

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)
Teodor

2. Surname (Last Name)
Horvath

3. Date
09-August-2019

4. Are you the corresponding author? Yes No

5. Manuscript Title
Borderline pneumothorax

6. Manuscript Identifying Number (if you know it)
VATS-2019-PSP-005

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.)?

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Dr. Horvath has nothing to disclose.

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Section 1. Identifying Information

1. Given Name (First Name) Petr	2. Surname (Last Name) Moravcik	3. Date 09-August-2019
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Teodor Horvath
5. Manuscript Title Borderline pneumothorax		
6. Manuscript Identifying Number (if you know it) VATS-2019-PSP-005		

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Dr. Moravcik has nothing to disclose.

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Section 1. Identifying Information

1. Given Name (First Name) Ladislav	2. Surname (Last Name) Mitas	3. Date 09-August-2019
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Teodor Horvath
5. Manuscript Title Borderline pneumothorax		
6. Manuscript Identifying Number (if you know it) VATS-2019-PSP-005		

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Dr. Mitas has nothing to disclose.

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Section 1. Identifying Information

1. Given Name (First Name) Kristian	2. Surname (Last Name) Brat	3. Date 09-August-2019
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Teodor Horvath
5. Manuscript Title Borderline pneumothorax		
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Section 1. Identifying Information

1. Given Name (First Name) Kamil	2. Surname (Last Name) Hudacek	3. Date 09-August-2019
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Teodor Horvath
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Vladimir

2. Surname (Last Name)
Can

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09-August-2019

4. Are you the corresponding author? Yes No

Corresponding Author's Name
Teodor Horvath

5. Manuscript Title
Borderline pneumothorax

6. Manuscript Identifying Number (if you know it)
VATS-2019-PSP-005

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. Can 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) Martina	2. Surname (Last Name) Dia	3. Date 09-August-2019
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Teodor Horvath
5. Manuscript Title Borderline pneumothorax		
6. Manuscript Identifying Number (if you know it) VATS-2019-PSP-005		

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Are there any relevant conflicts of interest? Yes No

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Section 4. Intellectual Property -- Patents & Copyrights

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Dr. Dia 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) Dominika	2. Surname (Last Name) Ivanecka	3. Date 09-August-2019
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Teodor Horvath
5. Manuscript Title Borderline pneumothorax		
6. Manuscript Identifying Number (if you know it) VATS-2019-PSP-005		

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)

Jaroslav

2. Surname (Last Name)

Ivicic

3. Date

09-August-2019

4. Are you the corresponding author?

Yes

No

Corresponding Author's Name

Teodor Horvath

5. Manuscript Title

Borderline pneumothorax

6. Manuscript Identifying Number (if you know it)

VATS-2019-PSP-005

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Section 1. Identifying Information

1. Given Name (First Name) Vaclav	2. Surname (Last Name) Kalis	3. Date 09-August-2019
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Teodor Horvath
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Alzbeta

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Kodytkova

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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) Jitka	2. Surname (Last Name) Kratochvilova	3. Date 09-August-2019
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Teodor Horvath
5. Manuscript Title Borderline pneumothorax		
6. Manuscript Identifying Number (if you know it) VATS-2019-PSP-005		

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. Kratochvilova 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) Adam	2. Surname (Last Name) Krenek	3. Date 09-August-2019
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Teodor Horvath
5. Manuscript Title Borderline pneumothorax		
6. Manuscript Identifying Number (if you know it) VATS-2019-PSP-005		

Section 2. The Work Under Consideration for Publication

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Section 4. Intellectual Property -- Patents & Copyrights

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Dr. Krenek 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)
Lukas

2. Surname (Last Name)
Majercak

3. Date
09-August-2019

4. Are you the corresponding author?

Yes No

Corresponding Author's Name
Teodor Horvath

5. Manuscript Title
Borderline pneumothorax

6. Manuscript Identifying Number (if you know it)
VATS-2019-PSP-005

Section 2. The Work Under Consideration for Publication

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Dr. Majercak 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)
Zdenek

2. Surname (Last Name)
Merta

3. Date
09-August-2019

4. Are you the corresponding author?

Yes No

Corresponding Author's Name
Teodor Horvath

5. Manuscript Title
Borderline pneumothorax

6. Manuscript Identifying Number (if you know it)
VATS-2019-PSP-005

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Dr. Merta 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) Petra	2. Surname (Last Name) Penazová	3. Date 09-August-2019
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Teodor Horvath
5. Manuscript Title Borderline pneumothorax		
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Dr. Penazová 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) Pavla Petr	2. Surname (Last Name) Dostalova	3. Date 09-August-2019
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Teodor Horvath
5. Manuscript Title Borderline pneumothorax		
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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

Are there 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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Section 6. Disclosure Statement

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Dr. Dostalova 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) Marek	2. Surname (Last Name) Plutinsky	3. Date 09-August-2019
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Teodor Horvath
5. Manuscript Title Borderline pneumothorax		
6. Manuscript Identifying Number (if you know it) VATS-2019-PSP-005		

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. Plutinsky 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) Rudolf	2. Surname (Last Name) Rindos	3. Date 09-August-2019
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Teodor Horvath
5. Manuscript Title Borderline pneumothorax		
6. Manuscript Identifying Number (if you know it) VATS-2019-PSP-005		

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. Rindos 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) Michal	2. Surname (Last Name) Sochor	3. Date 09-August-2019
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Teodor Horvath
5. Manuscript Title Borderline pneumothorax		
6. Manuscript Identifying Number (if you know it) VATS-2019-PSP-005		

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. Sochor 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) Pavel	2. Surname (Last Name) Vyslouzil	3. Date 09-August-2019
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Teodor Horvath
5. Manuscript Title Borderline pneumothorax		
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Dr. Vyslouzil 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)

Zdenek

2. Surname (Last Name)

Kala

3. Date

09-August-2019

4. Are you the corresponding author?

Yes No

Corresponding Author's Name

Teodor Horvath

5. Manuscript Title

Borderline pneumothorax

6. Manuscript Identifying Number (if you know it)

VATS-2019-PSP-005

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Dr. Kala has nothing to disclose.

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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.

Definitions.

Entity: government agency, foundation, commercial sponsor, academic institution, etc.

Grant: A grant from an entity, generally [but not always] paid to your organization

Personal Fees: Monies paid to you for services rendered, generally honoraria, royalties, or fees for consulting, lectures, speakers bureaus, expert testimony, employment, or other affiliations

Non-Financial Support: Examples include drugs/equipment supplied by the entity, travel paid by the entity, writing assistance, administrative support, etc.

Other: Anything not covered under the previous three boxes

Pending: The patent has been filed but not issued

Issued: The patent has been issued by the agency

Licensed: The patent has been licensed to an entity, whether earning royalties or not

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) Jindrich	2. Surname (Last Name) Vomela	3. Date 09-August-2019
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Teodor Horvath
5. Manuscript Title Borderline pneumothorax		
6. Manuscript Identifying Number (if you know it) VATS-2019-PSP-005		

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.

Place a check in the appropriate boxes in the table to indicate whether you have financial relationships (regardless of amount of compensation) with entities as described in the instructions. Use one line for each entity; add as many lines as you need by clicking the "Add +" box. You should report relationships that were **present during the 36 months prior to publication**.

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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Are there 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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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. Vomela has nothing to disclose.

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