

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

ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)
Karl-Hermann

2. Surname (Last Name)
Fuchs

3. Date
19-April-2020

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

5. Manuscript Title
Pathophysiology of GERD - which factors are important?

6. Manuscript Identifying Number (if you know it)

Section 2. The Work Under Consideration for Publication

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Dr. Fuchs has nothing to disclose.

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Section 1. Identifying Information

1. Given Name (First Name) Arielle M	2. Surname (Last Name) Lee	3. Date 19-April-2020
4. Are you the corresponding author? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Corresponding Author's Name Karl-Hermann Fuchs
5. Manuscript Title Pathophysiology of GERD - which factors are important?		
6. Manuscript Identifying Number (if you know it) 		

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Dr. Lee has nothing to disclose.

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Section 1. Identifying Information

1. Given Name (First Name)
Wolfram

2. Surname (Last Name)
Breithaupt

3. Date
19-April-2020

4. Are you the corresponding author?

☐ Yes ☒ No

Corresponding Author's Name
Karl-Hermann Fuchs

5. Manuscript Title
Pathophysiology of GERD - which factors are important?

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Dr. Breithaupt has nothing to disclose.

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1. Given Name (First Name)

Gabor

2. Surname (Last Name)

Varga

3. Date

19-April-2020

4. Are you the corresponding author?

☐ Yes ☒ No

Corresponding Author's Name

Karl-Hermann Fuchs

5. Manuscript Title

Pathophysiology of GERD - which factors are important?

6. Manuscript Identifying Number (if you know it)

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Benjamin

2. Surname (Last Name)
Babic

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19-April-2020

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☐ Yes

☒ No

Corresponding Author's Name
Karl-Hermann Fuchs

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name) Santiago	2. Surname (Last Name) Horgan	3. Date 19-April-2020
4. Are you the corresponding author? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Corresponding Author's Name Karl-Hermann Fuchs
5. Manuscript Title Pathophysiology of GERD - which factors are important?		
6. Manuscript Identifying Number (if you know it) 		

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Did you or your institution **at any time** receive payment or services from a third party (government, commercial, private foundation, etc.) for any aspect of the submitted work (including but not limited to grants, data monitoring board, study design, manuscript preparation, statistical analysis, etc.)?

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Based on the above disclosures, this form will automatically generate a disclosure statement, which will appear in the box below.

Dr. Horgan reports other from stock option from Torax medical, outside the submitted work; .

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