

ICMJE DISCLOSURE FORM

Date: 24-May-2022

Your Name: Norberto Santana-Rodríguez

Manuscript Title: SURGICAL MANAGEMENT OF PARAPNEUMONIC EMPYEMA

Manuscript number (if known): SHC-22-11(SHC-2021-MPD-02)

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.

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3	Royalties or licenses	None	
4	Consulting fees	None	

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10	Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid	___ None	
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13	Other financial or non-financial interests	___ None	

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No Conflict of Interest

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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: 24-May-2022

Your Name: Hamsa Aldebakey

Manuscript Title: SURGICAL MANAGEMENT OF PARAPNEUMONIC EMPYEMA

Manuscript number (if known): SHC-22-11(SHC-2021-MPD-02)

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ICMJE DISCLOSURE FORM

Date: 25-May-2022

Your Name: Ibrahim Albalkhi

Manuscript Title: SURGICAL MANAGEMENT OF PARAPNEUMONIC EMPYEMA

Manuscript number (if known): SHC-22-11(SHC-2021-MPD-02)

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ICMJE DISCLOSURE FORM

Date: 24-May-2022

Your Name: Mohamed Hussein

Manuscript Title: SURGICAL MANAGEMENT OF PARAPNEUMONIC EMPYEMA

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ICMJE DISCLOSURE FORM

Date: 24-May-2022

Your Name: Abdullah Alshammari

Manuscript Title: SURGICAL MANAGEMENT OF PARAPNEUMONIC EMPYEMA

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ICMJE DISCLOSURE FORM

Date: 23-May-2022

Your Name: Ahmed Ahmed

Manuscript Title: SURGICAL MANAGEMENT OF PARAPNEUMONIC EMPYEMA

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Date: 23-May-2022

Your Name: Nasser Alshariff

Manuscript Title: SURGICAL MANAGEMENT OF PARAPNEUMONIC EMPYEMA

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Date: 23-May-2022

Your Name: Hazem Albeyali

Manuscript Title: SURGICAL MANAGEMENT OF PARAPNEUMONIC EMPYEMA

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ICMJE DISCLOSURE FORM

Date: 23-May-2022

Your Name: Mahmoud Hashim

Manuscript Title: SURGICAL MANAGEMENT OF PARAPNEUMONIC EMPYEMA

Manuscript number (if known): SHC-22-11(SHC-2021-MPD-02)

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ICMJJE DISCLOSURE FORM

Date: May 20, 2022

Your Name: Bernardino Clavo

Manuscript Title: Surgical Management of Parapneumonic Empyema

Manuscript number (if known): SHC-22-11(SHC-2021-MPD-02)

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Bernardino Clavo

ICMJE DISCLOSURE FORM

Date: 18/5/2022

Your Name: Marcello Migliore

Manuscript Title: Surgical Management of Parapneumonic Empyema

Manuscript number (if known): _____

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Herelle D'Almeida