

## ICMJE DISCLOSURE FORM

Date: 27.11.2022

Your Name: Alexander Gamrekeli

Manuscript Title: Surgical therapy for major lung parenchymal damage from late COVID complication: case report and literature review

Manuscript number (if known): \_\_\_\_\_

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	_X_ None	
4	Consulting fees	_X_ None	
5	Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or educational events	_X_ None	

6	Payment for expert testimony	<input checked="" type="checkbox"/> None	
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11	Stock or stock options	<input checked="" type="checkbox"/> None	
12	Receipt of equipment, materials, drugs, medical writing, gifts or other services	<input checked="" type="checkbox"/> None	
13	Other financial or non-financial interests	<input checked="" type="checkbox"/> None	

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The Author has no conflicts of interest.

**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.

## ICMJE DISCLOSURE FORM

Date: 27.11.2022

Your Name: Fernando Ramirez-Fragoso

Manuscript Title: Surgical therapy for major lung parenchymal damage from late COVID complication: case report and literature review

Manuscript number (if known): \_\_\_\_\_

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## ICMJE DISCLOSURE FORM

Date: 27.11.2022

Your Name: Omid Ghamarnejad

Manuscript Title: Surgical therapy for major lung parenchymal damage from late COVID complication: case report and literature review

Manuscript number (if known): \_\_\_\_\_

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## ICMJE DISCLOSURE FORM

Date: 27.11.2022

Your Name: Dimitrios Kardassis

Manuscript Title: Surgical therapy for major lung parenchymal damage from late COVID complication: case report and literature review

Manuscript number (if known): \_\_\_\_\_

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## ICMJE DISCLOSURE FORM

Date: 27.11.2022

Your Name: Felix Stöckle

Manuscript Title: Surgical therapy for major lung parenchymal damage from late COVID complication: case report and literature review

Manuscript number (if known): \_\_\_\_\_

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Date: 27.11.2022

Your Name: Florian Custodis

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Date: 27.11.2022

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