

ICMJE Form for Disclosure of Potential Conflicts of Interest

Instructions

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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)
Longinetti
3. Date
02-March-2017
4. Are you the corresponding author? Yes No
Corresponding Author's Name
Ziad El-Khatib
5. Manuscript Title
Utilization of social media and web forums by HIV patients - A cross-sectional study on adherence and reported anxiety level
6. Manuscript Identifying Number (if you know it)
PMEDR_PMEDR-16-167

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Ms. Longinetti has nothing to disclose.

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Section 1. Identifying Information

1. Given Name (First Name)
Vinoth

2. Surname (Last Name)
Manoharan

3. Date
02-March-2017

4. Are you the corresponding author?

Yes No

Corresponding Author's Name
Ziad El-Khatib

5. Manuscript Title

Utilization of social media and web forums by HIV patients - A cross-sectional study on adherence and reported anxiety level

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PMEDR_PMEDR-16-167

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Mr. Manoharan has nothing to disclose.

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1. Given Name (First Name)

Hala

2. Surname (Last Name)

Ayoub

3. Date

02-March-2017

4. Are you the corresponding author?

 Yes No

Corresponding Author's Name

Ziad El-Khatib

5. Manuscript Title

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1. Given Name (First Name)
Pamela J.
2. Surname (Last Name)
Surkan
3. Date
02-March-2017
4. Are you the corresponding author? Yes No
Corresponding Author's Name
Ziad El-Khatib
5. Manuscript Title
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Dr. Surkan has nothing to disclose.

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Ziad

2. Surname (Last Name)

El-Khatib

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02-March-2017

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Yes No

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