

ICMJE Form for Disclosure of Potential Conflicts of Interest

Instructions

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4. Intellectual Property.

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

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name) Christopher	2. Surname (Last Name) Razavi	3. Date 05-October-2017
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Jonathon O. Russell
5. Manuscript Title Central neck dissection via the transoral approach		
6. Manuscript Identifying Number (if you know it) AOT-17-20		

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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Section 6. Disclosure Statement

Based on the above disclosures, this form will automatically generate a disclosure statement, which will appear in the box below.

Dr. Razavi has nothing to disclose.

Evaluation and Feedback

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)
Akeweh

2. Surname (Last Name)
Fondong

3. Date
05-October-2017

4. Are you the corresponding author? Yes No

Corresponding Author's Name
Jonathon O. Russell

5. Manuscript Title
Central neck dissection via the transoral approach

6. Manuscript Identifying Number (if you know it)
AOT-17-20

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Dr. Fondong has nothing to disclose.

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1. Given Name (First Name) Ralph	2. Surname (Last Name) Tufano	3. Date 05-October-2017
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Jonathon O. Russell
5. Manuscript Title Central neck dissection via the transoral approach		
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