

CONFLICT OF INTEREST DISCLOSURE FORM

In accordance with the conflict of interest chapter of the RAPOnline Publication Rules and in accordance with the standards of the International Committee of Medical Journal Editors, it is necessary to communicate in writing the existence of any relationship between the authors of the article and any public or private entity from which any potential conflict of interest could be derived.

A potential conflict of interest may arise from different types of relationships, past or present, such as hiring, consulting, investing, research funding, family relationships, and others that could lead to an unintended bias in the work of the signatories of this manuscript.

Title of the manuscript:

- The author, first signatory of the reference manuscript, in his name and in the name of all the signatory authors, certifies that there is no potential conflict of interest related to the article.

.....

(Full name and signature)

- The authors of the reference manuscript listed below, state the following potential conflicts of interest:

Author name and Signature

.....

Type of conflict of interest¹ _____

Author name and Signature

.....

Type of conflict of interest¹ _____

Author name and Signature

.....

Type of conflict of interest¹ _____

Author name and Signature

.....

Type of conflict of interest¹ _____

¹ Hired by.... grant by....., Consultant, lecturer, adviser for...