

## ICMJE Form for Disclosure of Potential Conflicts of Interest

### Instructions

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#### 1. Identifying information.

#### 2. The work under consideration for publication.

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#### 3. Relevant financial activities outside the submitted work.

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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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### Section 1. Identifying Information

1. Given Name (First Name) Hui	2. Surname (Last Name) Zheng	3. Date 27-January-2021
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Chang Chen and Yuming Zhu
5. Manuscript Title Simultaneous Bilateral Thoracoscopic Lobectomy for Synchronous Bilateral Multiple Primary Lung Cancer——Single Center Experience		
6. Manuscript Identifying Number (if you know it) JTD-20-3325		

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Dr. Zheng has nothing to disclose.

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1. Given Name (First Name) Qiao	2. Surname (Last Name) Peng	3. Date 27-January-2021
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Chang Chen and Yuming Zhu
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1. Given Name (First Name) Dong	2. Surname (Last Name) Xie	3. Date 27-January-2021
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Chang Chen and Yuming Zhu
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Dr. Xie has nothing to disclose.

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1. Given Name (First Name) Liang	2. Surname (Last Name) Duan	3. Date 27-January-2021
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Chang Chen and Yuming Zhu
5. Manuscript Title Simultaneous Bilateral Thoracoscopic Lobectomy for Synchronous Bilateral Multiple Primary Lung Cancer——Single Center Experience		
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Dr. Duan 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) Gening	2. Surname (Last Name) Jiang	3. Date 27-January-2021
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Chang Chen and Yuming Zhu
5. Manuscript Title Simultaneous Bilateral Thoracoscopic Lobectomy for Synchronous Bilateral Multiple Primary Lung Cancer——Single Center Experience		
6. Manuscript Identifying Number (if you know it) JTD-20-3325		

### 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

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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.

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## ICMJE Form for Disclosure of Potential Conflicts of Interest

### Section 1. Identifying Information

1. Given Name (First Name)

Yuming

2. Surname (Last Name)

Zhu

3. Date

27-January-2021

4. Are you the corresponding author?

Yes  No

5. Manuscript Title

Simultaneous Bilateral Thoracoscopic Lobectomy for Synchronous Bilateral Multiple Primary Lung Cancer——Single Center Experience

6. Manuscript Identifying Number (if you know it)

JTD-20-3325

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1. Given Name (First Name)

Chang

2. Surname (Last Name)

Chen

3. Date

27-January-2021

4. Are you the corresponding author?

Yes  No

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