

#### **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.

# Identifying information.

# 2. The work under consideration for publication.

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### Relevant financial activities outside the submitted work.

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# 4. Intellectual Property.

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

# Relationships not covered above.

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#### Definitions.

Santos

**Entity:** government agency, foundation, commercial sponsor, academic institution, etc.

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Royalties: Funds are coming in to you or your institution due to your

1

administrative support, etc.



Section 1. Identifying Inforn	nation	
1. Given Name (First Name) Anderson M. S.	2. Surname (Last Name) Santos	3. Date 27-September-2020
4. Are you the corresponding author?	✓ Yes No	
5. Manuscript Title Aseptic necrosis of the maxilla in embo	olized patient: a challenger condition	
6. Manuscript Identifying Number (if you k FOMM-20-39	now it)	
Section 2. The Work Under C	onsideration for Publication	
	eive payment or services from a third party (government, control government) but not limited to grants, data monitoring board, study doest?	
Section 3. Relevant financial	activities outside the submitted work.	
Place a check in the appropriate boxes of compensation) with entities as descr	in the table to indicate whether you have financial re ibed in the instructions. Use one line for each entity; port relationships that were <b>present during the 36</b>	add as many lines as you need by
Sortion 4		
Section 4. Intellectual Prope	rty Patents & Copyrights	
Do you have any patents, whether plan	ned, pending or issued, broadly relevant to the work	k? ☐ Yes 🗸 No

Santos 2



Section 5. Relationships not severed above
Relationships not covered above
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Dr. Santos has nothing to disclose.

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Santos 3



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Barbosa 1



Section 1.	Identifying Inform	ation		
1. Given Name (Fire	st Name)	2. Surname (Last Name) Barbosa		Date September-2020
4. Are you the corre	esponding author?	Yes ✓ No	Corresponding Author's Name Anderson M. S. Santos	
5. Manuscript Title Aseptic necrosis o		ized patient: a challenger	condition	
6. Manuscript Iden FOMM-20-39	tifying Number (if you kn	ow it)		
			-	
Section 2.	The Work Under Co	onsideration for Public	ation	
any aspect of the su statistical analysis, e	ubmitted work (including	but not limited to grants, da	a third party (government, comme ta monitoring board, study design,	
Section 3.	Relevant financial	activities outside the s	ubmitted work.	
of compensation) clicking the "Add	) with entities as descri	bed in the instructions. Us port relationships that wer	ether you have financial relatior e one line for each entity; add a e <b>present during the 36 mont</b>	as many lines as you need by
Section 4.	Letelle steel De		l.c.	
	Intellectual Proper	ty Patents & Copyri <u>c</u>	ints	
Do you have any	patents, whether planr	ned, pending or issued, br	oadly relevant to the work?	Yes ✓ No

Barbosa 2



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Lima-Neto 1



Section 1. Identifyi	ng Information	
1. Given Name (First Name) Tiburtino J.	2. Surname (Last Name) Lima-Neto	3. Date 27-September-2020
4. Are you the corresponding a	uthor? Yes 🗸 No	Corresponding Author's Name Anderson M. S. Santos
5. Manuscript Title Aseptic necrosis of the maxil	la in embolized patient: a challenge	er condition
6. Manuscript Identifying Numb	per (if you know it)	
Section 2. The Work	Under Consideration for Publ	ication
	rk (including but not limited to grants, o	m a third party (government, commercial, private foundation, etc.) for data monitoring board, study design, manuscript preparation,
Section 3. Relevant	financial activities outside the	submitted work.
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Section 4. Intellectu		·
Intellectu	al Property Patents & Copyr	ights
Do you have any patents, wh	ether planned, pending or issued, k	proadly relevant to the work? Yes V No

Lima-Neto 2



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Dr. Lima-Neto has nothing to disclose.

