

Instructions

The purpose of this form is to provide readers of your manuscript with information about your other interests that could influence how they receive and understand your work. The form is designed to be completed electronically and stored electronically. It contains programming that allows appropriate data display. Each author should submit a separate form and is responsible for the accuracy and completeness of the submitted information. The form is in six parts.

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Section 1.	Identifying Inform	ation				
1. Given Name (First Name) Rommel		2. Surname (Last Name) Carrasco	3. Date 27-April-2020			
4. Are you the corresponding author?		Yes 🖌 No	Corresponding Author's Name Montserrat Blanco			
5. Manuscript Title CLASSIC BIPHASIC PULMONARY BLASTOMA: IMPORTANCE OF EARLY TREATMENT. A CASE REPOR			RLY TREATMENT. A CASE REPORT			
6. Manuscript Identifying Number (if you know it) CCTS-20-77						
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Do you have any patents, whether planned, pending or issued, broadly relevant to the work? 🗌 Yes 🖌 No						

Carrasco



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Dr. Carrasco has nothing to disclose.

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1. Given Name (First Name) Montserrat	2. Surname (Last Name) Blanco	3. Date 27-April-2020				
4. Are you the corresponding author?	✓ Yes No					
5. Manuscript Title CLASSIC BIPHASIC PULMONARY BLAST	5. Manuscript Title CLASSIC BIPHASIC PULMONARY BLASTOMA: IMPORTANCE OF EARLY TREATMENT. A CASE REPORT					
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Dr. Blanco has nothing to disclose.

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1. Given Name (First Name) Daniel		2. Surname (Last Name) Otero		3. Date 27-April-2020	
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