

## 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)

Sara

2. Surname (Last Name)

Farag

3. Date

13-July-2019

4. Are you the corresponding author?

Yes

No

Corresponding Author's Name

Tamer El-Sobky

5. Manuscript Title

Botulinum Toxin A Injection in Treatment of Upper Limb Spasticity in Cerebral Palsy Children: A Systematic Review of Randomized Control Trials

6. Manuscript Identifying Number (if you know it)

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Dr. Farag 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) Abeer	2. Surname (Last Name) El Zohiery	3. Date 13-July-2019
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Tamer El-Sobky
5. Manuscript Title Botulinum Toxin A Injection in Treatment of Upper Limb Spasticity in Cerebral Palsy Children: A Systematic Review of Randomized Control Trials		
6. Manuscript Identifying Number (if you know it)		

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Dr. El Zohiery has nothing to disclose.

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1. Given Name (First Name) Manal	2. Surname (Last Name) Mohammed	3. Date 13-July-2019
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Tamer El-Sobky
5. Manuscript Title Botulinum Toxin A Injection in Treatment of Upper Limb Spasticity in Cerebral Palsy Children: A Systematic Review of Randomized Control Trials		
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Dr. Mohammed has nothing to disclose.

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1. Given Name (First Name) Nadia	2. Surname (Last Name) Elkadery	3. Date 13-July-2019
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Dr. Elkadery has nothing to disclose.

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Tamer

2. Surname (Last Name)  
El-Sobky

3. Date  
13-July-2019

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