

ICMJE Form for Disclosure of Potential Conflicts of Interest

Instructions

The purpose of this form is to provide readers of your manuscript with information about your other interests that could influence how they receive and understand your work. The form is designed to be completed electronically and stored electronically. It contains programming that allows appropriate data display. Each author should submit a separate form and is responsible for the accuracy and completeness of the submitted information. The form is in six parts.

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2. The work under consideration for publication.

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4. Intellectual Property.

This section asks about patents and copyrights, whether pending, issued, licensed and/or receiving royalties.

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)

Lara

2. Surname (Last Name)

Lacerda

3. Date

10-May-2017

4. Are you the corresponding author?

☐ Yes

☒ No

Corresponding Author's Name

Pawin Gajasen

5. Manuscript Title

A Child with a Rare Extraosseous Extension Pathological Fracture Vertebral Hemangioma

6. Manuscript Identifying Number (if you know it)

Section 2. The Work Under Consideration for Publication

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Are there any relevant conflicts of interest? ☐ Yes ☒ No

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Section 6.

Disclosure Statement

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Dr. Lacerda has nothing to disclose.

Evaluation and Feedback

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)
Stuart

2. Surname (Last Name)
Weinstein

3. Date
11-May-2017

4. Are you the corresponding author?

☐ Yes ☒ No

Corresponding Author's Name
Pawin Gajasen

5. Manuscript Title

A Child with a Rare Extraosseous Extension, Pathological Fracture Vertebral Hemangioma: A Case Report

6. Manuscript Identifying Number (if you know it)

Section 2. The Work Under Consideration for Publication

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Are there any relevant conflicts of interest? ☐ Yes ☒ No

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Dr. Weinstein has nothing to disclose.

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1. Given Name (First Name)

Luca

2. Surname (Last Name)

Labianca

3. Date

10-May-2017

4. Are you the corresponding author?

☐ Yes

☒ No

Corresponding Author's Name

Pawin Gajasen

5. Manuscript Title

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1. Given Name (First Name)
Pawin

2. Surname (Last Name)
Gajasen

3. Date
10-February-2017

4. Are you the corresponding author? ☒ Yes ☐ No

5. Manuscript Title
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