

ICMJE DISCLOSURE FORM

Date: June. 15th, 2022

Your Name: _Rocco Morra

Manuscript Title: The unusual first sign of presentation of renal cell carcinoma: a rare case report

Manuscript number (if known): ACR-22-16CL

In the interest of transparency, we ask you to disclose all relationships/activities/interests listed below that are related to the content of your manuscript. "Related" means any relation with for-profit or not-for-profit third parties whose interests may be affected by the content of the manuscript. Disclosure represents a commitment to transparency and does not necessarily indicate a bias. If you are in doubt about whether to list a relationship/activity/interest, it is preferable that you do so.

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13	Other financial or non-financial interests	<input checked="" type="checkbox"/> None	

Please summarize the above conflict of interest in the following box:

None.

Please place an "X" next to the following statement to indicate your agreement:

I certify that I have answered every question and have not altered the wording of any of the questions on this form.

Rose Chorro

ICMJE DISCLOSURE FORM

Date: June. 15th, 2022

Your Name: _Antonio D'Ambrosio

Manuscript Title: The unusual first sign of presentation of renal cell carcinoma: a rare case report

Manuscript number (if known): ACR-22-16CL

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Antonio D'Ambrosio

ICMJE DISCLOSURE FORM

Date: June. 15th, 2022

Your Name: _Erica Pietroluongo

Manuscript Title: The unusual first sign of presentation of renal cell carcinoma: a rare case report

Manuscript number (if known): ACR-22-16CL

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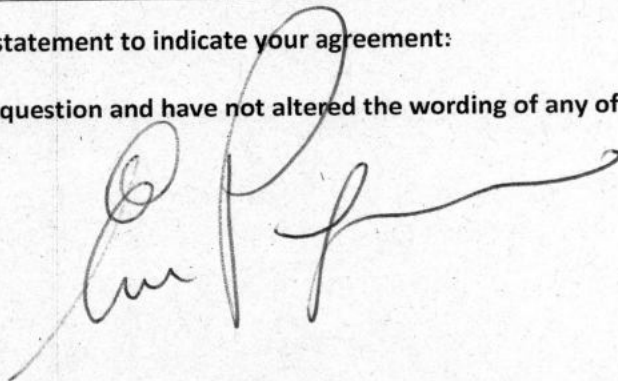
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ICMJE DISCLOSURE FORM

Date: June. 15th, 2022

Your Name: _Pietro De Placido

Manuscript Title: The unusual first sign of presentation of renal cell carcinoma: a rare case report

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ICMJE DISCLOSURE FORM

Date: June. 15th, 2022

Your Name: _Liliana Montella

Manuscript Title: The unusual first sign of presentation of renal cell carcinoma: a rare case report

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ICMJE DISCLOSURE FORM

Date: June. 15th, 2022

Your Name: _Vitantonio Del Deo

Manuscript Title: The unusual first sign of presentation of renal cell carcinoma: a rare case report

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Michael Bell

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Date: June. 15th, 2022

Your Name: Marianna Tortora

Manuscript Title: The unusual first sign of presentation of renal cell carcinoma: a rare case report

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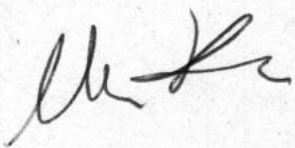
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ICMJE DISCLOSURE FORM

Date: June. 15th, 2022

Your Name: Elide Matano

Manuscript Title: The unusual first sign of presentation of renal cell carcinoma: a rare case report

Manuscript number (if known): ACR-22-16CL

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Date: June. 15th, 2022

Your Name: Vincenzo Damiano

Manuscript Title: The unusual first sign of presentation of renal cell carcinoma: a rare case report

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Date: June. 15th, 2022

Your Name: Giovannella Palmieri

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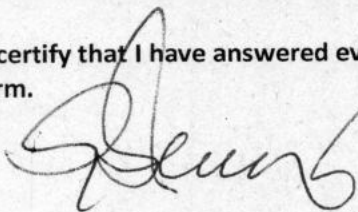
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Manuscript Title: The unusual first sign of presentation of renal cell carcinoma: a rare case report

Manuscript number (if known): ACR-22-16CL

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8	Patents planned, issued or pending	<input checked="" type="checkbox"/> None	
9	Participation on a Data Safety Monitoring Board or Advisory Board	<input checked="" type="checkbox"/> None	
10	Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid	<input checked="" type="checkbox"/> None	
11	Stock or stock options	<input checked="" type="checkbox"/> None	
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I certify that I have answered every question and have not altered the wording of any of the questions on this form.

ICMJE DISCLOSURE FORM

Date: June. 15th, 2022

Your Name: Mario Giuliano

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Time frame: past 36 months			
2	Grants or contracts from any entity (if not indicated in item #1 above).	<input checked="" type="checkbox"/> None	
3	Royalties or licenses	<input checked="" type="checkbox"/> None	
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6	Payment for expert testimony	<input checked="" type="checkbox"/> None	
7	Support for attending meetings and/or travel	Novartis, Pfizer, Roche	
8	Patents planned, issued or pending	<input checked="" type="checkbox"/> None	
9	Participation on a Data Safety Monitoring Board or Advisory Board	<input checked="" type="checkbox"/> None	
10	Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid	<input checked="" type="checkbox"/> None	
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12	Receipt of equipment, materials, drugs, medical writing, gifts or other services	<input checked="" type="checkbox"/> None	
13	Other financial or non-financial interests	<input checked="" type="checkbox"/> None	

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