

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) Matteo	2. Surname (Last Name) Benedetti Valentini	3. Date 19-May-2015
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Ernesto Ippolito
5. Manuscript Title Two-Stage Surgical Treatment of Complex Femoral Deformities with Severe Coxa Vara in Polyostotic Fibrous Dysplasia.		
6. Manuscript Identifying Number (if you know it)		

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Dr. Benedetti Valentini has nothing to disclose.

Evaluation and Feedback

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Section 1. Identifying Information

1. Given Name (First Name) Pasquale	2. Surname (Last Name) Farsetti	3. Date 19-May-2015
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Ernesto Ippolito
5. Manuscript Title Two-Stage Surgical Treatment of Complex Femoral Deformities with Severe Coxa Vara in Polyostotic Fibrous Dysplasia.		
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1. Given Name (First Name)

Alessandro

2. Surname (Last Name)

Fichera

3. Date

19-May-2015

4. Are you the corresponding author?

Yes No

Corresponding Author's Name

Ernesto Ippolito

5. Manuscript Title

Two-Stage Surgical Treatment of Complex Femoral Deformities with Severe Coxa Vara in Polyostotic Fibrous Dysplasia.

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Ernesto

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Ippolito

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