

ICMJE Form for Disclosure of Potential Conflicts of Interest

Instructions

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4. Intellectual Property.

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)

Ricardo Mingarini

2. Surname (Last Name)

Terra

3. Date

20-March-2020

4. Are you the corresponding author?

Yes No

5. Manuscript Title

Adverse events after pleurodesis in patients with malignant pleural effusion

6. Manuscript Identifying Number (if you know it)

JTD-19-3850

Section 2. The Work Under Consideration for Publication

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Are there any relevant conflicts of interest? Yes No

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Section 6. Disclosure Statement

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Dr. Terra has nothing to disclose.

Evaluation and Feedback

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name) Priscila Berenice	2. Surname (Last Name) da Costa	3. Date 20-March-2020
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Ricardo Mingarini Terra
5. Manuscript Title Adverse events after pleurodesis in patients with malignant pleural effusion		
6. Manuscript Identifying Number (if you know it) JTD-19-3850		

Section 2. The Work Under Consideration for Publication

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Are there any relevant conflicts of interest? Yes No

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Dr. da Costa 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) Alberto Jorge	2. Surname (Last Name) Monteiro Dela Vega	3. Date 20-March-2020
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Ricardo Mingarini Terra
5. Manuscript Title Adverse events after pleurodesis in patients with malignant pleural effusion		
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1. Given Name (First Name) Paulo Manuel	2. Surname (Last Name) Pêgo-Fernandes	3. Date 20-March-2020
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