

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)

Milvia

2. Surname (Last Name)

Martino

3. Date

04-September-2020

4. Are you the corresponding author?

Yes No

5. Manuscript Title

MULTIPARAMETRIC ULTRASOUND IN PAROTID GLAND EVALUATION

6. Manuscript Identifying Number (if you know it)

GS-2020-MAIIGD-01(GS-20-530)

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Dr. Martino has nothing to disclose.

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Section 1. Identifying Information

1. Given Name (First Name)

Daniela

2. Surname (Last Name)

Fodor

3. Date

07-September-2020

4. Are you the corresponding author?

Yes

No

Corresponding Author's Name

Milvia Martino

5. Manuscript Title

MULTIPARAMETRIC ULTRASOUND IN PAROTID GLAND EVALUATION

6. Manuscript Identifying Number (if you know it)

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Section 1. Identifying Information

1. Given Name (First Name) Daniele	2. Surname (Last Name) Fresilli	3. Date 04-September-2020
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Milvia Martino
5. Manuscript Title MULTIPARAMETRIC ULTRASOUND IN PAROTID GLAND EVALUATION		
6. Manuscript Identifying Number (if you know it) GS-2020-MAIIGD-01(GS-20-530)		

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1. Given Name (First Name)

Olga

2. Surname (Last Name)

Guiban

3. Date

04-September-2020

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Yes No

Corresponding Author's Name

Milvia Martino

5. Manuscript Title

MULTIPARAMETRIC ULTRASOUND IN PAROTID GLAND EVALUATION

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

ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name) Andrea	2. Surname (Last Name) Cassoni	3. Date 04-September-2020
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Milvia Martino
5. Manuscript Title MULTIPARAMETRIC ULTRASOUND IN PAROTID GLAND EVALUATION		
6. Manuscript Identifying Number (if you know it) GS-2020-MAIIGD-01(GS-20-530)		

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Are there any relevant conflicts of interest? Yes No

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Are there any relevant conflicts of interest? Yes No

Section 4. Intellectual Property -- Patents & Copyrights

Do you have any patents, whether planned, pending or issued, broadly relevant to the work? Yes No

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Section 6. Disclosure Statement

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Dr. Cassoni 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)

Massimo

2. Surname (Last Name)

Ralli

3. Date

04-September-2020

4. Are you the corresponding author?

Yes No

Corresponding Author's Name

Milvia Martino

5. Manuscript Title

MULTIPARAMETRIC ULTRASOUND IN PAROTID GLAND EVALUATION

6. Manuscript Identifying Number (if you know it)

GS-2020-MAIIGD-01(GS-20-530)

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Dr. Ralli 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)

Chiara

2. Surname (Last Name)

De Vincentiis

3. Date

04-September-2020

4. Are you the corresponding author?

Yes No

Corresponding Author's Name

Milvia Martino

5. Manuscript Title

MULTIPARAMETRIC ULTRASOUND IN PAROTID GLAND EVALUATION

6. Manuscript Identifying Number (if you know it)

GS-2020-MAIIGD-01(GS-20-530)

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Dr. De Vincentiis Chiara 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)
Federico

2. Surname (Last Name)
Arduini

3. Date
04-September-2020

4. Are you the corresponding author? Yes No

Corresponding Author's Name
Milvia Martino

5. Manuscript Title
MULTIPARAMETRIC ULTRASOUND IN PAROTID GLAND EVALUATION

6. Manuscript Identifying Number (if you know it)
GS-2020-MAIIGD-01(GS-20-530)

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Section 4. Intellectual Property -- Patents & Copyrights

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Dr. Arduini 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)

Ilaria

2. Surname (Last Name)

Celletti

3. Date

04-September-2020

4. Are you the corresponding author?

Yes No

Corresponding Author's Name

Milvia Martino

5. Manuscript Title

MULTIPARAMETRIC ULTRASOUND IN PAROTID GLAND EVALUATION

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GS-2020-MAIIGD-01(GS-20-530)

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)

Patrizia

2. Surname (Last Name)

Pacini

3. Date

04-September-2020

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Yes No

Corresponding Author's Name

Milvia Martino

5. Manuscript Title

MULTIPARAMETRIC ULTRASOUND IN PAROTID GLAND EVALUATION

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name) Giorgia	2. Surname (Last Name) Polti	3. Date 04-September-2020
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Milvia Martino
5. Manuscript Title MULTIPARAMETRIC ULTRASOUND IN PAROTID GLAND EVALUATION		
6. Manuscript Identifying Number (if you know it) GS-2020-MAIIGD-01(GS-20-530)		

Section 2. The Work Under Consideration for Publication

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Are there any relevant conflicts of interest? Yes No

Section 3. Relevant financial activities outside the submitted work.

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Do you have any patents, whether planned, pending or issued, broadly relevant to the work? Yes No

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Dr. Polti 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)

Eleonora

2. Surname (Last Name)

Polito

3. Date

06-September-2020

4. Are you the corresponding author?

Yes No

Corresponding Author's Name

Milvia Martino

5. Manuscript Title

MULTIPARAMETRIC ULTRASOUND IN PAROTID GLAND EVALUATION

6. Manuscript Identifying Number (if you know it)

GS-2020-MAIIGD-01(GS-20-530)

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)

Antonio

2. Surname (Last Name)

Greco

3. Date

04-September-2020

4. Are you the corresponding author?

Yes No

Corresponding Author's Name

Milvia Martino

5. Manuscript Title

MULTIPARAMETRIC ULTRASOUND IN PAROTID GLAND EVALUATION

6. Manuscript Identifying Number (if you know it)

GS-2020-MAIIGD-01(GS-20-530)

Section 2. The Work Under Consideration for Publication

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Dr. Greco 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)

Valentino

2. Surname (Last Name)

Valentini

3. Date

04-September-2020

4. Are you the corresponding author?

Yes No

Corresponding Author's Name

Milvia Martino

5. Manuscript Title

MULTIPARAMETRIC ULTRASOUND IN PAROTID GLAND EVALUATION

6. Manuscript Identifying Number (if you know it)

GS-2020-MAIIGD-01(GS-20-530)

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)
Salvatore

2. Surname (Last Name)
Sorrenti

3. Date
04-September-2020

4. Are you the corresponding author? Yes No

Corresponding Author's Name
Milvia Martino

5. Manuscript Title
MULTIPARAMETRIC ULTRASOUND IN PAROTID GLAND EVALUATION

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1. Given Name (First Name)

VITO

2. Surname (Last Name)

D'ANDREA

3. Date

04-September-2020

4. Are you the corresponding author?

Yes No

Corresponding Author's Name

Milvia Martino

5. Manuscript Title

MULTIPARAMETRIC ULTRASOUND IN PAROTID GLAND EVALUATION

6. Manuscript Identifying Number (if you know it)

GS-2020-MAIIGD-01(GS-20-530)

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1. Given Name (First Name)

Carlo

2. Surname (Last Name)

Masciocchi

3. Date

04-September-2020

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Yes No

Corresponding Author's Name

Milvia Martino

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MULTIPARAMETRIC ULTRASOUND IN PAROTID GLAND EVALUATION

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Dr. Masciocchi has nothing to disclose.

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Section 1. Identifying Information

1. Given Name (First Name)

Antonio

2. Surname (Last Name)

Barile

3. Date

04-September-2020

4. Are you the corresponding author?

Yes No

Corresponding Author's Name

Milvia Martino

5. Manuscript Title

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Vito

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Cantisani

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