

Instructions

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Section 1. Identifying Inform	mation		
1. Given Name (First Name) Roberta	2. Surname (Last Name) De Santis Santiago		3. Date 25-May-2020
4. Are you the corresponding author?	Yes 🖌 No	Corresponding Author's Na Lorenzo Berra	me
5. Manuscript Title High Pleural Pressure Prevents Alveola	ar Overdistension and Hen	nodynamic Collapse in ARDS	with Obesity
6. Manuscript Identifying Number (if you l Blue-201909-1687OC.R2	know it)		
Section 2. The Work Under O	Consideration for Publ	ication	
Did you or your institution at any time rec any aspect of the submitted work (includir statistical analysis, etc.)?			
Are there any relevant conflicts of inte	rest? Yes 🖌 No		
Section 3. Relevant financia	l activities outside the	submitted work.	
Place a check in the appropriate boxes of compensation) with entities as desc clicking the "Add +" box. You should re	ribed in the instructions. U	Jse one line for each entity; a	add as many lines as you need by

Section 4.	
	Intellectual Property Patents & Copyrights
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✓ No

Yes



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Dr. De Santis Santiago has nothing to disclose.

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1. Given Name (Fi Maddalena	rst Name)	2. Surname (Last Name Teggia Droghi	s)	3. Date 29-May-2020		
4. Are you the corresponding author?		Yes 🖌 No	Corresponding Author's Na Lorenzo Berra	ame		
5. Manuscript Title High Pleural Pres		r Overdistension and He	emodynamic Collapse in ARD	S with Obesity		
6. Manuscript Ide Blue-201909-168	ntifying Number (if you k 37OC.R2	now it)				
Section 2.	The Work Under C	onsideration for Pul	olication			
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Are there any relevant conflicts of interest?		Yes	\checkmark	No
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Do you have any patents, whether planned, pending or issued, broadly relevant to the work?		Yes	\checkmark	No
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Dr. Teggia Droghi has nothing to disclose.

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4. Are you the co	4. Are you the corresponding author? Yes ✓ No Corresponding Author's Name Lorenzo Berra		me			
5. Manuscript Titl High Pleural Pre		Overdistension and Her	nodynamic Collapse in ARDS	with Obesity		
6. Manuscript Ide Blue-201909-16	ntifying Number (if you kn 87OC.R2	now it)				
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1. Given Name (First Name) Francesco	2. Surname (Last Name) Marrazzo	3. Date 04-October-1988
4. Are you the corresponding a		responding Author's Name renzo Berra
5. Manuscript Title High Pleural Pressure Prever	ats Alveolar Overdistension and Hemodyn	amic Collapse in ARDS with Obesity
6. Manuscript Identifying Numl Blue-201909-1687OC.R2	per (if you know it)	
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1. Given Name (First Name) Gaetano	2. Surname (Last Name) Florio	3. Date 26-May-2020	
4. Are you the corresponding author?	4. Are you the corresponding author? Yes Ves Corresponding Author's Name Lorenzo Berra		
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No

Are there any relevant conflicts of interest?		Yes	\checkmark	
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Do you have any patents, whether planned, pending or issued, broadly relevant to the work?		Yes	\checkmark	No
	1 1			



Section 5. Relationships not covered above

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Dr. Grassi has nothing to disclose.

Evaluation and Feedback



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Section 1. Identifying Inform	nation				
1. Given Name (First Name) Susimeire	2. Surname (Last Name) Gomes	3. Date 27-May-	2020		
4. Are you the corresponding author? Yes Vo Corresponding Author's Name Lorenzo Berra					
5. Manuscript Title High Pleural Pressure Prevents Alveola	r Overdistension and Hen	odynamic Collapse in ARDS with Obe	esity		
6. Manuscript Identifying Number (if you k Blue-201909-1687OC.R2	now it)				
Section 2. The Work Under C	onsideration for Publ	cation			
Did you or your institution at any time rece any aspect of the submitted work (includin statistical analysis, etc.)? Are there any relevant conflicts of inter	g but not limited to grants, c		-		

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Are there any relevant conflicts of interest?	Y	'es	\checkmark	No
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by you have any patents, whether planned, pending of issued, broadly relevant to the work: res	Do you have any patents, whether planned, pending or issued, broadly relevant to the work? $\; [$	Yes	🖌 No
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Section 1.	Identifying Infor	mation	
1. Given Name (Fi Caio Cesar	rst Name)	2. Surname (Last Name) Araujo Morais	3. Date 03-June-2020
4. Are you the cor	responding author?	Yes 🖌 No	Corresponding Author's Name Lorenzo Berra
5. Manuscript Title High Pleural Pres		ar Overdistension and Her	nodynamic Collapse in ARDS with Obesity
6. Manuscript Ider Blue-201909-168	ntifying Number (if you 87OC.R2	know it)	
Section 2.	The Work Under	Consideration for Publ	ication
	submitted work (includi		m a third party (government, commercial, private foundation, etc.) for data monitoring board, study design, manuscript preparation,

Are there any relevant conflicts of interest?	🖌 Yes	No
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If yes, please fill out the appropriate information below. If you have more than one entity press the "ADD" button to add a row.
Excess rows can be removed by pressing the "X" button.

