

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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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)

Joël

2. Surname (Last Name)

Greffier

3. Date

21-August-2020

4. Are you the corresponding author?

☐ Yes ☒ No

Corresponding Author's Name

Julien FRANDON

5. Manuscript Title

Ultra-low dose chest CT performance for the detection of viral pneumonia patterns in the outbreak period: a monocentric experience

6. Manuscript Identifying Number (if you know it)

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Dr. Greffier has nothing to disclose.

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Section 1. Identifying Information

1. Given Name (First Name)

Adel

2. Surname (Last Name)

Hoballah

3. Date

21-August-2020

4. Are you the corresponding author?

☐ Yes

☒ No

Corresponding Author's Name

Julien FRANDON

5. Manuscript Title

Ultra-low dose chest CT performance for the detection of viral pneumonia patterns in the outbreak period: a monocentric experience

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Dr. Hoballah has nothing to disclose.

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Section 1. Identifying Information

1. Given Name (First Name)
Alexandre

2. Surname (Last Name)
SADATE

3. Date
21-August-2020

4. Are you the corresponding author?

☐ Yes ☒ No

Corresponding Author's Name
Julien FRANDON

5. Manuscript Title
Ultra-low dose chest CT performance for the detection of viral pneumonia patterns in the outbreak period: a monocentric experience

6. Manuscript Identifying Number (if you know it)

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Dr. SADATE has nothing to disclose.

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Section 1. Identifying Information

1. Given Name (First Name)
Fabien

2. Surname (Last Name)
De Oliveira

3. Date
21-August-2020

4. Are you the corresponding author?

☐ Yes ☒ No

Corresponding Author's Name
Julien FRANDON

5. Manuscript Title
Ultra-low dose chest CT performance for the detection of viral pneumonia patterns in the outbreak period: a monocentric experience

6. Manuscript Identifying Number (if you know it)

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Dr. De Oliveira has nothing to disclose.

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Section 1. Identifying Information

1. Given Name (First Name) Pierre-Géraud	2. Surname (Last Name) Claret	3. Date 21-August-2020
4. Are you the corresponding author? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Corresponding Author's Name Julien FRANDON
5. Manuscript Title Ultra-low dose chest CT performance for the detection of viral pneumonia patterns in the outbreak period: a monocentric experience		
6. Manuscript Identifying Number (if you know it) 		

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)

Hélène

2. Surname (Last Name)

De Forges

3. Date

21-August-2020

4. Are you the corresponding author?

☐ Yes

☒ No

Corresponding Author's Name

Julien FRANDON

5. Manuscript Title

Ultra-low dose chest CT performance for the detection of viral pneumonia patterns in the outbreak period: a monocentric experience

6. Manuscript Identifying Number (if you know it)

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.)?

Are there any relevant conflicts of interest? ☐ Yes ☒ No

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Are there any relevant conflicts of interest? ☐ Yes ☒ No

Section 4. Intellectual Property -- Patents & Copyrights

Do you have any patents, whether planned, pending or issued, broadly relevant to the work? ☐ Yes ☒ No

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Section 6. Disclosure Statement

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Dr. De Forges 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)
Paul

2. Surname (Last Name)
Loubet

3. Date
21-August-2020

4. Are you the corresponding author?

☐ Yes ☒ No

Corresponding Author's Name
Julien FRANDON

5. Manuscript Title
Ultra-low dose chest CT performance for the detection of viral pneumonia patterns in the outbreak period: a monocentric experience

6. Manuscript Identifying Number (if you know it)

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Are there any relevant conflicts of interest? ☐ Yes ☒ No

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Dr. Loubet 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)

Jean Marc

2. Surname (Last Name)

Mauboussin

3. Date

21-August-2020

4. Are you the corresponding author?

☐

Yes

☒

No

Corresponding Author's Name

Julien FRANDON

5. Manuscript Title

Ultra-low dose chest CT performance for the detection of viral pneumonia patterns in the outbreak period: a monocentric experience

6. Manuscript Identifying Number (if you know it)

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Are there any relevant conflicts of interest?

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Are there any relevant conflicts of interest?

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Yes

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No

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)
Aymeric

2. Surname (Last Name)
Hamard

3. Date
21-August-2020

4. Are you the corresponding author?

☐ Yes ☒ No

Corresponding Author's Name
Julien FRANDON

5. Manuscript Title
Ultra-low dose chest CT performance for the detection of viral pneumonia patterns in the outbreak period: a monocentric experience

6. Manuscript Identifying Number (if you know it)

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Are there any relevant conflicts of interest? ☐ Yes ☒ No

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Are there any relevant conflicts of interest? ☐ Yes ☒ No

Section 4. Intellectual Property -- Patents & Copyrights

Do you have any patents, whether planned, pending or issued, broadly relevant to the work? ☐ Yes ☒ No

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Dr. Hamard 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)

Jean Paul

2. Surname (Last Name)

BEREGI

3. Date

21-August-2020

4. Are you the corresponding author?

☐ Yes

☒ No

Corresponding Author's Name

Julien FRANDON

5. Manuscript Title

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6. Manuscript Identifying Number (if you know it)

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)
Julien

2. Surname (Last Name)
Frandon

3. Date
21-August-2020

4. Are you the corresponding author? ☒ Yes ☐ No

5. Manuscript Title
Ultra-low dose chest CT performance for the detection of viral pneumonia patterns in the outbreak period: a monocentric experience

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Section 6. Disclosure Statement

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Dr. Frandon has nothing to disclose.

Evaluation and Feedback

Please visit <http://www.icmje.org/cgi-bin/feedback> to provide feedback on your experience with completing this form.