

ICMJE Form for Disclosure of Potential Conflicts of Interest

Instructions

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4. Intellectual Property.

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

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name) David	2. Surname (Last Name) Kwa	3. Date 14-July-2020
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name NP Juffermans
5. Manuscript Title Detection of Invasive Pulmonary Aspergillosis in COVID-19 with non-directed bronchoalveolar lavage		
6. Manuscript Identifying Number (if you know it) 202005-2018LE.R2		

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

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Section 6. Disclosure Statement

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Dr. Kwa has nothing to disclose.

Evaluation and Feedback

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Section 1. Identifying Information

1. Given Name (First Name)
Robert

2. Surname (Last Name)
Bosman

3. Date
14-July-2020

4. Are you the corresponding author? Yes No

Corresponding Author's Name
NF Juffermans

5. Manuscript Title
Detection of Invasive Pulmonary Aspergillosis in COVID-19 with non-directed bronchoalveolar lavage

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

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1. Given Name (First Name)
Stefaan

2. Surname (Last Name)
Van Biesen

3. Date
14-July-2020

4. Are you the corresponding author? Yes No Corresponding Author's Name

5. Manuscript Title
Detection of Invasive Pulmonary Aspergillosis in COVID-19 with non-directed bronchoalveolar lavage

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Nicole

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Juffermans

3. Date
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