Name of Institution/Company	Grant?	Personal Fees	Non-Financial Support <mark>?</mark>	Other?	Comments	
Timpel S.A.	\checkmark					

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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? ✓ No Yes



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Dr. Araujo Morais reports grants from Timpel S.A., during the conduct of the study; .

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Continu 1		
Section 1. Identifying Inform	nation	
1. Given Name (First Name) Ozires	2. Surname (Last Name) Ramos	3. Date 27-May-2020
4. Are you the corresponding author?	Yes 🖌 No	Corresponding Author's Name Lorenzo Berra
5. Manuscript Title High Pleural Pressure Prevents Alveola	r Overdistension and Her	nodynamic Collapse in ARDS with Obesity
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Section 2. The Work Under O	Consideration for Publ	lication
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Are there any relevant conflicts of interest?		Yes	\checkmark	No
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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. Ramos has nothing to disclose.

Evaluation and Feedback



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Section 1. Ident	ifying Information	
1. Given Name (First Name) Maurizio) 2. Surname (Last Name) Bottiroli	3. Date 26-May-2020
4. Are you the correspondi	ng author? Yes 🖌 No	Corresponding Author's Name Lorenzo Berra, MD
5. Manuscript Title High Pleural Pressure Pre	events Alveolar Overdistension and Her	nodynamic Collapse in ARDS with Obesity
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Are there any relevant co	onflicts of interest? Yes 🖌 No	
Section 3. Releva	ant financial activities outside the	submitted work.
Place a check in the appr	opriate boxes in the table to indicate w	hether you have financial relationships (regardless of amount

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Are there any relevant conflicts of interest?	Yes	🗸 N	١o
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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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Section 1. Identifying Inform	nation	
1. Given Name (First Name) Riccardo	2. Surname (Last Name) Pinciroli	3. Date 25-May-2020
4. Are you the corresponding author?	Yes No	
5. Manuscript Title High Pleural Pressure Prevents Alveola	r Overdistension and Hemodynamic Collapse in ARI	DS with Obesity
6. Manuscript Identifying Number (if you k Blue-201909-1687OC.R2	now it)	
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	eive payment or services from a third party (government, g but not limited to grants, data monitoring board, study	•
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Section 4. Intellectual Property -- Patents & Copyrights

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Do you have any patents, whether planned, pending or issued, broadly relevant to the work?		Yes	\checkmark	No
	1 1			

🖌 No

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Section 1. Identifying Inform	nation	
1. Given Name (First Name) David	2. Surname (Last Name) Imber	3. Date 30-May-2020
4. Are you the corresponding author?	Yes 🖌 No	Corresponding Author's Name Lorenzo Berra
5. Manuscript Title High Pleural Pressure Prevents Alveola	r Overdistension and Hem	odynamic Collapse in ARDS with Obesity
6. Manuscript Identifying Number (if you k Blue-201909-1687OC.R2	now it)	
Section 2. The Work Under C	onsideration for Publi	ication
		n a third party (government, commercial, private foundation, etc.) for ata monitoring board, study design, manuscript preparation,
Are there any relevant conflicts of inter	est? 🗌 Yes 🖌 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**.

No

Are there any relevant conflicts of interest?		Yes	\checkmark	1
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Do you have any patents, whether planned, pending or issued, broadly relevant to the work?		Yes	N/	0
	1 1			-



Section 5. Relationships not covered above

Are there other relationships or activities that readers could perceive to have influenced, or that give the appearance of potentially influencing, what you wrote in the submitted work?

Yes, the following relationships/conditions/circumstances are present (explain below):

✓ No other relationships/conditions/circumstances that present a potential conflict of interest

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Dr. Imber has nothing to disclose.

Evaluation and Feedback



Instructions

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Section 1.	Identifying Info	mation	
1. Given Name (Fi Aranya	rst Name)	2. Surname (Last Name) Bagchi	3. Date 25-May-2020
4. Are you the cor	responding author?	Yes 🖌 No	Corresponding Author's Name Lorenzo Berra
5. Manuscript Title High Pleural Pre		ar Overdistension and Her	nodynamic Collapse in ARDS with Obesity
6. Manuscript Ide Blue-201909-168	ntifying Number (if you 87OC.R2	know it)	

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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.)?

✓ No

Are there any relevant conflicts of interest? Yes

Section 3. Relevant financial activities outside the submitted work.

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No

Are there any relevant conflicts of interest? \checkmark Yes

If yes, please fill out the appropriate information below.

