

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)
Claudia Yvonne

2. Surname (Last Name)
Finocchiaro

3. Date
16-December-2018

4. Are you the corresponding author? Yes No

5. Manuscript Title
Listening understanding and acting (lung): focus on communicational issue in thoracic oncology

6. Manuscript Identifying Number (if you know it)

Section 2. The Work Under Consideration for Publication

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Dr. Finocchiaro has nothing to disclose.

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Section 1. Identifying Information

1. Given Name (First Name)
Alessandra

2. Surname (Last Name)
Rota

3. Date
16-December-2018

4. Are you the corresponding author? Yes No

Corresponding Author's Name
Claudia Yvonne Finocchiaro

5. Manuscript Title
Listening understanding and acting (lung): focus on communicational issue in thoracic oncology

6. Manuscript Identifying Number (if you know it)

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Dr. Rota has nothing to disclose.

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Section 1. Identifying Information

1. Given Name (First Name) Vito	2. Surname (Last Name) Barbieri	3. Date 16-December-2018
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Claudia Yvonne Finocchiaro
5. Manuscript Title Listening understanding and acting (lung): focus on communicational issue in thoracic oncology		
6. Manuscript Identifying Number (if you know it)		

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Section 1. Identifying Information

1. Given Name (First Name) Anna	2. Surname (Last Name) Bettini	3. Date 16-December-2018
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Claudia Yvonne Finocchiaro
5. Manuscript Title Listening understanding and acting (lung): focus on communicational issue in thoracic oncology		
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1. Given Name (First Name)
Roberto

2. Surname (Last Name)
Bianco

3. Date
16-December-2018

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Corresponding Author's Name
Claudia Yvonne Finocchiaro

5. Manuscript Title
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1. Given Name (First Name) Gloria	2. Surname (Last Name) Borra	3. Date 16-December-2018
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Claudia Yvonne Finocchiaro
5. Manuscript Title Listening understanding and acting (lung): focus on communicational issue in thoracic oncology		
6. Manuscript Identifying Number (if you know it)		

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.

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Are there any relevant conflicts of interest? Yes No

Section 4. Intellectual Property -- Patents & Copyrights

Do you have any patents, whether planned, pending or issued, broadly relevant to the work? Yes No

ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 5. Relationships not covered above

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Section 6. Disclosure Statement

Based on the above disclosures, this form will automatically generate a disclosure statement, which will appear in the box below.

Dr. Borra 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) Lucio	2. Surname (Last Name) Buffoni	3. Date 16-December-2018
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Claudia Yvonne Finocchiaro
5. Manuscript Title Listening understanding and acting (lung): focus on communicational issue in thoracic oncology		
6. Manuscript Identifying Number (if you know it)		

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Are there any relevant conflicts of interest? Yes No

Section 3. Relevant financial activities outside the submitted work.

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Are there any relevant conflicts of interest? Yes No

Section 4. Intellectual Property -- Patents & Copyrights

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ICMJE Form for Disclosure of Potential Conflicts of Interest

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Dr. Buffoni 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) Alessandra	2. Surname (Last Name) Bulotta	3. Date 16-December-2018
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Claudia Yvonne Finocchiaro
5. Manuscript Title Listening understanding and acting (lung): focus on communicational issue in thoracic oncology		
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Section 2. The Work Under Consideration for Publication

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Are there any relevant conflicts of interest? Yes No

Section 4. Intellectual Property -- Patents & Copyrights

Do you have any patents, whether planned, pending or issued, broadly relevant to the work? Yes No

ICMJE Form for Disclosure of Potential Conflicts of Interest

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Dr. Bulotta has nothing to disclose.

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

ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name) Annamaria	2. Surname (Last Name) Carta	3. Date 16-December-2018
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Claudia Yvonne Finocchiaro
5. Manuscript Title Listening understanding and acting (lung): focus on communicational issue in thoracic oncology		
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Are there any relevant conflicts of interest? Yes No

Section 4. Intellectual Property -- Patents & Copyrights

Do you have any patents, whether planned, pending or issued, broadly relevant to the work? Yes No

ICMJE Form for Disclosure of Potential Conflicts of Interest

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Dr. Carta 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) Diego	2. Surname (Last Name) Cortinovis	3. Date 16-December-2018
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Claudia Yvonne Finocchiaro
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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)
Raffaele

