

## ICMJE Form for Disclosure of Potential Conflicts of Interest

### Instructions

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## ICMJE Form for Disclosure of Potential Conflicts of Interest

### Section 1. Identifying Information

1. Given Name (First Name) Mariacarla	2. Surname (Last Name) Moleti	3. Date 13-July-2018
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Francesco Vermiglio
5. Manuscript Title Autoimmune thyroid diseases and pregnancy		
6. Manuscript Identifying Number (if you know it) AOT-2018-TP-05		

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Dr. Moleti 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)

Giacomo

2. Surname (Last Name)

Sturniolo

3. Date

13-July-2018

4. Are you the corresponding author?

 Yes No

Corresponding Author's Name

Francesco Vermiglio

5. Manuscript Title

Autoimmune thyroid diseases and pregnancy

6. Manuscript Identifying Number (if you know it)

AOT-2018-TP-05

### Section 2. The Work Under Consideration for Publication

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Dr. Sturniolo has nothing to disclose.

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1. Given Name (First Name) Maria	2. Surname (Last Name) Di Mauro	3. Date 13-July-2018
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Francesco Vermiglio
5. Manuscript Title Autoimmune thyroid diseases and pregnancy		
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Dr. Di Mauro has nothing to disclose.

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1. Given Name (First Name) Marco	2. Surname (Last Name) Russo	3. Date 13-July-2018
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Francesco Vermiglio
5. Manuscript Title Autoimmune thyroid diseases and pregnancy		
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Francesco

2. Surname (Last Name)  
Vermiglio

3. Date  
13-July-2018

4. Are you the corresponding author?  Yes  No

5. Manuscript Title  
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6. Manuscript Identifying Number (if you know it)  
AOT-2018-TP-05

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