

## 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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#### 4. Intellectual Property.

This section asks about patents and copyrights, whether pending, issued, licensed and/or receiving royalties.

#### 5. Relationships not covered above.

Use this section to report other relationships or activities that readers could perceive to have influenced, or that give the appearance of potentially influencing, what you wrote in the submitted work.

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## ICMJE Form for Disclosure of Potential Conflicts of Interest

### Section 1. Identifying Information

1. Given Name (First Name)

Sanziana

2. Surname (Last Name)

Schiopu

3. Date

06-October-2020

4. Are you the corresponding author?

Yes  No

5. Manuscript Title

Pembrolizumab-induced Myocarditis in a Patient with Malignant Mesothelioma: Plasma Exchange as a Successful Emerging Therapy – case report

6. Manuscript Identifying Number (if you know it)

TLCR-20-1095

### 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. Schiopu has nothing to disclose.

### Evaluation and Feedback

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### Section 1. Identifying Information

1. Given Name (First Name) Lukas	2. Surname (Last Name) Käsmann	3. Date 06-October-2020
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Sanziana Schiopu
5. Manuscript Title Pembrolizumab-induced Myocarditis in a Patient with Malignant Mesothelioma: Plasma Exchange as a Successful Emerging Therapy – case report		
6. Manuscript Identifying Number (if you know it) TLCR-20-1095		

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Are there any relevant conflicts of interest?  Yes  No

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Dr. Käsmann has nothing to disclose.

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### Section 1. Identifying Information

1. Given Name (First Name) Ulf	2. Surname (Last Name) Schönermarck	3. Date 06-October-2020
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Sanziana Schiopu
5. Manuscript Title Pembrolizumab-induced Myocarditis in a Patient with Malignant Mesothelioma: Plasma Exchange as a Successful Emerging Therapy – case report		
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If yes, please fill out the appropriate information below.

Name of Entity	Grant?	Personal Fees?	Non-Financial Support?	Other?	Comments
Alexion	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
Chemocentryx	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

### Section 4. Intellectual Property -- Patents & Copyrights

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Dr. Schönermarck reports grants, personal fees and non-financial support from Alexion, grants and personal fees from Chemocentryx, outside the submitted work; .

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### Section 1. Identifying Information

1. Given Name (First Name) Michael	2. Surname (Last Name) Fischereder	3. Date 06-October-2020
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Sanziana Schiopu
5. Manuscript Title Pembrolizumab-induced Myocarditis in a Patient with Malignant Mesothelioma: Plasma Exchange as a Successful Emerging Therapy – case report		
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Dr. Fischereder has nothing to disclose.

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1. Given Name (First Name) Ulrich	2. Surname (Last Name) Grabmaier	3. Date 06-October-2020
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Sanziana Schiopu
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Dr. Grabmaier has nothing to disclose.

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#### 4. Intellectual Property.

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Farkhad

2. Surname (Last Name)

Manapov

3. Date

4. Are you the corresponding author?

Yes  No

Corresponding Author's Name

Sanziana Schiopu

5. Manuscript Title

Pembrolizumab-induced Myocarditis in a Patient with Malignant Mesothelioma: Plasma Exchange as a Successful Emerging Therapy

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

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I have no disclosures and conflicts of interests

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#### 1. Identifying information.

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

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### Section 1. Identifying Information

1. Given Name (First Name) Josefine	2. Surname (Last Name) Rauch	3. Date 06-October-2020
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Sanziana Schiopu
5. Manuscript Title Pembrolizumab-induced Myocarditis in a Patient with Malignant Mesothelioma: Plasma Exchange as a Successful Emerging Therapy – case report		
6. Manuscript Identifying Number (if you know it) TLCR-20-1095		

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Dr. Rauch has nothing to disclose.

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4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Sanziana Schiopu
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If yes, please fill out the appropriate information below.

Name of Entity	Grant?	Personal Fees?	Non-Financial Support?	Other?	Comments
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

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Dr. Orban received speaker honoraria and travel compensations from Abbott Medical, AstraZeneca, Abiomed, Bayer vital, BIOTRONIK, Bristol-Myers Squibb, CytoSorbents, Daiichi Sankyo Deutschland, Edwards Lifesciences Services, Sedana Medical, outside the submitted work.

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