ICMJE Form for Disclosure of Potential Conflicts of Interest

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.**

5. **Relationships not covered above.**

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ICMJE Form for Disclosure of Potential Conflicts of Interest

**Section 1. Identifying Information**

1. Given Name (First Name)  
   Jacopo

2. Surname (Last Name)  
   Vannucci

3. Date  
   11-July-2020

4. Are you the corresponding author?  
   ✔ Yes  
   □ No

5. Manuscript Title  
   Dynamic titanium prosthesis based on 3D-printed replica for chest wall resection and reconstruction

6. Manuscript Identifying Number (if you know it)  
   TLCR-20-699

**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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Are there any relevant conflicts of interest?  
   □ Yes  
   ✔ No

**Section 4. Intellectual Property -- Patents & Copyrights**

Do you have any patents, whether planned, pending or issued, broadly relevant to the work?  
   □ Yes  
   ✔ No

Vannucci
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Section 5. Relationships not covered above

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Section 6. Disclosure Statement

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Dr. Vannucci 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)  
   Elisa

2. Surname (Last Name)  
   Scarnecchia

3. Date  
   03-July-2020

4. Are you the corresponding author?  
   ☑ No

Corresponding Author’s Name
   Jacopo Vannucci

5. Manuscript Title
   Dynamic titanium prosthesis based on 3D-printed replica for chest wall resection and reconstruction

6. Manuscript Identifying Number (if you know it)
   TLCR-20-699

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Dr. Scarnecchia has nothing to disclose.

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)  
Rossella

2. Surname (Last Name)  
Potenza

3. Date  
09-July-2020

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

Corresponding Author's Name  
Jacopo Vannucci

5. Manuscript Title  
Dynamic titanium prosthesis based on 3D-printed replica for chest wall resection and reconstruction

6. Manuscript Identifying Number (if you know it)  
TLCR-20-699

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Section 4. Intellectual Property -- Patents & Copyrights

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Dr. Potenza has nothing to disclose.

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Ceccarelli
ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name) Silvia
2. Surname (Last Name) Ceccarelli
3. Date 09-July-2020
4. Are you the corresponding author? No

Corresponding Author’s Name
Jacopo Vannucci

5. Manuscript Title
Dynamic titanium prosthesis based on 3D-printed replica for chest wall resection and reconstruction

6. Manuscript Identifying Number (if you know it)
TLCR-20-699

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Are there any relevant conflicts of interest? No

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Dr. Ceccarelli has nothing to disclose.

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ICMJ Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)  
   Donato

2. Surname (Last Name)  
   Monopoli

3. Date  
   09-July-2020

4. Are you the corresponding author?  
   Yes  ✔  No

Corresponding Author’s Name  
Jacopo Vannucci

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

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- **Grant:** A grant from an entity, generally (but not always) paid to your organization
- **Personal Fees:** Monies paid to you for services rendered, generally honoraria, royalties, or fees for consulting, lectures, speakers bureaus, expert testimony, employment, or other affiliations
- **Non-Financial Support:** Examples include drugs/equipment supplied by the entity, travel paid by the entity, writing assistance, administrative support, etc.
- **Other:** Anything not covered under the previous three boxes
- **Pending:** The patent has been filed but not issued
- **Issued:** The patent has been issued by the agency
- **Licensed:** The patent has been licensed to an entity, whether earning royalties or not
- **Royalties:** Funds are coming in to you or your institution due to your patent
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**Section 1. Identifying Information**

- 1. Given Name (First Name)  
  Francesco

- 2. Surname (Last Name)  
  Puma

- 3. Date  
  11-July-2020

- 4. Are you the corresponding author?  
  Yes  
  No  
  ✔

- 5. Manuscript Title  
  Dynamic titanium prosthesis based on 3D-printed replica for chest wall resection and reconstruction

- 6. Manuscript Identifying Number (if you know it)  
  TLCR-20-699

**Section 2. The Work Under Consideration for Publication**

Did you or your institution at any time receive payment or services from a third party (government, commercial, private foundation, etc.) for any aspect of the submitted work (including but not limited to grants, data monitoring board, study design, manuscript preparation, statistical analysis, etc.)?  
Are there any relevant conflicts of interest?  

- Yes  
  ✔  
- No  

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Place a check in the appropriate boxes in the table to indicate whether you have financial relationships (regardless of amount of compensation) with entities as described in the instructions. Use one line for each entity; add as many lines as you need by clicking the "Add +" box. You should report relationships that were present during the 36 months prior to publication.  
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- Yes  
- No  

**Section 4. Intellectual Property -- Patents & Copyrights**

Do you have any patents, whether planned, pending or issued, broadly relevant to the work?  

- Yes  
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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?

☐ Yes, the following relationships/conditions/circumstances are present (explain below):
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At the time of manuscript acceptance, journals will ask authors to confirm and, if necessary, update their disclosure statements. On occasion, journals may ask authors to disclose further information about reported relationships.

Section 6. Disclosure Statement
Based on the above disclosures, this form will automatically generate a disclosure statement, which will appear in the box below.

Dr. Puma has nothing to disclose.

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