ICMJE Form for Disclosure of Potential Conflicts of Interest

Instructions

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Section 1. Identifying Information

1. Given Name (First Name) Priya
2. Surname (Last Name) Bhakta
3. Date 01-May-2020
4. Are you the corresponding author? Yes No
5. Manuscript Title
Use of Indocyanine Green in Detection of Breast Axillary Sentinel Lymph Nodes
6. Manuscript Identifying Number (if you know it) ABS-20-22

Section 2. The Work Under Consideration for Publication

Did you or your institution at any time receive payment or services from a third party (government, commercial, private foundation, etc.) for any aspect of the submitted work (including but not limited to grants, data monitoring board, study design, manuscript preparation, statistical analysis, etc.)? Are there any relevant conflicts of interest? Yes No

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Dr. Bhakta has nothing to disclose.

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Farnand

1
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<thead>
<tr>
<th>1. Given Name (First Name)</th>
<th>2. Surname (Last Name)</th>
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</thead>
<tbody>
<tr>
<td>Alex</td>
<td>Farnand</td>
<td>02-May-2020</td>
</tr>
</tbody>
</table>

4. Are you the corresponding author? [ ] Yes [x] No

Corresponding Author’s Name: Priya Bhakta

5. Manuscript Title: Use of Indocyanine Green in Detection of Breast Axillary Sentinel Lymph Nodes

6. Manuscript Identifying Number (if you know it): 

## Section 2. The Work Under Consideration for Publication

Did you or your institution at any time receive payment or services from a third party (government, commercial, private foundation, etc.) for any aspect of the submitted work (including but not limited to grants, data monitoring board, study design, manuscript preparation, statistical analysis, etc.)?  
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Dr. Farnand has nothing to disclose.

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<tbody>
<tr>
<td>Maria</td>
<td>Osipova</td>
<td>03-May-2020</td>
</tr>
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4. Are you the corresponding author?  
   - Yes  
   - No

5. Manuscript Title
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Connolly
ICMJE Form for Disclosure of Potential Conflicts of Interest

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Mark

2. Surname (Last Name)  
Connolly

3. Date  
03-May-2020

4. Are you the corresponding author?  
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