

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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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)

Daniele

2. Surname (Last Name)

Di Martino

3. Date

05-December-2020

4. Are you the corresponding author?

Yes No

5. Manuscript Title

LAPAROSCOPIC MANAGEMENT OF A GIANT HIATAL HERNIA WITH GASTRIC VOLVULUS: A CASE REPORT

6. Manuscript Identifying Number (if you know it)

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Dr. Di Martino 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)

Mirko

2. Surname (Last Name)

Barone

3. Date

05-December-2020

4. Are you the corresponding author?

Yes No

Corresponding Author's Name

Daniele Di Martino

5. Manuscript Title

LAPAROSCOPIC MANAGEMENT OF A GIANT HIATAL HERNIA WITH GASTRIC VOLVULUS: A CASE REPORT

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1. Given Name (First Name) Massimo	2. Surname (Last Name) Ippoliti	3. Date 05-December-2020
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Daniele Di Martino
5. Manuscript Title LAPAROSCOPIC MANAGEMENT OF A GIANT HIATAL HERNIA WITH GASTRIC VOLVULUS: A CASE REPORT		
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Felice

2. Surname (Last Name)

Mucilli

3. Date

05-December-2020

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Corresponding Author's Name

Daniele Di Martino

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