

## ICMJE DISCLOSURE FORM

Date: 14/04/2023

Your Name: Simone Furia

Manuscript Title: Second pleurectomy/decortication for a contralateral relapse of epithelial mesothelioma revealed by pneumothorax. A case report.

Manuscript number (if known): AMJ-23-63

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.

The following questions apply to the author's relationships/activities/interests as they relate to the current manuscript only.

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In item #1 below, report all support for the work reported in this manuscript without time limit. For all other items, the time frame for disclosure is the past 36 months.

		Name all entities with whom you have this relationship or indicate none (add rows as needed)	Specifications/Comments (e.g., if payments were made to you or to your institution)
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1	All support for the present manuscript (e.g., funding, provision of study materials, medical writing, article processing charges, etc.) <b>No time limit for this item.</b>	<u>None</u>	
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3	Royalties or licenses	<u>None</u>	
4	Consulting fees	<u>None</u>	

5	Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or educational events	___ None	
6	Payment for expert testimony	___ None	
7	Support for attending meetings and/or travel	___ None	
8	Patents planned, issued or pending	___ None	
9	Participation on a Data Safety Monitoring Board or Advisory Board	Astra Zeneca	In 2022 this author received a grant for his participation to an Advisory Board realized on behalf of Astra Zeneca: "advisory board chirurgi toracici triveneto"
10	Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid	___ None	
11	Stock or stock options	___ None	
12	Receipt of equipment, materials, drugs, medical writing, gifts or other services	___ None	
13	Other financial or non-financial interests	___ None	

**Please summarize the above conflict of interest in the following box:** In 2022 this author received a grant from Astra Zeneca for his participation to an Advisory Board realized on behalf of Astra Zeneca: "advisory board chirurgi toracici triveneto"

**Please place an "X" next to the following statement to indicate your agreement:**

**I certify that I have answered every question and have not altered the wording of any of the questions on this form.**

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Date: 14/04/2023

Your Name: Roberta Cavallin

Manuscript Title: Second pleurectomy/decortication for a contralateral relapse of epithelial mesothelioma revealed by pneumothorax. A case report.

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Date: 14/04/2023

Your Name: Andrea Ferronato

Manuscript Title: Second pleurectomy/decortication for a contralateral relapse of epithelial mesothelioma revealed by pneumothorax. A case report.

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Date: 14/04/2023

Your Name: Fabio Lo Giudice

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