

## ICMJE Form for Disclosure of Potential Conflicts of Interest

### Instructions

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#### 1. Identifying information.

#### 2. The work under consideration for publication.

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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)  
ANDREA

2. Surname (Last Name)  
BALDINI

3. Date  
04-July-1971

4. Are you the corresponding author?

Yes  No

Corresponding Author's Name  
ALFREDO LAMBERTI

5. Manuscript Title  
Simultaneous Allograft Reconstruction of Chronic Bilateral Extensor Mechanism Spontaneous Rupture: a case report and review of the literature.

6. Manuscript Identifying Number (if you know it)  
CC-D-18-00058R1

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Are there any relevant conflicts of interest?  Yes  No

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Dr. BALDINI has nothing to disclose.

### Evaluation and Feedback

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### Section 1. Identifying Information

1. Given Name (First Name)

ALFREDO

2. Surname (Last Name)

LAMBERTI

3. Date

15-August-1985

4. Are you the corresponding author?

Yes  No

5. Manuscript Title

Simultaneous Allograft Reconstruction of Chronic Bilateral Extensor Mechanism Spontaneous Rupture: a case report and review of the literature.

6. Manuscript Identifying Number (if you know it)

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Dr. LAMBERTI has nothing to disclose.

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1. Given Name (First Name)  
FRANCESCO

2. Surname (Last Name)  
LOCONTE

3. Date  
04-December-1948

4. Are you the corresponding author?  Yes  No

Corresponding Author's Name  
ALFREDO LAMBERTI

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

2. Surname (Last Name)  
SPINARELLI

3. Date  
07-April-1974

4. Are you the corresponding author?

Yes  No

Corresponding Author's Name  
ALFREDO LAMBERTI

5. Manuscript Title  
Simultaneous Allograft Reconstruction of Chronic Bilateral Extensor Mechanism Spontaneous Rupture: a case report and review of the literature.

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