

Instructions

The purpose of this form is to provide readers of your manuscript with information about your other interests that could influence how they receive and understand your work. The form is designed to be completed electronically and stored electronically. It contains programming that allows appropriate data display. Each author should submit a separate form and is responsible for the accuracy and completeness of the submitted information. The form is in six parts.

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This section asks about patents and copyrights, whether pending, issued, licensed and/or receiving royalties.

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1. Given Name (First Name) Barbara	2. Surname (Last Name) Lattanzi	3. Date 14-July-2017		
4. Are you the corresponding author?	Yes 🖌 No	Corresponding Author's Name Manuela Merli		
5. Manuscript Title The use of non-selective beta-blockers in patients with cirrhosis: more doubts than certainties				
6. Manuscript Identifying Number (if you know it)				
Section 2. The Work Under Co	onsideration for Public	cation		
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Dr. Lattanzi has nothing to disclose.

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1. Given Name (First Name) Vincenza	2. Surname (Last Name) Di Gregorio	3. Date 14-July-2017		
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