

#### Instructions

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2. Surname (Last Name) Kaneuji	3. Date 04-June-2014
✓ Yes No	
	nt-Preservation Rate and Clinical
know it)	
ľ	Kaneuji ✓ Yes No

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No

Are there any relevant conflicts of interest?		Yes	$\checkmark$	1
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Are there any relevant conflicts of interest? Yes 🗸 No

bo you have any patents, whether planned, pending of issued, broadily relevant to the work:     res   <b>y</b>   no	you have any patents, whether planned, pending or issued, broadly relevant to the	work? Yes	🖌 No
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# Section 5. Relationships not covered above

Are there other relationships or activities that readers could perceive to have influenced, or that give the appearance of potentially influencing, what you wrote in the submitted work?

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## Section 6. Disclosure Statement

Based on the above disclosures, this form will automatically generate a disclosure statement, which will appear in the box below.

### **Evaluation and Feedback**