

# ICMJE DISCLOSURE FORM

Date: August 11, 2022  
 Your Name: Frank Detterbeck  
 Manuscript Title: Lung Cancer with Air Lucency: A Systematic Review and Clinical Management Guide  
 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.

The following questions apply to the author's relationships/activities/interests as they relate to the current manuscript only.

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In item #1 below, report all support for the work reported in this manuscript without time limit. For all other items, the time frame for disclosure is the past 36 months.

		Name all entities with whom you have this relationship or indicate none (add rows as needed)	Specifications/Comments (e.g., if payments were made to you or to your institution)
<b>Time frame: Since the initial planning of the work</b>			
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<b>Time frame: past 36 months</b>			
2	Grants or contracts from any entity (if not indicated in item #1 above).	____ None	
3	Royalties or licenses	____ None	
4	Consulting fees	____ None	

5	Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or educational events	___ None	
6	Payment for expert testimony	___ None	
7	Support for attending meetings and/or travel	___ None	
8	Patents planned, issued or pending	___ None	
9	Participation on a Data Safety Monitoring Board or Advisory Board	___ None	
10	Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid	___ None	
11	Stock or stock options	___ None	
12	Receipt of equipment, materials, drugs, medical writing, gifts or other services	___ None	
13	Other financial or non-financial interests	___ None	

**Please summarize the above conflict of interest in the following box:**

No conflicts of interest to declare

**Please place an “X” next to the following statement to indicate your agreement:**

  X   I certify that I have answered every question and have not altered the wording of any of the questions on this form.

# ICMJE DISCLOSURE FORM

Date: 8-14-2022

Your Name: Ulas Kumbasar

Manuscript Title: Lung Cancer with Air Lucency: A Systematic Review and Clinical Management Guide

Manuscript number (if known): \_\_\_\_\_

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# ICMJE DISCLOSURE FORM

Date: 8-22-22

Your Name: Andrew X Li

Manuscript Title: Lung Cancer with Air Lucency: A Systematic Review and Clinical Management Guide

Manuscript number (if known): \_\_\_\_\_

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# ICMJE DISCLOSURE FORM

Date: 8-13-2022

Your Name: Ami Rubinowitz

Manuscript Title: Lung Cancer with Air Lucency: A Systematic Review and Clinical Management Guide

Manuscript number (if known): \_\_\_\_\_

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# ICMJE DISCLOSURE FORM

Date: 8-23-22

Your Name: Leah Traube

Manuscript Title: Lung Cancer with Air Lucency: A Systematic Review and Clinical Management Guide

Manuscript number (if known): \_\_\_\_\_

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# ICMJE DISCLOSURE FORM

Date: 8-16-2022

Your Name: Babina Gosangi

Manuscript Title: Lung Cancer with Air Lucency: A Systematic Review and Clinical Management Guide

Manuscript number (if known): \_\_\_\_\_

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# ICMJE DISCLOSURE FORM

Date: Aug 20, 2022  
 Your Name: Brooks Udelsman  
 Manuscript Title: Lung Cancer with Air Lucency: A Systematic Review and Clinical Management Guide  
 Manuscript number (if known): \_\_\_\_\_

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# ICMJE DISCLOSURE FORM

Date: 8-19-2022

Your Name: Brett Bade

Manuscript Title: Lung Cancer with Air Lucency: A Systematic Review and Clinical Management Guide

Manuscript number (if known): \_\_\_\_\_

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# ICMJE DISCLOSURE FORM

Date: 8-24-2022

Your Name: Sora Ely

Manuscript Title: Lung Cancer with Air Lucency: A Systematic Review and Clinical Management Guide

Manuscript number (if known): \_\_\_\_\_

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# ICMJE DISCLOSURE FORM

Date: 8-13-2022

Your Name: Gaspar Barreto

Manuscript Title: Lung Cancer with Air Lucency: A Systematic Review and Clinical Management Guide

Manuscript number (if known): \_\_\_\_\_

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# ICMJE DISCLOSURE FORM

Date: 8-25-22

Your Name: Lynn Tanoue

Manuscript Title: Lung Cancer with Air Lucency: A Systematic Review and Clinical Management Guide

Manuscript number (if known): \_\_\_\_\_

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# ICMJE DISCLOSURE FORM

Date: August 21<sup>st</sup>, 2022  
 Your Name: Edith Michelle Marom  
 Manuscript Title: Lung Cancer with Air Lucency: A Systematic Review and Clinical Management Guide  
 Manuscript number (if known): \_\_\_\_\_

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The honoraria for lectures had nothing to do with the subject of the manuscript but were related to imaging of interstitial lung disease with HRCT and pitfalls of cancer response evaluation imaged with FDG PET-CT.

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Date: 8-13-2022

Your Name: M. Patricia Rivera

Manuscript Title: Lung Cancer with Air Lucency: A Systematic Review and Clinical Management Guide

Manuscript number (if known): \_\_\_\_\_

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<b>Time frame: past 36 months</b>			
2	Grants or contracts from any entity (if not indicated in item #1 above).	<u>None</u>	
3	Royalties or licenses	<u>None</u>	
4	Consulting fees	<u>None</u>	

5	Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or educational events	___ None	
6	Payment for expert testimony	___ None	
7	Support for attending meetings and/or travel	___ None	
8	Patents planned, issued or pending	___ None	
9	Participation on a Data Safety Monitoring Board or Advisory Board	___ None	
10	Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid	___ None	
11	Stock or stock options	___ None	
12	Receipt of equipment, materials, drugs, medical writing, gifts or other services	___ None	
13	Other financial or non-financial interests	___ None	

**Please summarize the above conflict of interest in the following box:**

No conflicts to declare

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