ICMJE Form for Disclosure of Potential Conflicts of Interest

Instructions

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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)  
   John

2. Surname (Last Name)  
   Dunn

3. Date  
   05-July-2016

4. Are you the corresponding author?  
   Yes ☑️  No

   Corresponding Author’s Name  
   Logan Robert Koehler

5. Manuscript Title  
   The Sweaty Surgeon: Raising Ambient Operating Room Temperature Benefits neither Patient nor Surgeon?

6. Manuscript Identifying Number (if you know it)  

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Are there any relevant conflicts of interest?  
   Yes ☐️  No

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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?  
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Section 6. Disclosure Statement

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Dr. Dunn has nothing to disclose.

Evaluation and Feedback

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**Section 1. Identifying Information**

1. Given Name (First Name)  Logan
2. Surname (Last Name)  Koehler
3. Date 05-July-2016
4. Are you the corresponding author?  ✔ Yes  □ No

5. Manuscript Title
   The Sweaty Surgeon: Raising Ambient Operating Room Temperature Benefits neither Patient nor Surgeon?

6. Manuscript Identifying Number (if you know it)

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

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Are there any relevant conflicts of interest?  □ Yes  ✔ No

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Do you have any patents, whether planned, pending or issued, broadly relevant to the work?  □ Yes  ✔ No
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Dr. Koehler has nothing to disclose.

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Section 1. Identifying Information

1. Given Name (First Name) Nicholas
2. Surname (Last Name) Kusnezov
3. Date 05-July-2016

4. Are you the corresponding author? ☑ Yes No

Corresponding Author’s Name
Logan Robert Koehler

5. Manuscript Title
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<thead>
<tr>
<th>1. Given Name (First Name)</th>
<th>Justin</th>
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<td>2. Surname (Last Name)</td>
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<td>3. Date</td>
<td>05-July-2016</td>
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