

ICMJE Form for Disclosure of Potential Conflicts of Interest

Instructions

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2. The work under consideration for publication.

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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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Other: Anything not covered under the previous three boxes

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)
Marcin

2. Surname (Last Name)
Zieliński

3. Date
25-February-2018

4. Are you the corresponding author? Yes No

5. Manuscript Title
Transcervical thymectomy

6. Manuscript Identifying Number (if you know it)
MED-2017-MIT-09

Section 2. The Work Under Consideration for Publication

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Dr. Zieliński has nothing to disclose.

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name) Mariusz	2. Surname (Last Name) Rybak	3. Date 25-February-2018
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Marcin Zieliński
5. Manuscript Title Transcervical thymectomy		
6. Manuscript Identifying Number (if you know it) MED-2017-MIT-09		

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Dr. Rybak has nothing to disclose.

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Section 1. Identifying Information

1. Given Name (First Name) Katarzyna	2. Surname (Last Name) Solarczyk-Bombik	3. Date 25-February-2018
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Marcin Zieliński
5. Manuscript Title Transcervical thymectomy		
6. Manuscript Identifying Number (if you know it) MED-2017-MIT-09		

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Dr. Solarczyk-Bombik has nothing to disclose.

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Section 1. Identifying Information

1. Given Name (First Name) Michal	2. Surname (Last Name) Wilkojc	3. Date 25-February-2018
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Marcin Zieliński
5. Manuscript Title Transcervical thymectomy		
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Dr. Wilkojc has nothing to disclose.

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Wojciech

2. Surname (Last Name)

Czajkowski

3. Date

25-February-2018

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 Yes No

Corresponding Author's Name

Marcin Zieliński

5. Manuscript Title

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Section 1. Identifying Information

1. Given Name (First Name) Sylwewiusz	2. Surname (Last Name) Kosinski	3. Date 25-February-2018
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Marcin Zieliński
5. Manuscript Title Transcervical thymectomy		
6. Manuscript Identifying Number (if you know it) MED-2017-MIT-09		

Section 2. The Work Under Consideration for Publication

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Are there any relevant conflicts of interest? Yes No

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Are there any relevant conflicts of interest? Yes No

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. Kosinski has nothing to disclose.

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name) Edward	2. Surname (Last Name) Fryzlewicz	3. Date 25-February-2018
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Marcin Zieliński
5. Manuscript Title Transcervical thymectomy		
6. Manuscript Identifying Number (if you know it) MED-2017-MIT-09		

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Dr. Fryzlewicz has nothing to disclose.

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name) Tomasz	2. Surname (Last Name) Nabialek	3. Date 25-February-2018
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Marcin Zieliński
5. Manuscript Title Transcervical thymectomy		
6. Manuscript Identifying Number (if you know it) MED-2017-MIT-09		

Section 2. The Work Under Consideration for Publication

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Are there any relevant conflicts of interest? Yes No

Section 3. Relevant financial activities outside the submitted work.

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Are there any relevant conflicts of interest? Yes No

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. Nabialek has nothing to disclose.

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name) Malgorzata	2. Surname (Last Name) Szolkowska	3. Date 25-February-2018
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Marcin Zieliński
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Section 1. Identifying Information

1. Given Name (First Name) Juliusz	2. Surname (Last Name) Pankowski	3. Date 25-February-2018
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Marcin Zieliński
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