

## 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)  
Carolina

2. Surname (Last Name)  
Wuesthoff

3. Date  
21-November-2018

4. Are you the corresponding author?

☐ Yes ☒ No

Corresponding Author's Name  
Nirmal Patel

5. Manuscript Title  
How I do it—endoscopic composite cartilage graft tympanoplasty

6. Manuscript Identifying Number (if you know it)

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Dr. Wuesthoff 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)

Joel

2. Surname (Last Name)

Hardman

3. Date

21-November-2018

4. Are you the corresponding author?

☐ Yes ☒ No

Corresponding Author's Name

Nirmal Patel

5. Manuscript Title

How I do it—endoscopic composite cartilage graft tympanoplasty

6. Manuscript Identifying Number (if you know it)

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Dr. Hardman has nothing to disclose.

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### Section 1. Identifying Information

1. Given Name (First Name)

Alexander J.

2. Surname (Last Name)

Saxby

3. Date

21-November-2018

4. Are you the corresponding author?

☐ Yes

☒ No

Corresponding Author's Name

Nirmal Patel

5. Manuscript Title

How I do it—endoscopic composite cartilage graft tympanoplasty

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Dr. Saxby 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) Nicholas	2. Surname (Last Name) Jufas	3. Date 21-November-2018
4. Are you the corresponding author? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Corresponding Author's Name Nirmal Patel
5. Manuscript Title How I do it—endoscopic composite cartilage graft tympanoplasty		
6. Manuscript Identifying Number (if you know it)  		

### Section 2. The Work Under Consideration for Publication

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Dr. Jufas has nothing to disclose.

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1. Given Name (First Name)

Nirmal

2. Surname (Last Name)

Patel

3. Date

21-November-2018

4. Are you the corresponding author?

☒ Yes ☐ No

5. Manuscript Title

How I do it—endoscopic composite cartilage graft tympanoplasty

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