ELEONORA	First Name)	2. Surname (Last Name) FARINELLA	3. Date 15-November-2020
4. Are you the corresponding author?		✓ Yes No	
5 Manuscript Tit	lo		

5. Manuscript Litle

Laparoscopic Repair of Giant Diaphragmatic Hernia after minimal invasive Esophagectomy: A case Report and review of the literature.

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