

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)
CRISTIAN

2. Surname (Last Name)
DEANA

3. Date

4. Are you the corresponding author? Yes No

5. Manuscript Title
PERI-OPERATIVE APPROACH TO ESOPHAGECTOMY: A NARRATIVE REVIEW FROM THE ANESTHESIOLOGICAL STANDPOINT.

6. Manuscript Identifying Number (if you know it)
JTD-21-940-CL

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Dr. DEANA has nothing to disclose.

Evaluation and Feedback

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Section 1. Identifying Information

1. Given Name (First Name)
LUIGI

2. Surname (Last Name)
VETRUGNO

3. Date

4. Are you the corresponding author?

Yes No

Corresponding Author's Name
CRISTIAN DEANA

5. Manuscript Title

PERI-OPERATIVE APPROACH TO ESOPHAGECTOMY: A NARRATIVE REVIEW FROM THE ANESTHESIOLOGICAL STANDPOINT.

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Dr. VETRUGNO has nothing to disclose.

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ELENA GIOVANNA

2. Surname (Last Name)
BIGNAMI

3. Date

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Yes No

Corresponding Author's Name
CRISTIAN DEANA

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