2. Surname (Last Name)
Costanzo

3. Date
16-December-2018

4. Are you the corresponding author? Yes No

Corresponding Author's Name
Claudia Yvonne Finocchiaro

5. Manuscript Title
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Dr. Costanzo 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) Antonio	2. Surname (Last Name) Cusmai	3. Date 16-December-2018
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Claudia Yvonne Finocchiaro
5. Manuscript Title Listening understanding and acting (lung): focus on communicational issue in thoracic oncology		
6. Manuscript Identifying Number (if you know it)		

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 4. Intellectual Property -- Patents & Copyrights

Do you have any patents, whether planned, pending or issued, broadly relevant to the work? Yes No

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Dr. Cusmai 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)
Romano

2. Surname (Last Name)
Danesi

3. Date
16-December-2018

4. Are you the corresponding author? Yes No

Corresponding Author's Name
Claudia Yvonne Finocchiaro

5. Manuscript Title
Listening understanding and acting (lung): focus on communicational issue in thoracic oncology

6. Manuscript Identifying Number (if you know it)

Section 2. The Work Under Consideration for Publication

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Are there any relevant conflicts of interest? Yes No

Section 4. Intellectual Property -- Patents & Copyrights

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Dr. Danesi 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) Ettore	2. Surname (Last Name) D'Argento	3. Date 16-December-2018
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Claudia Yvonne Finocchiaro
5. Manuscript Title Listening understanding and acting (lung): focus on communicational issue in thoracic oncology		
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Section 4. Intellectual Property -- Patents & Copyrights

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Dr. D'Argento 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) Alessandro Del	2. Surname (Last Name) Conte	3. Date 16-December-2018
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Claudia Yvonne Finocchiaro
5. Manuscript Title Listening understanding and acting (lung): focus on communicational issue in thoracic oncology		
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Dr. Conte has nothing to disclose.

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ICMJE Form for Disclosure of Potential Conflicts of Interest

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1. Given Name (First Name) Tindara	2. Surname (Last Name) Franchina	3. Date 16-December-2018
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Claudia Yvonne Finocchiaro
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Dr. Franchina has nothing to disclose.

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1. Given Name (First Name) Marina	2. Surname (Last Name) Gilli	3. Date 16-December-2018
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Are there any relevant conflicts of interest? Yes No

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Are there any relevant conflicts of interest? Yes No

Section 4. Intellectual Property -- Patents & Copyrights

Do you have any patents, whether planned, pending or issued, broadly relevant to the work? Yes No

ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 5. Relationships not covered above

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Section 6. Disclosure Statement

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Dr. Gilli 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) Vanesa	2. Surname (Last Name) Gregorc	3. Date 16-December-2018
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Claudia Yvonne Finocchiaro
5. Manuscript Title Listening understanding and acting (lung): focus on communicational issue in thoracic oncology		
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Dr. Gregorc 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) Luciana	2. Surname (Last Name) Irtelli	3. Date 16-December-2018
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Claudia Yvonne Finocchiaro
5. Manuscript Title Listening understanding and acting (lung): focus on communicational issue in thoracic oncology		
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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name) Lorenza	2. Surname (Last Name) Landi	3. Date 16-December-2018
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Claudia Yvonne Finocchiaro
5. Manuscript Title Listening understanding and acting (lung): focus on communicational issue in thoracic oncology		
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Dr. Landi 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) Francesco	2. Surname (Last Name) Malorgio	3. Date 16-December-2018
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Claudia Yvonne Finocchiaro
5. Manuscript Title Listening understanding and acting (lung): focus on communicational issue in thoracic oncology		
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1. Given Name (First Name) Gianfranco	2. Surname (Last Name) Mancuso	3. Date 16-December-2018
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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name) Olga	2. Surname (Last Name) Martelli	3. Date 16-December-2018
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Claudia Yvonne Finocchiaro
5. Manuscript Title Listening understanding and acting (lung): focus on communicational issue in thoracic oncology		
6. Manuscript Identifying Number (if you know it)		

Section 2. The Work Under Consideration for Publication

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Are there any relevant conflicts of interest? Yes No

Section 3. Relevant financial activities outside the submitted work.

