ICMJE Form for Disclosure of Potential Conflicts of Interest

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)  
Alessandro

2. Surname (Last Name)  
Gonfiotti

3. Date  
13-July-1970

4. Are you the corresponding author?  
☐ Yes  ✔ No

Corresponding Author’s Name  
Lavinia Gatteschi

5. Manuscript Title  
Non-Small-Cell Lung Cancer involving the pleura: a narrative review on the diagnostic and therapeutic pathway

6. Manuscript Identifying Number (if you know it)  
CCTS-2020-TLC-09(CCTS-20-108)

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**Section 6. Disclosure Statement**

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Dr. Gonfiotti has nothing to disclose.

**Evaluation and Feedback**

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Section 1. Identifying Information

1. Given Name (First Name) Lavinia
2. Surname (Last Name) Gatteschi
3. Date 07-November-1991
4. Are you the corresponding author? Yes
5. Manuscript Title Non-Small-Cell Lung Cancer involving the pleura: a narrative review on the diagnostic and therapeutic pathway
6. Manuscript Identifying Number (if you know it) CCTS-2020-TLC-09(CCTS-20-108)

Section 2. The Work Under Consideration for Publication

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Section 1. Identifying Information

1. Given Name (First Name)  
   Alberto

2. Surname (Last Name)  
   Salvicchi

3. Date  
   19-October-1985

4. Are you the corresponding author?  
   □ Yes  ✔ No

Corresponding Author’s Name  
Lavinia Gatteschi

5. Manuscript Title  
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<table>
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<th>1. Given Name (First Name)</th>
<th>2. Surname (Last Name)</th>
<th>3. Date</th>
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<tbody>
<tr>
<td>Luca</td>
<td>Voltolini</td>
<td>14-April-1963</td>
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</table>

4. Are you the corresponding author? [ ] Yes [ ] No

Corresponding Author's Name: Lavinia Gatteschi

5. Manuscript Title

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Dr. Voltolini has nothing to disclose.

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