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Lima-Neto 3



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Royalties: Funds are coming in to you or your institution due to your

1

administrative support, etc. Martins-Silva



Section 1.	Identifying Inform	nation	
1. Given Name (Fii Isadora	rst Name)	2. Surname (Last Name) Martins-Silva	3. Date 27-September-2020
4. Are you the cor	responding author?	Yes ✓ No	Corresponding Author's Name Anderson M. S. Santos
5. Manuscript Title Aseptic necrosis		lized patient: a challenger	condition
6. Manuscript Ider FOMM-20-39	ntifying Number (if you kr	now it)	
			-
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Do you have any	patents, whether plan	ned, pending or issued, br	oadly relevant to the work? Yes V No

Martins-Silva 2



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Villarim 1



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1. Given Name (First Name) Natalia	2. Surname (Last Name) Villarim	3. Date 27-September-2020
4. Are you the corresponding author?	Yes 🗸 No	Corresponding Author's Name Anderson M. S. Santos
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Intellectual Prop	perty Patents & Copyric	ints ————————————————————————————————————
Do you have any patents, whether pl	anned, pending or issued, br	roadly relevant to the work? Yes V No

Villarim 2



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Inaoka 1



Section 1.	Identifying Inform	ation		
1. Given Name (Fire	st Name)	2. Surname (Last Name) Inaoka		3. Date 27-September-2020
4. Are you the corre	esponding author?	Yes ✓ No	Corresponding Author's Name	e
5. Manuscript Title Aseptic necrosis o		ized patient: a challenger	condition	
6. Manuscript Iden FOMM-20-39	tifying Number (if you kn	ow it)		
			_	
Section 2.	The Work Under Co	onsideration for Public	cation	
any aspect of the su statistical analysis, e	ubmitted work (including	but not limited to grants, da	a third party (government, comi ta monitoring board, study desi	mercial, private foundation, etc.) for gn, manuscript preparation,
Section 3.	Relevant financial	activities outside the s	submitted work.	
of compensation) clicking the "Add	) with entities as descri	bed in the instructions. Use port relationships that wer		cionships (regardless of amount d as many lines as you need by onths prior to publication.
Section 4.	Leading to LD		de c	
	Intellectual Proper	ty Patents & Copyric	ghts	
Do you have any	patents, whether planr	ned, pending or issued, br	oadly relevant to the work?	Yes 🗸 No

Inaoka 2



Section 5.	
Section 5.	Relationships not covered above
	elationships or activities that readers could perceive to have influenced, or that give the appearance of encing, what you wrote in the submitted work?
Yes, the follo	wing relationships/conditions/circumstances are present (explain below):
✓ No other rela	tionships/conditions/circumstances that present a potential conflict of interest
	anuscript acceptance, journals will ask authors to confirm and, if necessary, update their disclosure statements rnals may ask authors to disclose further information about reported relationships.
Section 6.	Disclosure Statement
Based on the abo below.	ove disclosures, this form will automatically generate a disclosure statement, which will appear in the box
Dr. Inaoka has n	othing to disclose.

# **Evaluation and Feedback**

Please visit <a href="http://www.icmje.org/cgi-bin/feedback">http://www.icmje.org/cgi-bin/feedback</a> to provide feedback on your experience with completing this form.

Inaoka 3



#### **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.

# Identifying information.

# 2. The work under consideration for publication.

This section asks for information about the work that you have submitted for publication. The time frame for this reporting is that of the work itself, from the initial conception and planning to the present. The requested information is about resources that you received, either directly or indirectly (via your institution), to enable you to complete the work. Checking "No" means that you did the work without receiving any financial support from any third party -- that is, the work was supported by funds from the same institution that pays your salary and that institution did not receive third-party funds with which to pay you. If you or your institution received funds from a third party to support the work, such as a government granting agency, charitable foundation or commercial sponsor, check "Yes".

