

ICMJE DISCLOSURE FORM

Date: _____ 10 AUGUST 2022

Your Name: _____ DIEGO GONZALEZ RIVAS

Manuscript Title

Uniportal video-assisted thoracoscopic lung sparing tracheo-bronchial and carinal sleeve resections

Manuscript number (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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ICMJE DISCLOSURE FORM

Date: _____ 10 AUGUST 2022

Your Name: _____ Konstantinos Marios Soultanis

Manuscript Title

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Date: _____ 10 AUGUST 2022

Your Name: _____ ALEJANDRO GARCIA

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ICMJE DISCLOSURE FORM

Date: _____ 10 AUGUST 2022

Your Name: _____ KAIYUN YANG

Manuscript Title

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ICMJE DISCLOSURE FORM

Date: _____ 10 AUGUST 2022

Your Name: _____ YUE QING

Manuscript Title

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ICMJE DISCLOSURE FORM

Date: _____ 10 AUGUST 2022

Your Name: _____ LINHUA YIE

Manuscript Title

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Date: _____ 10 AUGUST 2022

Your Name: _____ Anning Chen

Manuscript Title

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ICMJE DISCLOSURE FORM

Date: _____ 10 AUGUST 2022

Your Name: _____ Yunchao Huang

Manuscript Title

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ICMJE DISCLOSURE FORM

Date: _____ 10 AUGUST 2022

Your Name: _____ Guangjian Li

Manuscript Title

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Date: _____ 10 AUGUST 2022

Your Name: _____ GENING JIANG

Manuscript Title

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