

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.

1. Identifying information.

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)

Justin

2. Surname (Last Name)

Stowell

3. Date

07-September-2020

4. Are you the corresponding author?

Yes No

5. Manuscript Title

Multidisciplinary Approach to Imaging for Gender-Affirming Surgery: Engaging Surgeons, Radiologists, and Patients to Ensure a Positive Imaging Experience

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. Stowell has nothing to disclose.

Evaluation and Feedback

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Section 1. Identifying Information

1. Given Name (First Name)

Vaz

2. Surname (Last Name)

Zavaletta

3. Date

07-September-2020

4. Are you the corresponding author?

Yes No

Corresponding Author's Name

Justin Stowell

5. Manuscript Title

Multidisciplinary Approach to Imaging for Gender-Affirming Surgery: Engaging Surgeons, Radiologists, and Patients to Ensure a Positive Imaging Experience

6. Manuscript Identifying Number (if you know it)

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Dr. Zavaletta has nothing to disclose.

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Section 1. Identifying Information

1. Given Name (First Name)

Evelyn

2. Surname (Last Name)

Carroll

3. Date

14-September-2020

4. Are you the corresponding author?

Yes No

Corresponding Author's Name

Justin T. Stowell, MD

5. Manuscript Title

Multidisciplinary Approach to Imaging for Gender-Affirming Surgery: Engaging Surgeons, Radiologists, and Patients to Ensure a Positive Imaging Experience

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Section 1. Identifying Information

1. Given Name (First Name)

Frances

2. Surname (Last Name)

Grimstad

3. Date

05-September-2020

4. Are you the corresponding author?

Yes No

Corresponding Author's Name

Justin Stowell

5. Manuscript Title

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