

Instructions

The purpose of this form is to provide readers of your manuscript with information about your other interests that could influence how they receive and understand your work. The form is designed to be completed electronically and stored electronically. It contains programming that allows appropriate data display. Each author should submit a separate form and is responsible for the accuracy and completeness of the submitted information. The form is in six parts.

Identifying information.

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Relevant financial activities outside the submitted work. 3.

This section asks about your financial relationships with entities in the bio-medical arena that could be perceived to influence, or that give the appearance of potentially influencing, what you wrote in the submitted work. You should disclose interactions with ANY entity that could be considered broadly relevant to the work. For example, if your article is about testing an epidermal growth factor receptor (EGFR) antagonist in lung cancer, you should report all associations with entities pursuing diagnostic or therapeutic strategies in cancer in general, not just in the area of EGFR or lung cancer.

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Intellectual Property.

This section asks about patents and copyrights, whether pending, issued, licensed and/or receiving royalties.

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earning royalties or not

Karpathiou 1



Section 1.	dentifying Informa	ation	
1. Given Name (First Georgia	Name)	2. Surname (Last Name) Karpathiou	3. Date 02-April-2020
4. Are you the corres	ponding author?	Yes ✓ No	Corresponding Author's Name M. Froudarakis
5. Manuscript Title Clinical long-term o	outcome of non-speci	ific pleuritis (NSP) after su	urgical or medical thoracoscopy
6. Manuscript Identif JTD-19-3496	ying Number (if you kno	ow it)	
Section 2. T	he Work Under Co	nsideration for Publi	cation
any aspect of the substatistical analysis, etc	mitted work (including	but not limited to grants, do	n a third party (government, commercial, private foundation, etc.) for ata monitoring board, study design, manuscript preparation,
Section 3. R	elevant financial a	activities outside the	submitted work.
of compensation) w clicking the "Add +"	vith entities as descrik	oed in the instructions. U ort relationships that we	nether you have financial relationships (regardless of amount se one line for each entity; add as many lines as you need by tree present during the 36 months prior to publication.
Section 4.	ntellectual Propert	ty Patents & Copyri	ghts
Do you have any pa	atents, whether plann	ed, pending or issued, b	roadly relevant to the work? Yes V No

Karpathiou 2



Section 5.	
Section 5.	Relationships not covered above
	ationships or activities that readers could perceive to have influenced, or that give the appearance of cing, what you wrote in the submitted work?
Yes, the follow	ing relationships/conditions/circumstances are present (explain below):
✓ No other relation	onships/conditions/circumstances that present a potential conflict of interest
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Dr. Karpathiou has	s nothing to disclose.

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Karpathiou 3



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Anevlavis 1



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Given Name (File Stavros	rst Name)	2. Surname (Last Name) Anevlavis	3. Date 02-April-2020
4. Are you the cor	responding author?	Yes ✓ No	Corresponding Author's Name M. Froudarakis
5. Manuscript Title Clinical long-terr		cific pleuritis (NSP) after su	rgical or medical thoracoscopy
6. Manuscript Ider JTD-19-3496	ntifying Number (if you kr	now it)	
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Do you have any	patents, whether plan	ned, pending or issued, br	oadly relevant to the work? Yes V No

Anevlavis 2



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Dr. Anevlavis ha	s nothing to disclose.

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Anevlavis 3



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Tiffet 1



Section 1. Identifying Infor	rmation	
1. Given Name (First Name) Olivier	2. Surname (Last Name) Tiffet	3. Date 02-April-2020
4. Are you the corresponding author?	Yes ✓ No	Corresponding Author's Name M. Froudarakis
5. Manuscript Title Clinical long-term outcome of non-sp	pecific pleuritis (NSP) after su	argical or medical thoracoscopy
6. Manuscript Identifying Number (if you JTD-19-3496	know it)	
Section 2. The Work Under	Consideration for Public	cation
	ng but not limited to grants, da	a third party (government, commercial, private foundation, etc.) for ita monitoring board, study design, manuscript preparation,
Section 3. Relevant financia	al activities outside the s	y homistad work
Place a check in the appropriate boxes in the table to indicate whether you have financial relationships (regardless of amount of compensation) with entities as described in the instructions. Use one line for each entity; add as many lines as you need by clicking the "Add +" box. You should report relationships that were present during the 36 months prior to publication . Are there any relevant conflicts of interest? Yes Vo		
Section 4. Intellectual Prop	outre Dotoute 9 Course	ula a
intellectual Prop	erty Patents & Copyri <u>c</u>	
Do you have any patents, whether planned, pending or issued, broadly relevant to the work? Yes Vo		

Tiffet 2



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Casteillo 1



Section 1. Identifying Infor	mation	
1. Given Name (First Name) Francois	2. Surname (Last Name) Casteillo	3. Date 02-April-2020
4. Are you the corresponding author?	Yes ✓ No	Corresponding Author's Name M. Froudarakis
5. Manuscript Title Clinical long-term outcome of non-spe	ecific pleuritis (NSP) after su	rgical or medical thoracoscopy
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Do you have any patents, whether plan	nned, pending or issued, br	oadly relevant to the work? Yes V

Casteillo 2



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1

administrative support, etc.



