

ICMJJE 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)
Luke M.

2. Surname (Last Name)
O'Neil

3. Date
30-December-2017

4. Are you the corresponding author? Yes No

5. Manuscript Title
Local experience using botulinum toxin for the management of post-parotidectomy fistulas and recurrent parotitis

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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Are there any relevant conflicts of interest? Yes No

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Do you have any patents, whether planned, pending or issued, broadly relevant to the work? Yes No

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Section 6. Disclosure Statement

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Dr. O'Neil 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) Carsten E.	2. Surname (Last Name) Palme	3. Date 30-December-2017
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Luke M. O'Neil
5. Manuscript Title Local experience using botulinum toxin for the management of post-parotidectomy fistulas and recurrent parotitis		
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Are there any relevant conflicts of interest? Yes No

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Dr. Palme has nothing to disclose.

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1. Given Name (First Name) Faruque	2. Surname (Last Name) Riffat	3. Date 30-December-2017
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Luke M. O'Neil
5. Manuscript Title Local experience using botulinum toxin for the management of post-parotidectomy fistulas and recurrent parotitis		
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1. Given Name (First Name) Neil	2. Surname (Last Name) Mahant	3. Date 30-December-2017
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