Date:	2021.11.17
Your Name:	Jun Luo
Manuscript Title	e: Postoperative lung infection in an immunocompromised older adult patient with lung cancer after
oncological sur	gery
Manuscript nun	nber (if known):

In the interest of transparency, we ask you to disclose all relationships/activities/interests listed below that are related to the content of your manuscript. "Related" means any relation with for-profit or not-for-profit third parties whose interests may be affected by the content of the manuscript. Disclosure represents a commitment to transparency and does not necessarily indicate a bias. If you are in doubt about whether to list a relationship/activity/interest, it is preferable that you do so.

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		Name all entities with whom you have this relationship or indicate none (add rows as needed)	Specifications/Comments (e.g., if payments were made to you or to your institution)
		Time frame: Since the initial	planning of the work
1	All support for the present manuscript (e.g., funding, provision of study materials, medical writing, article processing charges, etc.) No time limit for this item.	XNone	
		Time frame: past	36 months
2	Grants or contracts from any entity (if not indicated in item #1 above).	XNone	
3	Royalties or licenses	XNone	
4	Consulting fees	XNone	

5	Payment or honoraria for	X None	
	lectures, presentations,		
	speakers bureaus, manuscript writing or		
	educational events		
6	Payment for expert	X None	
	testimony	X_None	
7	Support for attending meetings and/or travel	X None	
8	Patents planned, issued or	X None	
	pending		
9	Participation on a Data	X None	
	Safety Monitoring Board or		
	Advisory Board		
10	Leadership or fiduciary role	X None	
	in other board, society, committee or advocacy		
	group, paid or unpaid		
11	Stock or stock options	X None	
		NONE	
12	Receipt of equipment,	X None	
	materials, drugs, medical		
	writing, gifts or other		
12	Services Other financial or non-	V Nove	
13	financial interests	X None	
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Plea	se summarize the above co	nflict of interest in the fo	llowing box:

No conflict of interest.			

Date:	2021.11.17
Your Name:	Ruigin Zhou
Manuscript Title	e: Postoperative lung infection in an immunocompromised older adult patient with lung cancer after
oncological sur	gery
Manuscript nun	nber (if known):

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11	Stock or stock options	X None	
		NONE	
12	Receipt of equipment,	X None	
	materials, drugs, medical		
	writing, gifts or other		
12	Services Other financial or non-	V Nove	
13	financial interests	X None	
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Plea	se summarize the above co	nflict of interest in the fo	llowing box:

No conflict of interest.			

Date:	2021.11.17						
Your Name:	Linjun Li						
Manuscript Ti	tle: Postoperative lung infe	ction in an immunocom	promised older	adult patie	ent with lur	ig cancer a	after
oncological su	ırgery						
Manuscript nu	umber (if known):						

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	any entity (if not indicated in item #1 above).	XNone	
3	Royalties or licenses	XNone	
4	Consulting fees	XNone	

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	speakers bureaus, manuscript writing or		
	educational events		
6	Payment for expert	X None	
	testimony	X_None	
7	Support for attending meetings and/or travel	X None	
8	Patents planned, issued or	X None	
	pending		
9	Participation on a Data	X None	
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	Advisory Board		
10	Leadership or fiduciary role	X None	
	in other board, society, committee or advocacy		
	group, paid or unpaid		
11	Stock or stock options	X None	
		NONE	
12	Receipt of equipment,	X None	
	materials, drugs, medical		
	writing, gifts or other		
12	Services Other financial or non-	V Nove	
13	financial interests	X None	
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Plea	se summarize the above co	nflict of interest in the fo	llowing box:

No conflict of interest.			

Date:	2021.11.17
Your Name:	Lijun Yao
Manuscript Title	e: Postoperative lung infection in an immunocompromised older adult patient with lung cancer after
oncological sur	gery
Manuscript nun	nber (if known):

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6	Payment for expert	X None		
	testimony	X_None		
7	Support for attending meetings and/or travel	X None		
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11	Stock or stock options	X None		
12	Receipt of equipment,	X None		
	materials, drugs, medical			
	writing, gifts or other			
42	services			
13	Other financial or non- financial interests	XNone		
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Plea	Please summarize the above conflict of interest in the following box:			

No conflict of interest.		

Date:	2021.11.17
Your Name:	_Cheng Zhang
Manuscript Title	Postoperative lung infection in an immunocompromised older adult patient with lung cancer after
oncological sur	gery
Manuscript nun	nber (if known):

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	testimony	X_None		
7	Support for attending meetings and/or travel	X None		
8	Patents planned, issued or	X None		
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