

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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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)

Emily

2. Surname (Last Name)

Suzuki

3. Date

04-October-2020

4. Are you the corresponding author?

Yes

No

Corresponding Author's Name

Masatoshi Kurihara

5. Manuscript Title

The effects of total pleural covering on pneumothorax recurrence and pulmonary function in lymphangioleiomyomatosis patients without history of pleurodesis or thoracic surgeries for pneumothorax

6. Manuscript Identifying Number (if you know it)

JTD-20-2286-R1

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Yes

No

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Dr. Suzuki has nothing to disclose.

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Section 1. Identifying Information

1. Given Name (First Name)

Masatoshi

2. Surname (Last Name)

Kurihara

3. Date

04-October-2020

4. Are you the corresponding author?

Yes No

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The effects of total pleural covering on pneumothorax recurrence and pulmonary function in lymphangioleiomyomatosis patients without history of pleurodesis or thoracic surgeries for pneumothorax

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Dr. Kurihara has nothing to disclose.

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Section 1. Identifying Information

1. Given Name (First Name)

Kenji

2. Surname (Last Name)

Tsuboshima

3. Date

04-October-2020

4. Are you the corresponding author?

Yes No

Corresponding Author's Name

Masatoshi Kurihara

5. Manuscript Title

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Dr. Tsuboshima has nothing to disclose.

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Section 1. Identifying Information

1. Given Name (First Name) Kenichi	2. Surname (Last Name) Watanabe	3. Date 04-October-2020
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Masatoshi Kurihara
5. Manuscript Title The effects of total pleural covering on pneumothorax recurrence and pulmonary function in lymphangioleiomyomatosis patients without history of pleurodesis or thoracic surgeries for pneumothorax		
6. Manuscript Identifying Number (if you know it) JTD-20-2286		

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Dr. Watanabe has nothing to disclose.

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Section 1. Identifying Information

1. Given Name (First Name) Shouichi	2. Surname (Last Name) Okamoto	3. Date 02-October-2020
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Masatoshi Kurihara
5. Manuscript Title The effects of total pleural covering on pneumothorax recurrence and pulmonary function in lymphangioleiomyomatosis patients without history of pleurodesis or thoracic surgeries for pneumothorax		
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ICMJE Form for Disclosure of Potential Conflicts of Interest

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1. Given Name (First Name) Kuniaki	2. Surname (Last Name) Seyama	3. Date 03-October-2020
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Masatoshi Kurihara
5. Manuscript Title The effects of total pleural covering on pneumothorax recurrence and pulmonary function in lymphangioleiomyomatosis patients without history of pleurodesis or thoracic surgeries for pneumothorax		
6. Manuscript Identifying Number (if you know it)		

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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.)?

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Dr. Seyama has nothing to disclose.

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