

ICMJE DISCLOSURE FORM

Your Name: Craig Pearl

Manuscript Title: Surgery First: Current state of the art orthognathic surgery and its potential as a primary treatment modality in obstructive sleep apnea with concurrent dentofacial deformities

Manuscript number (if known): FOMM-21-61

In the interest of transparency, we ask you to disclose all relationships/activities/interests listed below that are related to the content of your manuscript. "Related" means any relation with for-profit or not-for-profit third parties whose interests may be affected by the content of the manuscript. Disclosure represents a commitment to transparency and does not necessarily indicate a bias. If you are in doubt about whether to list a relationship/activity/interest, it is preferable that you do so.

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		Name all entities with whom you have this relationship or indicate none (add rows as needed)	Specifications/Comments (e.g., if payments were made to you or to your institution)
Time frame: Since the initial planning of the work			
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2	Grants or contracts from any entity (if not indicated in item #1 above).	<input checked="" type="checkbox"/> None	
3	Royalties or licenses	<input checked="" type="checkbox"/> None	
4	Consulting fees	<input checked="" type="checkbox"/> None	
5	Payment or honoraria for lectures, presentations,	<input checked="" type="checkbox"/> None	

	speakers bureaus, manuscript writing or educational events		
6	Payment for expert testimony	<input checked="" type="checkbox"/> None	
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12	Receipt of equipment, materials, drugs, medical writing, gifts or other services	<input checked="" type="checkbox"/> None	
13	Other financial or non-financial interests	<input checked="" type="checkbox"/> None	

Please summarize the above conflict of interest in the following box:

None

Please place an "X" next to the following statement to indicate your agreement:

I certify that I have answered every question and have not altered the wording of any of the questions on this form.

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Your Name: David Chubb

Manuscript Title: Surgery First: Current state of the art orthognathic surgery and its potential as a primary treatment modality in obstructive sleep apnea with concurrent dentofacial deformities

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Your Name: Jose M. Marchena

Manuscript Title: Surgery First: Current state of the art orthognathic surgery and its potential as a primary treatment modality in obstructive sleep apnea with concurrent dentofacial deformities

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Your Name: Peter Waite

Manuscript Title: Surgery First: Current state of the art orthognathic surgery and its potential as a primary treatment modality in obstructive sleep apnea with concurrent dentofacial deformities

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ICMJE DISCLOSURE FORM

Date: July 5, 2021

Your Name: Adriana Morales Buendia

Manuscript Title: Surgery First: Current state of the art orthognathic surgery and its potential as a primary treatment modality in obstructive sleep apnea with concurrent dentofacial deformities

Manuscript number (if known): _____ FOMM-21-61_____

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Date: July 5, 2021

Your Name: **Chung How Kau**

Manuscript Title: **Surgery First: Current state of the art orthognathic surgery and its potential as a primary treatment modality in obstructive sleep apnea with concurrent dentofacial deformities**

Manuscript number (if known): **FOMM-21-61**

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