ICMJE DISCLOSURE FORM

Date: 03-04-2021
Your Name: Altieri Vincenzo Maria
Manuscript Title: Clinical and penile Doppler outcomes using a modified, tourniquet free, Nesbit plication for severe Peyronie’s disease.
Manuscript number (if known): TAU-20-1338-R1

In the interest of transparency, we ask you to disclose all relationships/activities/interests listed below that are related to the content of your manuscript. “Related” means any relation with for-profit or not-for-profit third parties whose interests may be affected by the content of the manuscript. Disclosure represents a commitment to transparency and does not necessarily indicate a bias. If you are in doubt about whether to list a relationship/activity/interest, it is preferable that you do so.

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In item #1 below, report all support for the work reported in this manuscript without time limit. For all other items, the time frame for disclosure is the past 36 months.

|   | Name all entities with whom you have this relationship or indicate none (add rows as needed) | Specifications/Comments (e.g., if payments were made to you or to your institution) |
|---|-------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------|
|   | **Time frame: Since the initial planning of the work**                                        |                                                                                   |
| 1 | All support for the present manuscript (e.g., funding, provision of study materials, medical writing, article processing charges, etc.) | No payment was made for the realization of this study No payment was made for the realization of this study |
|   | **No time limit for this item.**                                                                 |                                                                                   |
|   |                                                                                                 |                                                                                   |
|   | **Time frame: past 36 months**                                                                  |                                                                                   |
| 2 | Grants or contracts from any entity (if not indicated in item #1 above).                       | There were no Grants or contracts of any entity to this study. None               |
| 3 | Royalties or licenses                                                                          | None                                                                             |
|   |                                                                                                 |                                                                                   |
|   |   |   |
|---|---|---|
| 4 | Consulting fees | There are no consultancy fees for this study | None |
| 5 | Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or educational events | No payments or fees for lectures, presentations, speakers, manuscript writing or educational events | None |
| 6 | Payment for expert testimony | No Payment for expert testimony | None |
| 7 | Support for attending meetings and/or travel | None | None |
| 8 | Patents planned, issued or pending | None | None |
| 9 | Participation on a Data Safety Monitoring Board or Advisory Board | None | None |
| 10 | Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid | None | None |
| 11 | Stock or stock options | None | None |
| 12 | Receipt of equipment, materials, drugs, medical writing, gifts or other services | None | None |
| 13 | Other financial or non-financial interests | None | None |

Please summarize the above conflict of interest in the following box:

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**Date:** 03-04-2021  
**Your Name:** Francesco Greco  
**Manuscript Title:** Clinical and penile Doppler outcomes using a modified, tourniquet free, Nesbit plication for severe Peyronie’s disease.  
**Manuscript number (if known):** TAU-20-1338-R1

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Date: 03-04-2021
Your Name: Carmela Rocca Lisanti
Manuscript Title: Clinical and penile Doppler outcomes using a modified, tourniquet free, Nesbit plication for severe Peyronie’s disease.
Manuscript number (if known): TAU-20-1338-R1

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**Date:** 03-04-2021  
**Your Name:** Barbara Altieri  
**Manuscript Title:** Clinical and penile Doppler outcomes using a modified, tourniquet free, Nesbit plication for severe Peyronie’s disease.  
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Date: 03-04-2021  
Your Name: Francesco Esperto  
Manuscript Title: Clinical and penile Doppler outcomes using a modified, tourniquet free, Nesbit plication for severe Peyronie’s disease.  
Manuscript number (if known): TAU-20-1338-R1

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Date: 03-04-2021
Your Name: Luca Cindolo
Manuscript Title: Clinical and penile Doppler outcomes using a modified, tourniquet free, Nesbit plication for severe Peyronie’s disease.
Manuscript number (if known): TAU-20-1338-R1

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| 6 | Payment for expert testimony                                                   | No Payment for expert testimony               | None |
| 7 | Support for attending meetings and/or travel                                   | None                                          | None |
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**ICMJE DISCLOSURE FORM**

**Date:** 03-04-2021  
**Your Name:** Roberto Castellucci  
**Manuscript Title:** Clinical and penile Doppler outcomes using a modified, tourniquet free, Nesbit plication for severe Peyronie’s disease.  
**Manuscript number (if known):** TAU-20-1338-R1

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|   | Description                                                                                     | Details                                                                 | None |
|---|-----------------------------------------------------------------------------------------------|------------------------------------------------------------------------|------|
| 4 | Consulting fees                                                                              | There are no consultancy fees for this study                           | None |
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| 7 | Support for attending meetings and/or travel                                                  | None                                                                    | None |
| 8 | Patents planned, issued or pending                                                            | None                                                                    | None |
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Date: 03-04-2021
Your Name: Pier Andrea Della Camera
Manuscript Title: Clinical and penile Doppler outcomes using a modified, tourniquet free, Nesbit plication for severe Peyronie’s disease.
Manuscript number (if known): TAU-20-1338-R1

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ICMJE DISCLOSURE FORM

Date: 03-04-2021
Your Name: Massimo Sangiorgi
Manuscript Title: Clinical and penile Doppler outcomes using a modified, tourniquet free, Nesbit plication for severe Peyronie’s disease.
Manuscript number (if known): TAU-20-1338-R1

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**ICMJE DISCLOSURE FORM**

**Date:** 02-04-2021  
**Your Name:** Vittore Verratti  
**Manuscript Title:** Clinical and penile Doppler outcomes using a modified, tourniquet free, Nesbit plication for severe Peyronie’s disease.  
**Manuscript number (if known):** TAU-20-1338-R1

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**Please summarize the above conflict of interest in the following box:**

The other authors have no conflicts of interest to declare.
Please place an “X” next to the following statement to indicate your agreement:

X I certify that I have answered every question and have not altered the wording of any of the questions on this form.