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Mobarki 2



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Mismetti 1



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	g but not limited to grants, da	a third party (government, commercial, private foundation, etc.) for ata monitoring board, study design, manuscript preparation,
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of compensation) with entities as descr	ibed in the instructions. Us port relationships that wer	ether you have financial relationships (regardless of amount se one line for each entity; add as many lines as you need by re present during the 36 months prior to publication .
Section 4. Intellectual Prope	rty Patents & Copyrig	ghts
Do you have any patents, whether plan		

Mismetti 2



Section 5.	
Section 5.	Relationships not covered above
	ationships or activities that readers could perceive to have influenced, or that give the appearance of cing, what you wrote in the submitted work?
Yes, the followi	ng relationships/conditions/circumstances are present (explain below):
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	uscript acceptance, journals will ask authors to confirm and, if necessary, update their disclosure statements als may ask authors to disclose further information about reported relationships.
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Ntolios 1



Section 1.	Identifying Inform	nation	
Given Name (Fire Paschalis	rst Name)	2. Surname (Last Name) Ntolios	3. Date 02-April-2020
4. Are you the cor	responding author?	Yes ✓ No	Corresponding Author's Name M. Froudarakis
5. Manuscript Title Clinical long-terr		cific pleuritis (NSP) after su	rgical or medical thoracoscopy
6. Manuscript Ider JTD-19-3496	ntifying Number (if you kr	now it)	
			_
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Do you have any			oadly relevant to the work? Yes V

Ntolios 2



Section 5.					
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Koulelidis 1



Section 1.	Identifying Inform	nation	
1. Given Name (Fi Andreas	rst Name)	2. Surname (Last Name) Koulelidis	3. Date 02-April-2020
4. Are you the cor	responding author?	☐ Yes ✓ No	Corresponding Author's Name M. Froudarakis
5. Manuscript Title Clinical long-teri		cific pleuritis (NSP) after su	rgical or medical thoracoscopy
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Koulelidis 2



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Trouillon 1



Section 1. Identifying Inform	mation	
1. Given Name (First Name) Tiffany	2. Surname (Last Name) Trouillon	3. Date 02-April-2020
4. Are you the corresponding author?	☐ Yes ✓ No	Corresponding Author's Name M. Froudarakis
5. Manuscript Title Clinical long-term outcome of non-spe	ecific pleuritis (NSP) after su	rgical or medical thoracoscopy
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Trouillon 2



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Zadel 1



Section 1.	Identifying Inform	nation		
1. Given Name (Fi Nicolas	, ,	2. Surname (Last Name) Zadel	3. Date 02-April-2020	
4. Are you the cor	responding author?	Yes ✓ No	Corresponding Author's Name M. Froudarakis	
5. Manuscript Title Clinical long-teri		cific pleuritis (NSP) after su	rgical or medical thoracoscopy	
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Zadel 2



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4. Are you the cor	responding author?	Yes ✓ No	Corresponding Author's Name M. Froudarakis
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Hathroubi 2



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For grants you have received for work outside the submitted work, you should disclose support ONLY from entities that could be perceived to be affected financially by the published work, such as drug companies, or foundations supported by entities that could be perceived to have a financial stake in the outcome. Public funding sources, such as government agencies, charitable foundations or academic institutions, need not be disclosed. For example, if a government agency sponsored a study in which you have been involved and drugs were provided by a pharmaceutical company, you need only list the pharmaceutical company.

4. Intellectual Property.

This section asks about patents and copyrights, whether pending, issued, licensed and/or receiving royalties.

Relationships not covered above.

Use this section to report other relationships or activities that readers could perceive to have influenced, or that give the appearance of potentially influencing, what you wrote in the submitted work.

Definitions.

Entity: government agency, foundation, commercial sponsor, academic institution, etc.

Grant: A grant from an entity, generally [but not always] paid to your organization

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.

