

ICMJE DISCLOSURE FORM

Date: 7/7/2022

Your Name: Uxue Idiazabal Rodríguez

Manuscript Title: Fibroelastoma papilar: un tumor benigno que puede provocar consecuencias devastadoras

Manuscript Number (if known): [Click or tap here to enter text.](#)

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.

The author’s relationships/activities/interests should be defined broadly. For example, if your manuscript pertains to the epidemiology of hypertension, you should declare all relationships with manufacturers of antihypertensive medication, even if that medication is not mentioned in the manuscript.

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Date: 7/7/2022

Your Name: Iñigo Pereiro Lili

Manuscript Title: Fibroelastoma papilar: un tumor benigno que puede provocar consecuencias devastadoras

Manuscript Number (if known): [Click or tap here to enter text.](#)

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ICMJE DISCLOSURE FORM

Date: 7/7/2022

Your Name: [Ane Elorriaga Madariaga]

Manuscript Title: [Fibroelastoma papilar: un tumor benigno que puede provocar consecuencias devastadoras]

Manuscript Number (if known): [Click or tap here to enter text.]

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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ICMJE DISCLOSURE FORM

Date: 7/7/2022

Your Name: Rafael Martínez de Bourio Iriarte

Manuscript Title: Fibroelastoma papilar: un tumor benigno que puede provocar consecuencias devastadoras

Manuscript Number (if known): [Click or tap here to enter text.](#)

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Date: 7/7/2022

Your Name: Paula María Mendoza Cuartero

Manuscript Title: Fibroelastoma papilar: un tumor benigno que puede provocar consecuencias devastadoras

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

ICMJE DISCLOSURE FORM

Date: 7/7/2022

Your Name: Jesús Roberto Sáez Moreno

Manuscript Title: Fibroelastoma papilar: un tumor benigno que puede provocar consecuencias devastadoras

Manuscript Number (if known): [Click or tap here to enter text.](#)

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.

The author's relationships/activities/interests should be defined broadly. For example, if your manuscript pertains to the epidemiology of hypertension, you should declare all relationships with manufacturers of antihypertensive medication, even if that medication is not mentioned in the manuscript.

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