### Relevant financial activities outside the submitted work.

This section asks about your financial relationships with entities in the bio-medical arena that could be perceived to influence, or that give the appearance of potentially influencing, what you wrote in the submitted work. You should disclose interactions with ANY entity that could be considered broadly relevant to the work. For example, if your article is about testing an epidermal growth factor receptor (EGFR) antagonist in lung cancer, you should report all associations with entities pursuing diagnostic or therapeutic strategies in cancer in general, not just in the area of EGFR or lung cancer.

Report all sources of revenue paid (or promised to be paid) directly to you or your institution on your behalf over the 36 months prior to submission of the work. This should include all monies from sources with relevance to the submitted work, not just monies from the entity that sponsored the research. Please note that your interactions with the work's sponsor that are outside the submitted work should also be listed here. If there is any question, it is usually better to disclose a relationship than not to do so.

For grants you have received for work outside the submitted work, you should disclose support ONLY from entities that could be perceived to be affected financially by the published work, such as drug companies, or foundations supported by entities that could be perceived to have a financial stake in the outcome. Public funding sources, such as government agencies, charitable foundations or academic institutions, need not be disclosed. For example, if a government agency sponsored a study in which you have been involved and drugs were provided by a pharmaceutical company, you need only list the pharmaceutical company.

# 4. Intellectual Property.

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

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#### Definitions.

**Entity:** government agency, foundation, commercial sponsor, academic institution, etc.

**Grant:** A grant from an entity, generally [but not always] paid to your organization

**Personal Fees:** Monies paid to you for services rendered, generally honoraria, royalties, or fees for consulting, lectures, speakers bureaus, expert testimony, employment, or other affiliations

**Non-Financial Support:** Examples include drugs/equipment supplied by the entity, travel paid by the entity, writing assistance, administrative support, etc.

Other: Anything not covered under the previous three boxes

**Pending:** The patent has been filed but not issued

**Issued:** The patent has been issued by the agency

**Licensed:** The patent has been licensed to an entity, whether earning royalties or not

**Royalties:** Funds are coming in to you or your institution due to your patent

Costa 1



Section 1.	Identifying Inform	ation			
1. Given Name (First Name) Davi		2. Surname (Last Name) Costa	3. Date 27-September-2020		
4. Are you the corresponding author?		Yes ✓ No	Corresponding Author's Name Anderson M. S. Santos		
5. Manuscript Title Aseptic necrosis of the maxilla in embol		ized patient: a challenger	condition		
6. Manuscript Ider FOMM-20-39	ntifying Number (if you kn	ow it)			
Section 2.	The Work Under Co	onsideration for Public	cation		
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Section 3.	Relevant financial	activities outside the s	ubmitted work.		
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Section 4.					
Section 4.	Intellectual Proper	ty Patents & Copyric	hts		
Do you have any	patents, whether plan	ned, pending or issued, br	oadly relevant to the work? Yes V No		

Costa 2



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Section 6. Disclosure Statement				
Based on the above disclosures, this form will automatically generate a disclosure statement, which will appear in the box below.				
Dr. Costa has nothing to disclose.				

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Faverani 1



Section 1.	dentifying Informa	tion				
Given Name (First Name) Leonardo P.		2. Surname (Last Name) Faverani		3. Date 27-September-2020		
4. Are you the corresponding author?		Yes ✓ No	Corresponding Author's Nam Anderson M. S. Santos	ne		
5. Manuscript Title Aseptic necrosis of the maxilla in embolized p		red patient: a challenger	condition			
6. Manuscript Identify FOMM-20-39	ying Number (if you kno	w it)				
Section 2.	he Work Under Cor	nsideration for Publi	cation			
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Section 4.						
In	itellectual Property	y Patents & Copyri	ghts			
Do you have any pa	tents, whether planne	ed, pending or issued, bi	roadly relevant to the work?	☐ Yes 🗸 No		

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Section 5.				
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Dr. Faverani has ı	nothing to disclose.			

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