

Instructions

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Section 1.	Identifying Inforr	nation	
1. Given Name (Fi Benoit Jacques	rst Name)	2. Surname (Last Name) Bibas	3. Date 16-January-2020
4. Are you the cor	responding author?	✓ Yes No	
5. Manuscript Title Quality-of-life ev		ith laryngotracheal diseases	
6. Manuscript Ider	ntifying Number (if you k	now it)	

Section 2. The Work Under Consideration for Publication

Did you or your institution **at any time** receive payment or services from a third party (government, commercial, private foundation, etc.) for any aspect of the submitted work (including but not limited to grants, data monitoring board, study design, manuscript preparation, statistical analysis, etc.)?

🖌 No

Are there any relevant conflicts of interest?		Yes	
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Are there any relevant conflicts of interest?		Yes	\checkmark	No
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Section 4. Intellectual Property -- Patents & Copyrights

Do you have any patents, whether planned, pending or issued, broadly relevant to the work?		Yes	\checkmark	No
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Dr. Bibas has nothing to disclose.

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1. Given Name (Fi Paulo Francisco		2. Surname (Last Name) Cardoso		3. Date 16-January-2020
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🖌 No

Yes

Are there any relevant conflicts of interest?		Yes	\checkmark	No
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statistical analysis, etc.)?

Are there any relevant conflicts of interest?

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