

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)
Antonio

2. Surname (Last Name)
Calafiore

3. Date
20-March-2020

4. Are you the corresponding author? Yes No

5. Manuscript Title
Minimally invasive mitral valve repair: for every patient, for every surgeon or still a work in progress?

6. Manuscript Identifying Number (if you know it)
JTD-20-260

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1. Given Name (First Name) Antonio	2. Surname (Last Name) Totaro	3. Date 20-March-2020
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Calafiore
5. Manuscript Title Minimally invasive mitral valve repair: for every patient, for every surgeon or still a work in progress?		
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1. Given Name (First Name) Nicola	2. Surname (Last Name) Testa	3. Date 20-March-2020
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