

ICMJE Form for Disclosure of Potential Conflicts of Interest

Instructions

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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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Royalties: Funds are coming in to you or your institution due to your patent

ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)

Grazia

2. Surname (Last Name)

Caci

3. Date

26-October-2020

4. Are you the corresponding author?

Yes No

5. Manuscript Title

Bronchoalveolar lavage-detected SARS-CoV-2 infection in presence of serial negative nasopharyngeal swabs. A case report.

6. Manuscript Identifying Number (if you know it)

ATM-20-4307-R2

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. Caci 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) Fabrizio	2. Surname (Last Name) Minervini	3. Date 15-December-2020
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Grazia Caci
5. Manuscript Title Bronchoalveolar lavage-detected SARS-CoV-2 infection in presence of serial negative nasopharyngeal swabs. A case report.		
6. Manuscript Identifying Number (if you know it) ATM-20-4307-R2		

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)

Carsten

2. Surname (Last Name)

Fechner

3. Date

15-December-2020

4. Are you the corresponding author?

Yes No

Corresponding Author's Name

Grazia Caci

5. Manuscript Title

Bronchoalveolar lavage-detected SARS-CoV-2 infection in presence of serial negative nasopharyngeal swabs

6. Manuscript Identifying Number (if you know it)

ATM-20-4307

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name) Justus E	2. Surname (Last Name) Roos	3. Date 15-December-2020
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Grazia Caci
5. Manuscript Title Bronchoalveolar lavage-detected SARS-CoV-2 infection in presence of serial negative nasopharyngeal swabs. A case report.		
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Ellen Christina

2. Surname (Last Name)

Obermann

3. Date

15-December-2020

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Yes No

Corresponding Author's Name

Grazia Caci

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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

ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name) Andrea	2. Surname (Last Name) Azzola	3. Date 15-December-2020
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Grazia Caci
5. Manuscript Title Bronchoalveolar lavage-detected SARS-CoV-2 infection in presence of serial negative nasopharyngeal swabs. A case report.		
6. Manuscript Identifying Number (if you know it) ATM-20-4307-R2		

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.)?

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Dr. Azzola has nothing to disclose.

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