

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) Maria	2. Surname (Last Name) Kerti	3. Date 17-December-2020
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Dr. Janos T. Varga
5. Manuscript Title The effectiveness of pulmonary rehabilitation in connection with lung transplantation in 2Hungary		
6. Manuscript Identifying Number (if you know it) 20-1783-R1-MS		

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Are there any relevant conflicts of interest? Yes No

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Dr. Kerti 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) Aniko	2. Surname (Last Name) Bohacs	3. Date 17-December-2020
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Dr. Janos T. Varga
5. Manuscript Title The effectiveness of pulmonary rehabilitation in connection with lung transplantation in 2Hungary		
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Section 1. Identifying Information

1. Given Name (First Name)

Ildiko

2. Surname (Last Name)

Madurka

3. Date

17-December-2020

4. Are you the corresponding author?

Yes No

Corresponding Author's Name

Dr. Janos T. Varga

5. Manuscript Title

The effectiveness of pulmonary rehabilitation in connection with lung transplantation in 2Hungary

6. Manuscript Identifying Number (if you know it)

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Section 1. Identifying Information

1. Given Name (First Name)

Zsuzsanna

2. Surname (Last Name)

Kovats

3. Date

17-December-2020

4. Are you the corresponding author?

 Yes No

Corresponding Author's Name

Dr. Janos T. Varga

5. Manuscript Title

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6. Manuscript Identifying Number (if you know it)

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Balazs

2. Surname (Last Name)
Gieszer

3. Date
17-December-2020

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Corresponding Author's Name
Dr. Janos T. Varga

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name) Jeno	2. Surname (Last Name) Elek	3. Date 17-December-2020
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Dr. Janos T. Varga
5. Manuscript Title The effectiveness of pulmonary rehabilitation in connection with lung transplantation in 2Hungary		
6. Manuscript Identifying Number (if you know it) 20-1783-R1-MS		

Section 2. The Work Under Consideration for Publication

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3. Relevant financial activities outside the submitted work.

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Personal Fees: Monies paid to you for services rendered, generally honoraria, royalties, or fees for consulting, lectures, speakers bureaus, expert testimony, employment, or other affiliations

Non-Financial Support: Examples include drugs/equipment supplied by the entity, travel paid by the entity, writing assistance, administrative support, etc.

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ICMJE Form for Disclosure of Potential Conflicts of Interest

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1. Given Name (First Name)
Ferenc

2. Surname (Last Name)
Renyi-Vamos

3. Date
17-December-2020

4. Are you the corresponding author? Yes No

Corresponding Author's Name
Dr. Janos T. Varga

5. Manuscript Title
The effectiveness of pulmonary rehabilitation in connection with lung transplantation in 2Hungary

6. Manuscript Identifying Number (if you know it)
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Section 1. Identifying Information

1. Given Name (First Name)
Janos T.

2. Surname (Last Name)
Varga

3. Date
17-December-2020

4. Are you the corresponding author? Yes No

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