

ICMJE Form for Disclosure of Potential Conflicts of Interest

Instructions

The purpose of this form is to provide readers of your manuscript with information about your other interests that could influence how they receive and understand your work. The form is designed to be completed electronically and stored electronically. It contains programming that allows appropriate data display. Each author should submit a separate form and is responsible for the accuracy and completeness of the submitted information. The form is in six parts.

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Section 1. Identifying Information

1. Given Name (First Name)
Alexandre Vasconcellos Alvim
2. Surname (Last Name)
Ambrósio
3. Date
21-June-2019
4. Are you the corresponding author? Yes No
5. Manuscript Title
Partial breast irradiation: when less could be more
6. Manuscript Identifying Number (if you know it)

Section 2. The Work Under Consideration for Publication

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Are there any relevant conflicts of interest? Yes No

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Section 6. Disclosure Statement

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Dr. Ambrósio 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)
Guilherme Rocha Melo

2. Surname (Last Name)
Gondim

3. Date
21-June-2019

4. Are you the corresponding author? Yes No

Corresponding Author's Name
Alexandre Vasconcellos Alvim Ambrósio

5. Manuscript Title
Partial breast irradiation: when less could be more

6. Manuscript Identifying Number (if you know it)

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Dr. Gondim has nothing to disclose.

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Section 1. Identifying Information

1. Given Name (First Name) Murilo José Inocente	2. Surname (Last Name) Inácio	3. Date 21-June-2019
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Alexandre Vasconcellos Alvim Ambrósio
5. Manuscript Title Partial breast irradiation: when less could be more		
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1. Given Name (First Name) Antônio Cássio	2. Surname (Last Name) de Assis Pellizzon	3. Date 21-June-2019
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Alexandre Vasconcellos Alvim Ambrósio
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