

ICMJE Form for Disclosure of Potential Conflicts of Interest

Instructions

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4. Intellectual Property.

This section asks about patents and copyrights, whether pending, issued, licensed and/or receiving royalties.

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)
Ammara

2. Surname (Last Name)
Watkins

3. Date
27-April-2020

4. Are you the corresponding author? ☐ Yes ☒ No

5. Manuscript Title
Revision tracheobronchoplasty: case report

6. Manuscript Identifying Number (if you know it)
CCTS-19-36

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Dr. Watkins has nothing to disclose.

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)

Jennifer

2. Surname (Last Name)

Wilson

3. Date

27-April-2020

4. Are you the corresponding author?

☐ Yes☒ No

Corresponding Author's Name

Sidhu P. Gangadharan

5. Manuscript Title

Revision tracheobronchoplasty: case report

6. Manuscript Identifying Number (if you know it)

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Dr. Wilson has nothing to disclose.

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Section 1. Identifying Information

1. Given Name (First Name)
Mihir

2. Surname (Last Name)
Parikh

3. Date
20-April-2020

4. Are you the corresponding author? ☐ Yes ☒ No

Corresponding Author's Name
Sidhu P. Gangadharan

5. Manuscript Title
Revision tracheobronchoplasty: case report

6. Manuscript Identifying Number (if you know it)

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Dr. Parikh has nothing to disclose.

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Section 1. Identifying Information

1. Given Name (First Name)

Adnan

2. Surname (Last Name)

Majid

3. Date

28-April-2020

4. Are you the corresponding author?

☐

Yes

☒

No

Corresponding Author's Name

Sidhu P. Gangadharan

5. Manuscript Title

Revision tracheobronchoplasty: case report

6. Manuscript Identifying Number (if you know it)

CCTS-19-36

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Yes

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No

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☐

Yes

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Dr. Majid has nothing to disclose.

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Sidhu

2. Surname (Last Name)
Gangadharan

3. Date
27-April-2020

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Revision tracheobronchoplasty: case report

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