

ICMJE Form for Disclosure of Potential Conflicts of Interest

Instructions

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)

Nichthida

2. Surname (Last Name)

Tangnuntachai

3. Date

07-May-2020

4. Are you the corresponding author?

Yes No

Corresponding Author's Name

Napadon Tangjaturonrasme, Somboon Keelawat

5. Manuscript Title

Pathological Practice and Management of Thyroid nodules: A Thai Perspective

6. Manuscript Identifying Number (if you know it)

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Dr. Tangnuntachai 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) Samrueng	2. Surname (Last Name) Rangdaeng	3. Date 29-April-2020
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Napadon Tangjaturonrasme and Somboon Keelawat
5. Manuscript Title "Management of Thyroid Nodules: A Thai Perspective" to Gland Surgery		
6. Manuscript Identifying Number (if you know it) GS-20-395		

Section 2. The Work Under Consideration for Publication

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Dr. Rangdaeng has nothing to disclose.

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Supinda

2. Surname (Last Name)

Koonmee

3. Date

29-April-2020

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Yes No

Corresponding Author's Name

Napadon Tangjaturonrasme and Somboon Keelawat

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29-April-2020

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