ICMJE Form for Disclosure of Potential Conflicts of Interest

**Instructions**

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Section 1. Identifying Information

1. Given Name (First Name)  
   Guido

2. Surname (Last Name)  
   Antonini

3. Date  
   01-March-2019

4. Are you the corresponding author?  
   [ ] Yes  ✔ No  
   Corresponding Author’s Name  
   Pier Francesco Indelli

5. Manuscript Title  
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Dr. Antonini has nothing to disclose.

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)  
Abiram

2. Surname (Last Name)  
Bala

3. Date  
01-March-2019

4. Are you the corresponding author?  
Yes ☐ No ☑

Corresponding Author’s Name  
Pier Francesco Indelli

5. Manuscript Title  
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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 ☑

Bala
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**Section 6. Disclosure Statement**

Based on the above disclosures, this form will automatically generate a disclosure statement, which will appear in the box below.

Dr. Bala has nothing to disclose.

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Section 1. Identifying Information

1. Given Name (First Name)  
   Stefano

2. Surname (Last Name)  
   Ghirardelli

3. Date  
   01-March-2019

4. Are you the corresponding author?  
   ☑ No  
   Corresponding Author’s Name  
   Pier Francesco Indelli

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Dr. Ghirardelli has nothing to disclose.

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1. Given Name (First Name)  Pier Francesco
2. Surname (Last Name)  Indelli
3. Date  01-March-2019
4. Are you the corresponding author?  ✔ Yes  ☐ No

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<table>
<thead>
<tr>
<th>1. Given Name (First Name)</th>
<th>2. Surname (Last Name)</th>
<th>3. Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>Giuseppe</td>
<td>Peretti</td>
<td>01-March-2019</td>
</tr>
</tbody>
</table>

4. Are you the corresponding author?  
   - Yes
   - No  
   ✔

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<th>5. Manuscript Title</th>
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Dr. Peretti has nothing to disclose.

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