ICMJE Form for Disclosure of Potential Conflicts of Interest

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<tr>
<td>Emily</td>
<td>Piga</td>
<td>26-March-2020</td>
</tr>
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</table>

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

5. Manuscript Title  
   Intraoperative management of spermatic cord lipomas: a systematic review

6. Manuscript Identifying Number (if you know it)

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Dr. Piga has nothing to disclose.

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<tr>
<td>Dennis</td>
<td>Zetner</td>
<td>25-March-2020</td>
</tr>
</tbody>
</table>

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

Corresponding Author’s Name

Emily Piga

5. Manuscript Title

Intraoperative management of spermatic cord lipomas: a systematic review

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Dr. Zetner has nothing to disclose.

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1. Given Name (First Name)  
   Dennis

2. Surname (Last Name)  
   Zetner

3. Date  
   25-March-2020

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

Corresponding Author’s Name  
Emily Piga

5. Manuscript Title  
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1. Given Name (First Name)  
Kristoffer

2. Surname (Last Name)  
Andresen

3. Date  
24-March-2020

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

Corresponding Author’s Name  
Emily Piga

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Dr. Andresen has nothing to disclose.

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<td>Rosenberg</td>
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**Corresponding Author’s Name**

Emily Piga

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Dr. Rosenberg has nothing to disclose.

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