

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)

Marc-Olivier

2. Surname (Last Name)

Sauvain

3. Date

17-April-2019

4. Are you the corresponding author?

Yes

No

Corresponding Author's Name

Gonzalez

5. Manuscript Title

Why choosing a video-assisted thoracic surgery approach for pulmonary metastasectomy?

6. Manuscript Identifying Number (if you know it)

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Dr. Sauvain 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) Etienne	2. Surname (Last Name) Abdelnour-Berchtold	3. Date 17-April-2019
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Gonzalez
5. Manuscript Title Why choosing a video-assisted thoracic surgery approach for pulmonary metastasectomy?		
6. Manuscript Identifying Number (if you know it)		

Section 2. The Work Under Consideration for Publication

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Dr. Abdelnour-Berchtold has nothing to disclose.

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Section 1. Identifying Information

1. Given Name (First Name)

Matthieu

2. Surname (Last Name)

Zellweger

3. Date

17-April-2019

4. Are you the corresponding author?

 Yes No

Corresponding Author's Name

Gonzalez

5. Manuscript Title

Why choosing a video-assisted thoracic surgery approach for pulmonary metastasectomy?

6. Manuscript Identifying Number (if you know it)

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1. Given Name (First Name)

Jean Yannis

2. Surname (Last Name)

Perentes

3. Date

17-April-2019

4. Are you the corresponding author?

Yes No

Corresponding Author's Name

Gonzalez

5. Manuscript Title

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Michel

2. Surname (Last Name)
Gonzalez

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17-April-2019

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