

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)
Pier Luigi

2. Surname (Last Name)
Filosso

3. Date
02-December-2017

4. Are you the corresponding author? Yes No

5. Manuscript Title
Minimally-invasive surgery for non-thymomatous myasthenia gravis

6. Manuscript Identifying Number (if you know it)
SHC-2017-27

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Dr. Filosso has nothing to disclose.

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Section 1. Identifying Information

| | | |
|---|---|---|
| 1. Given Name (First Name) Enrico | 2. Surname (Last Name) Ruffini | 3. Date 02-December-2017 |
| 4. Are you the corresponding author? | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | Corresponding Author's Name Pier Luigi Filosso |
| 5. Manuscript Title Minimally-invasive surgery for non-thymomatous myasthenia gravis | | |
| 6. Manuscript Identifying Number (if you know it) SHC-2017-27 | | |

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Dr. Ruffini has nothing to disclose.

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| | | |
|---|---|---|
| 1. Given Name (First Name) Paolo Olivo | 2. Surname (Last Name) Lausi | 3. Date 02-December-2017 |
| 4. Are you the corresponding author? | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | Corresponding Author's Name Pier Luigi Filosso |
| 5. Manuscript Title Minimally-invasive surgery for non-thymomatous myasthenia gravis | | |
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Section 1. Identifying Information

1. Given Name (First Name)
Paraskevas

2. Surname (Last Name)
Lyberis

3. Date
02-December-2017

4. Are you the corresponding author?

Yes No

Corresponding Author's Name
Pier Luigi Filosso

5. Manuscript Title
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1. Given Name (First Name)
Lorena

2. Surname (Last Name)
Costardi

3. Date
02-December-2017

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Corresponding Author's Name
Pier Luigi Filosso

5. Manuscript Title
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| | | |
|---|---|---|
| 1. Given Name (First Name) Stefania | 2. Surname (Last Name) Olivetti | 3. Date 02-December-2017 |
| 4. Are you the corresponding author? | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | Corresponding Author's Name Pier Luigi Filosso |
| 5. Manuscript Title Minimally-invasive surgery for non-thymomatous myasthenia gravis | | |
| 6. Manuscript Identifying Number (if you know it) SHC-2017-27 | | |

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Are there any relevant conflicts of interest? Yes No

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

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| | | |
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| 4. Are you the corresponding author? | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | Corresponding Author's Name Pier Luigi Filosso |
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Are there any relevant conflicts of interest? Yes No

Section 4. Intellectual Property -- Patents & Copyrights

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

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Section 1. Identifying Information

1. Given Name (First Name)
Francesco

2. Surname (Last Name)
Guerrera

3. Date
02-December-2017

4. Are you the corresponding author?

Yes No

Corresponding Author's Name
Pier Luigi Filosso

5. Manuscript Title
Minimally-invasive surgery for non-thymomatous myasthenia gravis

6. Manuscript Identifying Number (if you know it)
SHC-2017-27

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Dr. Guerrero has nothing to disclose.

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