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Are there any relevant conflicts of interest? Yes No

Section 4. Intellectual Property -- Patents & Copyrights

Do you have any patents, whether planned, pending or issued, broadly relevant to the work? Yes No

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Dr. Martelli 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) Paola	2. Surname (Last Name) Mazzanti	3. Date 16-December-2018
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Claudia Yvonne Finocchiaro
5. Manuscript Title Listening understanding and acting (lung): focus on communicational issue in thoracic oncology		
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Are there any relevant conflicts of interest? Yes No

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Are there any relevant conflicts of interest? Yes No

Section 4. Intellectual Property -- Patents & Copyrights

Do you have any patents, whether planned, pending or issued, broadly relevant to the work? Yes No

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Dr. Mazzanti 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) Barbara	2. Surname (Last Name) Melotti	3. Date 16-December-2018
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Claudia Yvonne Finocchiaro
5. Manuscript Title Listening understanding and acting (lung): focus on communicational issue in thoracic oncology		
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Dr. Melotti 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) Maria Rita	2. Surname (Last Name) Migliorino	3. Date 16-December-2018
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Claudia Yvonne Finocchiaro
5. Manuscript Title Listening understanding and acting (lung): focus on communicational issue in thoracic oncology		
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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name) Vincenzo	2. Surname (Last Name) Minotti	3. Date 16-December-2018
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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)
Michele

2. Surname (Last Name)
Montrone

3. Date
16-December-2018

4. Are you the corresponding author? Yes No

Corresponding Author's Name
Claudia Yvonne Finocchiaro

5. Manuscript Title
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Section 4. Intellectual Property -- Patents & Copyrights

Do you have any patents, whether planned, pending or issued, broadly relevant to the work? Yes No

ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 5. Relationships not covered above

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Section 6. Disclosure Statement

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Dr. Montrone 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) Alessandro	2. Surname (Last Name) Morabito	3. Date 16-December-2018
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Claudia Yvonne Finocchiaro
5. Manuscript Title Listening understanding and acting (lung): focus on communicational issue in thoracic oncology		
6. Manuscript Identifying Number (if you know it)		

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.

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Are there any relevant conflicts of interest? Yes No

Section 4. Intellectual Property -- Patents & Copyrights

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Dr. Morabito 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) Elisa	2. Surname (Last Name) Roca	3. Date 16-December-2018
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Claudia Yvonne Finocchiaro
5. Manuscript Title Listening understanding and acting (lung): focus on communicational issue in thoracic oncology		
6. Manuscript Identifying Number (if you know it)		

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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Are there any relevant conflicts of interest? Yes No

Section 4. Intellectual Property -- Patents & Copyrights

Do you have any patents, whether planned, pending or issued, broadly relevant to the work? Yes No

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Dr. Roca 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)
Giampiero

2. Surname (Last Name)
Romano

3. Date
16-December-2018

4. Are you the corresponding author? Yes No

Corresponding Author's Name
Claudia Yvonne Finocchiaro

5. Manuscript Title
Listening understanding and acting (lung): focus on communicational issue in thoracic oncology

6. Manuscript Identifying Number (if you know it)

Section 2. The Work Under Consideration for Publication

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Are there any relevant conflicts of interest? Yes No

Section 4. Intellectual Property -- Patents & Copyrights

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Dr. Romano 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) Antonio	2. Surname (Last Name) Rossi	3. Date 16-December-2018
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Claudia Yvonne Finocchiaro
5. Manuscript Title Listening understanding and acting (lung): focus on communicational issue in thoracic oncology		
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Dr. Rossi 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) Giuseppa	2. Surname (Last Name) Savio	3. Date 16-December-2018
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Claudia Yvonne Finocchiaro
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Dr. Savio 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) Marcello	2. Surname (Last Name) Tiseo	3. Date 16-December-2018
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Claudia Yvonne Finocchiaro
5. Manuscript Title Listening understanding and acting (lung): focus on communicational issue in thoracic oncology		
6. Manuscript Identifying Number (if you know it)		

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. Tiseo 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)

Ivano

2. Surname (Last Name)

Boscardini

3. Date

16-December-2018

4. Are you the corresponding author?

Yes No

Corresponding Author's Name

Claudia Yvonne Finocchiaro

5. Manuscript Title

Listening understanding and acting (lung): focus on communicational issue in thoracic oncology

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name) Lorenzo	2. Surname (Last Name) Piccolo	3. Date 16-December-2018
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Claudia Yvonne Finocchiaro
5. Manuscript Title Listening understanding and acting (lung): focus on communicational issue in thoracic oncology		
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ICMJE Form for Disclosure of Potential Conflicts of Interest

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1. Given Name (First Name) Sara	2. Surname (Last Name) Pilotto	3. Date 16-December-2018
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Claudia Yvonne Finocchiaro
5. Manuscript Title Listening understanding and acting (lung): focus on communicational issue in thoracic oncology		
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ICMJE Form for Disclosure of Potential Conflicts of Interest

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Umberto

2. Surname (Last Name)
Malapelle

3. Date
16-December-2018

4. Are you the corresponding author? Yes No

Corresponding Author's Name
Claudia Yvonne Finocchiaro

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