Other: Anything not covered under the previous three boxes

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Licensed: The patent has been licensed to an entity, whether earning royalties or not

Royalties: Funds are coming in to you or your institution due to your

Peoc'h



Section 1.	Identifying Inform	nation			
1. Given Name (Fi Michel	rst Name)	2. Surname (Last Name) Peoc'h	3. Date 02-April-2020		
4. Are you the cor	responding author?	Yes ✓ No	Corresponding Author's Name M. Froudarakis		
5. Manuscript Title Clinical long-terr		cific pleuritis (NSP) after su	rgical or medical thoracoscopy		
6. Manuscript Ider JTD-19-3496	ntifying Number (if you kr	now it)			
			_		
Section 2.	Section 2. The Work Under Consideration for Publication				
any aspect of the s statistical analysis,	ubmitted work (including	g but not limited to grants, da	a third party (government, commercial, private foundation, etc.) for ta monitoring board, study design, manuscript preparation,		
Section 3.	Relevant financial	activities outside the s	submitted work.		
of compensation clicking the "Add) with entities as descri	ibed in the instructions. Us port relationships that wer	ether you have financial relationships (regardless of amount se one line for each entity; add as many lines as you need by re present during the 36 months prior to publication.		
Section 4.	Intellectual Proper	rty Patents & Copyric	ghts		
Do you have any	patents, whether plan	ned, pending or issued, br	oadly relevant to the work? Yes V No		

Peoc'h 2



Section 5. Relationships not severed above
Relationships not covered above
Are there other relationships or activities that readers could perceive to have influenced, or that give the appearance of potentially influencing, what you wrote in the submitted work?
Yes, the following relationships/conditions/circumstances are present (explain below):
✓ No other relationships/conditions/circumstances that present a potential conflict of interest
At the time of manuscript acceptance, journals will ask authors to confirm and, if necessary, update their disclosure statements On occasion, journals may ask authors to disclose further information about reported relationships.
Section 6. Disclosure Statement
Disclosure Statement
Based on the above disclosures, this form will automatically generate a disclosure statement, which will appear in the box below.
Dr. Peoc'h 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.

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Instructions

The purpose of this form is to provide readers of your manuscript with information about your other interests that could influence how they receive and understand your work. The form is designed to be completed electronically and stored electronically. It contains programming that allows appropriate data display. Each author should submit a separate form and is responsible for the accuracy and completeness of the submitted information. The form is in six parts.

Identifying information.

2. The work under consideration for publication.

This section asks for information about the work that you have submitted for publication. The time frame for this reporting is that of the work itself, from the initial conception and planning to the present. The requested information is about resources that you received, either directly or indirectly (via your institution), to enable you to complete the work. Checking "No" means that you did the work without receiving any financial support from any third party -- that is, the work was supported by funds from the same institution that pays your salary and that institution did not receive third-party funds with which to pay you. If you or your institution received funds from a third party to support the work, such as a government granting agency, charitable foundation or commercial sponsor, check "Yes".

3. Relevant financial activities outside the submitted work.

This section asks about your financial relationships with entities in the bio-medical arena that could be perceived to influence, or that give the appearance of potentially influencing, what you wrote in the submitted work. You should disclose interactions with ANY entity that could be considered broadly relevant to the work. For example, if your article is about testing an epidermal growth factor receptor (EGFR) antagonist in lung cancer, you should report all associations with entities pursuing diagnostic or therapeutic strategies in cancer in general, not just in the area of EGFR or lung cancer.

Report all sources of revenue paid (or promised to be paid) directly to you or your institution on your behalf over the 36 months prior to submission of the work. This should include all monies from sources with relevance to the submitted work, not just monies from the entity that sponsored the research. Please note that your interactions with the work's sponsor that are outside the submitted work should also be listed here. If there is any question, it is usually better to disclose a relationship than not to do so.

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Licensed: The patent has been licensed to an entity, whether earning royalties or not

Royalties: Funds are coming in to you or your institution due to your

n-Financial Support: Examples include drugs/equipment

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Section 1.	Identifying Inform	ation			
Given Name (First Name) Marios		2. Surname (Last Name) Froudarakis		3. Date 02-April-2020	
4. Are you the corresponding author?		✓ Yes No			
5. Manuscript Title Clinical long-term outcome of non-specific pleuritis (NSP) after surgical or medical thoracoscopy					
6. Manuscript Identifying Number (if you know it) JTD-19-3496					
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					
Section 3.	Relevant financial	activities outside	the submitted work.		
Place a check in the appropriate boxes in the table to indicate whether you have financial relationships (regardless of amount of compensation) with entities as described in the instructions. Use one line for each entity; add as many lines as you need by clicking the "Add +" box. You should report relationships that were present during the 36 months prior to publication . Are there any relevant conflicts of interest? Yes Vo					
Section 4.					
Section 4.	Intellectual Proper	ty Patents & Co	opyrights		
Do you have any patents, whether planned, pending or issued, broadly relevant to the work? Yes Vo					

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Section 5. Polationships not sovered above				
Relationships not covered above				
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Section 6. Disclosure Statement				
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Dr. Froudarakis has nothing to disclose.				

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