ICMJE Form for Disclosure of Potential Conflicts of Interest

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<td>Carroll</td>
<td>10-May-2020</td>
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4. Are you the corresponding author? [ ] Yes [ ] No

Corresponding Author's Name

Peter Nau

5. Manuscript Title

Laparoscopic Roux-En-Y Gastric Bypass for the management of hiatal hernia and failed fundoplication in patients with obesity

6. Manuscript Identifying Number (if you know it)

ALES-20-75

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Carroll
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Dr. Carroll has nothing to disclose.

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4. Are you the corresponding author?  Yes  No  ✔

5. Manuscript Title
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Dr. Fontan has nothing to disclose.

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Section 1. Identifying Information

1. Given Name (First Name)  Ryan
2. Surname (Last Name)  Lehmann
3. Date  11-May-2020
4. Are you the corresponding author?  No

Corresponding Author’s Name
Peter Nau

5. Manuscript Title
Laparoscopic Roux-en-Y Gastric Bypass for the management of hiatal hernia and failed fundoplication in patients with obesity

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Section 1. Identifying Information

1. Given Name (First Name) Jessica
2. Surname (Last Name) Smith
3. Date 11-May-2020
4. Are you the corresponding author? □ Yes ✔ No

Corresponding Author’s Name
Peter Nau

5. Manuscript Title
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1. Given Name (First Name) Peter
2. Surname (Last Name) Nau
3. Date 11-May-2020
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