

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)

Monica

2. Surname (Last Name)

Casiraghi

3. Date

25-March-2020

4. Are you the corresponding author?

☐ Yes ☒ No

Corresponding Author's Name

Giorgio Lo Iacono

5. Manuscript Title

One's learning is never complete: chronic high-pressure life-treating pleural effusion in post-pneumonectomy patients. A case report.

6. Manuscript Identifying Number (if you know it)

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Are there any relevant conflicts of interest? ☐ Yes ☒ No

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Dr. Casiraghi 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)
Giorgio

2. Surname (Last Name)
Lo Iacono

3. Date
25-March-2020

4. Are you the corresponding author? ☒ Yes ☐ No

5. Manuscript Title
One's learning is never complete: chronic high-pressure life-treating pleural effusion in post-pneumonectomy patients. A case report.

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. Lo Iacono has nothing to disclose.

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1. Given Name (First Name)
Francesco

2. Surname (Last Name)
Petrella

3. Date
25-March-2020

4. Are you the corresponding author?

☐ Yes

☒ No

Corresponding Author's Name
Giorgio Lo Iacono

5. Manuscript Title

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1. Given Name (First Name)

Lorenzo

2. Surname (Last Name)

Spaggiari

3. Date

25-March-2020

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☐ Yes

☒ No

Corresponding Author's Name

Giorgio Lo Iacono

5. Manuscript Title

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