ICMJE Form for Disclosure of Potential Conflicts of Interest

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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This section asks about patents and copyrights, whether pending, issued, licensed and/or receiving royalties.

5. Relationships not covered above.

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Other: Anything not covered under the previous three boxes

Pending: The patent has been filed but not issued

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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

<table>
<thead>
<tr>
<th>1. Given Name (First Name)</th>
<th>Evangelos</th>
</tr>
</thead>
<tbody>
<tr>
<td>2. Surname (Last Name)</td>
<td>Koliakos</td>
</tr>
<tr>
<td>3. Date</td>
<td>06-October-2020</td>
</tr>
</tbody>
</table>

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

5. Manuscript Title  
   Metachronous lung cancer resection on ECMO in a pneumonectomized and mediastinum irradiated patient

6. Manuscript Identifying Number (if you know it)  
   VATS-2020-LM-03

## 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  
   ✔ 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  
   ✔ No

## Section 4. Intellectual Property -- Patents & Copyrights

Do you have any patents, whether planned, pending or issued, broadly relevant to the work?  
   - Yes  
   - No  
   ✔ No
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Section 5. Relationships not covered above

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Section 6. Disclosure Statement

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Dr. Koliakos has nothing to disclose.

Evaluation and Feedback

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Chiriatti
ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name) Enrica
2. Surname (Last Name) Chiriatti
3. Date 06-October-2020
4. Are you the corresponding author? Yes ☐ No ☑
   Corresponding Author's Name Dr Jean Y Perentes
5. Manuscript Title
   Metachronous lung cancer resection on ECMO in a pneumonectomized and mediastinum irradiated patient
6. Manuscript Identifying Number (if you know it)
   VATS-2020-LM-03

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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 ☑

Chiriatti
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Dr. Chiriatti has nothing to disclose.

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Section 1. Identifying Information

1. Given Name (First Name)  André
2. Surname (Last Name)  Durham
3. Date  06-October-2020
4. Are you the corresponding author?  Yes  No
Corresponding Author’s Name  Dr Jean Y Perentes
5. Manuscript Title  Metachronous lung cancer resection on ECMO in a pneumonectomized and mediastinum irradiated patient
6. Manuscript Identifying Number (if you know it)  VATS-2020-LM-03

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Are there any relevant conflicts of interest?  Yes  No

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Dr. Durham 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)
   - Michel

2. Surname (Last Name)
   - Gonzalez

3. Date
   - 06-October-2020

4. Are you the corresponding author?
   - No

5. Manuscript Title
   - Metachronous lung cancer resection on ECMO in a pneumonectomized and mediastinum irradiated patient

6. Manuscript Identifying Number (if you know it)
   - VATS-2020-LM-03

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- No
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Dr. Gonzalez has nothing to disclose.

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Krueger
ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name) Thorsten
2. Surname (Last Name) Krueger
3. Date 06-October-2020
4. Are you the corresponding author? Yes ☐ No ☑
   Corresponding Author's Name Dr. Jean Y Perentes
5. Manuscript Title Metachronous lung cancer resection on ECMO in a pneumonectomized and mediastinum irradiated patient
6. Manuscript Identifying Number (if you know it) VATS-2020-LM-03

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Do you have any patents, whether planned, pending or issued, broadly relevant to the work? Yes ☐ No ☑
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Dr. Krueger 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)  
Jean-Claude

2. Surname (Last Name)  
Grange

3. Date  
06-October-2020

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

Corresponding Author’s Name  
Dr Jean Y Perentes

5. Manuscript Title  
Metachronous lung cancer resection on ECMO in a pneumonectomized and mediastinum irradiated patient

6. Manuscript Identifying Number (if you know it)  
VATS-2020-LM-03

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Do you have any patents, whether planned, pending or issued, broadly relevant to the work?  
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Dr. Grange has nothing to disclose.

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# ICMJE Form for Disclosure of Potential Conflicts of Interest

## Section 1. Identifying Information

<table>
<thead>
<tr>
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<td>3. Date</td>
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<tr>
<td>4. Are you the corresponding author?</td>
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<tr>
<td>5. Manuscript Title</td>
<td>Metachronous lung cancer resection on ECMO in a pneumonectomized and mediastinum irradiated patient</td>
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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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ICMJE Form for Disclosure of Potential Conflicts of Interest

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Dr. Delay has nothing to disclose.

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Section 1. Identifying Information

1. Given Name (First Name) Gregoire
2. Surname (Last Name) Gex
3. Date 06-October-2020
4. Are you the corresponding author? Yes ☐ No ☑
   Corresponding Author’s Name Dr Jean Y Perentes
5. Manuscript Title Metachronous lung cancer resection on ECMO in a pneumonectomized and mediastinum irradiated patient
6. Manuscript Identifying Number (if you know it) VATS-2020-LM-03

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Do you have any patents, whether planned, pending or issued, broadly relevant to the work? Yes ☐ No ☑
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Dr. Gex 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)
   Michel

2. Surname (Last Name)
   Christodoulou

3. Date
   06-October-2020

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

   Corresponding Author’s Name
   Dr Jean Y Perentes

5. Manuscript Title
   Metachronous lung cancer resection on ECMO in a pneumonectomized and mediastinum irradiated patient

6. Manuscript Identifying Number (if you know it)
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Dr. Christodoulou has nothing to disclose.

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1. Given Name (First Name)  
   Jean Yannis

2. Surname (Last Name)  
   Perentes

3. Date  
   06-October-2020

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

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