

ICMJE Form for Disclosure of Potential Conflicts of Interest

Instructions

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4. Intellectual Property.

This section asks about patents and copyrights, whether pending, issued, licensed and/or receiving royalties.

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Royalties: Funds are coming in to you or your institution due to your patent

ICMJJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)
Stefano

2. Surname (Last Name)
Uccella

3. Date
31-May-2020

4. Are you the corresponding author? Yes No

5. Manuscript Title
LAPAROTOMY VS. MINIMALLY INVASIVE SURGERY FOR OVARIAN CANCER RECURRENCE

6. Manuscript Identifying Number (if you know it)
GS-2020-OCR-04(GS-20-353)

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Dr. Uccella has nothing to disclose.

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Section 1. Identifying Information

1. Given Name (First Name) Massimo	2. Surname (Last Name) Franchi	3. Date 31-May-2020
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Stefano Uccella
5. Manuscript Title LAPAROTOMY VS. MINIMALLY INVASIVE SURGERY FOR OVARIAN CANCER RECURRENCE		
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Dr. Franchi has nothing to disclose.

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1. Given Name (First Name) Stefano	2. Surname (Last Name) Cianci	3. Date 31-May-2020
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Stefano Uccella
5. Manuscript Title LAPAROTOMY VS. MINIMALLY INVASIVE SURGERY FOR OVARIAN CANCER RECURRENCE		
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Dr. Cianci has nothing to disclose.

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Section 1. Identifying Information

1. Given Name (First Name) Pier Carlo	2. Surname (Last Name) Zorzato	3. Date 31-May-2020
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Stefano Uccella
5. Manuscript Title LAPAROTOMY VS. MINIMALLY INVASIVE SURGERY FOR OVARIAN CANCER RECURRENCE		
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Section 1. Identifying Information

1. Given Name (First Name) Francesca	2. Surname (Last Name) Bertoli	3. Date 31-May-2020
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Stefano Uccella
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1. Given Name (First Name) Salvatore	2. Surname (Last Name) Gueli Alletti	3. Date 31-May-2020
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Stefano Uccella
5. Manuscript Title LAPAROTOMY VS. MINIMALLY INVASIVE SURGERY FOR OVARIAN CANCER RECURRENCE		
6. Manuscript Identifying Number (if you know it) GS-2020-OCR-04(GS-20-353)		

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Are there any relevant conflicts of interest? Yes No

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4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Stefano Uccella
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1. Given Name (First Name)
Giovanni

2. Surname (Last Name)
Scambia

3. Date
31-May-2020

4. Are you the corresponding author?

Yes No

Corresponding Author's Name
Stefano Uccella

5. Manuscript Title

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