ICMJE Form for Disclosure of Potential Conflicts of Interest

Instructions

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Section 1. Identifying Information

1. Given Name (First Name) Francesco
2. Surname (Last Name) Puccetti
3. Date 06-May-2020
4. Are you the corresponding author? ☑ Yes ☐ No
   Corresponding Author's Name
   Dr. Donald E. Low
5. Manuscript Title
   Current Approaches to Clinical Research with Respect to Esophageal Resection: Are Online Clinical Datasets the Future?
6. Manuscript Identifying Number (if you know it)
   AOE-20-42

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Are there any relevant conflicts of interest? ☑ Yes ☐ No

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**Section 6. Disclosure Statement**

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Dr. Puccetti has nothing to disclose.

**Evaluation and Feedback**

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Section 1. Identifying Information

1. Given Name (First Name)  
MadhanKumar

2. Surname (Last Name)  
Kuppusamy

3. Date  
06-May-2020

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

Corresponding Author’s Name  
Dr. Donald E. Low

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

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1. Given Name (First Name)  Michal
2. Surname (Last Name)  Hubka
3. Date  06-May-2020
4. Are you the corresponding author?  Yes  No  ✔

Corresponding Author’s Name  Dr. Donald E. Low

5. Manuscript Title
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1. Given Name (First Name)  
Donald E.

2. Surname (Last Name)  
Low

3. Date  
06-May-2020

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No

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