

ICMJE Form for Disclosure of Potential Conflicts of Interest

Instructions

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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)
Gonfiotti

3. Date
01-March-2019

4. Are you the corresponding author? Yes No

5. Manuscript Title
Pros-cons debate about the role and evolution of triportal video-assisted thoracic surgery (VATS)

6. Manuscript Identifying Number (if you know it)
SHC-2018-SAVL-04

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Dr. Gonfiotti 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) Andrea	2. Surname (Last Name) Droghetti	3. Date 01-March-2019
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Alessandro Gonfiotti
5. Manuscript Title Pros-cons debate about the role and evolution of triportal video-assisted thoracic surgery (VATS)		
6. Manuscript Identifying Number (if you know it) SHC-2018-SAVL-04		

Section 2. The Work Under Consideration for Publication

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Dr. Droghetti has nothing to disclose.

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Section 1. Identifying Information

1. Given Name (First Name)

Luca

2. Surname (Last Name)

Voltolini

3. Date

01-March-2019

4. Are you the corresponding author?

Yes

No

Corresponding Author's Name

Alessandro Gonfiotti

5. Manuscript Title

Pros-cons debate about the role and evolution of triportal video-assisted thoracic surgery (VATS)

6. Manuscript Identifying Number (if you know it)

SHC-2018-SAVL-04

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1. Given Name (First Name)
Giovanni

2. Surname (Last Name)
Muriana

3. Date
01-March-2019

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Corresponding Author's Name
Alessandro Gonfiotti

5. Manuscript Title
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Domenico

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Viggiano

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01-March-2019

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