

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.

2. The work under consideration for publication.

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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.

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



. Given Name (First Name) Guido	2. Surname (Last Name) Zanghì) 3. Date 18-March-2018
Are you the corresponding author?	Yes 🖌 No	Corresponding Author's Name Gianlorenzo Dionigi
. Manuscript Title vidence-based medicine measures 1	or neural monitoring in th	nyroid surgery
5. Manuscript Identifying Number (if you AOT-18-22	know it)	

The Work Under Consideration for Publication

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🖌 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. Zanghì has nothing to disclose.

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Section 1. Identifying Infor	mation	
1. Given Name (First Name) Hui	2. Surname (Last Name) Sun	3. Date 18-March-2018
4. Are you the corresponding author?	Yes 🖌 No	Corresponding Author's Name Gianlorenzo Dionigi
5. Manuscript Title Evidence-based medicine measures f	or neural monitoring in th	yroid surgery
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Are there any relevant conflicts of interest?	Y	/es
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