

ICMJE Form for Disclosure of Potential Conflicts of Interest

Instructions

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Section 1. Identifying Information

1. Given Name (First Name)
Bradley

2. Surname (Last Name)
Hawayek

3. Date
26-October-2020

4. Are you the corresponding author?

Yes No

Corresponding Author's Name
Christopher Lucasti, MD

5. Manuscript Title

Giant Cell Tumor of the Thoracic Spine Causing Acute Paraplegia; A Case Report

6. Manuscript Identifying Number (if you know it)

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Mr. Hawayek has nothing to disclose.

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Section 1. Identifying Information

1. Given Name (First Name)
Christopher

2. Surname (Last Name)
Lucasti

3. Date
26-October-2020

4. Are you the corresponding author? Yes No

5. Manuscript Title
Giant Cell Tumor of the Thoracic Spine Causing Acute Paraplegia; A Case Report

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Dr. Lucasti has nothing to disclose.

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1. Given Name (First Name) Dil	2. Surname (Last Name) Patel	3. Date 26-October-2020
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Christopher Lucasti, MD
5. Manuscript Title Giant Cell Tumor of the Thoracic Spine Causing Acute Paraplegia; A Case Report		
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