Name of Entity	Grant?	Personal Fees ?	Non-Financial Support?	Other?	Comments	
Lungpacer Medical, Inc		\checkmark			Consulting fees	

Section 4. Intellectual Property -- Patents & Copyrights Do you have any patents, whether planned, pending or issued, broadly relevant to the work? Yes



Section 5. Relationships not covered above

Are there other relationships or activities that readers could perceive to have influenced, or that give the appearance of potentially influencing, what you wrote in the submitted work?

Yes, the following relationships/conditions/circumstances are present (explain below):

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Section 6. Disclosure Statement

Based on the above disclosures, this form will automatically generate a disclosure statement, which will appear in the box below.

Dr. Bagchi reports personal fees from Lungpacer Medical, Inc, outside the submitted work; .

Evaluation and Feedback



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Section 1. Identifying Inform	nation		
1. Given Name (First Name) Kenneth	2. Surname (Last Name) Shelton		3. Date 25-May-2020
4. Are you the corresponding author?	Yes 🖌 No	Corresponding Author's Nar Lorenzo Berra	ne
5. Manuscript Title High Pleural Pressure Prevents Alveolar	Overdistension and Hem	odynamic Collapse in ARDS	with Obesity
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Section 2. The Work Under C	onsideration for Dubli	ration	
Did you or your institution at any time rece any aspect of the submitted work (including statistical analysis, etc.)? Are there any relevant conflicts of intere	g but not limited to grants, d	a third party (government, cor	
Section 3. Relevant financial	activities outside the	submitted work.	

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Are there any relevant conflicts of interest?		Yes	\checkmark	No
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Section 4. Intellectual Property -- Patents & Copyrights

Do you have any patents, whether planned, pending or issued, broadly relevant to the work? \lceil	Yes	🖌 No	
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Dr. Shelton has nothing to disclose.

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Section 1. Identifying Inform		
Identifying Inform	nation	
1. Given Name (First Name) Abraham	2. Surname (Last Name) Sonny	3. Date 25-May-2020
4. Are you the corresponding author?	Yes 🖌 No	Corresponding Author's Name Lorenzo Berra
5. Manuscript Title High Pleural Pressure Prevents Alveola	r Overdistension and Hem	odynamic Collapse in ARDS with Obesity
6. Manuscript Identifying Number (if you k Blue-201909-1687OC.R2	now it)	
Section 2. The Work Under C	onsideration for Publi	cation
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Are there any relevant conflicts of interest?	Y	'es	\checkmark	No
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Section 4. Intellectual Property -- Patents & Copyrights

Do you have any patents, whether planned, pending of issued, broadly relevant to the work? res v no	ents, whether planned, pending or issued, broadly relevant to the wo	k? Yes 🖌	No
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Section 5. Relationships not covered above

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Section 6. Disclosure Statement

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Dr. Sonny has nothing to disclose.

Evaluation and Feedback



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Section 1. Identifying Inform			
Identifying Inform	nation		
1. Given Name (First Name) Edward	2. Surname (Last Name) Bittner		3. Date 25-May-2020
4. Are you the corresponding author?	Yes 🖌 No	Corresponding Author's Na Lorenzo Berra	me
5. Manuscript Title High Pleural Pressure Prevents Alveola	r Overdistension and Hem	nodynamic Collapse in ARDS	with Obesity
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Are there any relevant conflicts of interest?	Y	'es	\checkmark	No
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Section 4. Intellectual Property -- Patents & Copyrights

Do you have any patents, whether planned, penuing of issued, broadly relevant to the work? res \mathbf{v} no	e any patents, whether planned, pending or issued, broadly relevant to	the work?	Yes	🖌 No
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Dr. Bittner has nothing to disclose.

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Section 1.	Identifying Infor	mation	
1. Given Name (Fin Marcelo	rst Name)	2. Surname (Last Name) Amato	3. Date 04-June-2020
4. Are you the cor	responding author?	Yes 🖌 No	Corresponding Author's Name Lorenzo Berra
5. Manuscript Title High Pleural Pres		ar Overdistension and Hen	nodynamic Collapse in ARDS with Obesity
6. Manuscript Ider Blue-201909-168	ntifying Number (if you l 37OC.R2	know it)	

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🖌 No

Are there any relevant conflicts of interest? Yes

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No

Are there any relevant conflicts of interest? Yes

If yes, please fill out the appropriate information below.

Name of Entity	Grant?	Personal Fees	Non-Financial Support?	Other?	Comments	
Nihon Koden - Orange Med Timpel S.A Medtronics	✓				Dr. Marcelo B. P. Amato, MD reports that his research laboratory has received grants in the last five years from the listed companies, colaborating in projects related to education, mechanical ventilation and Electrical Impedance Tomography.	
Timpel S.A.				\checkmark	Dr. Marcelo B. P. Amato is also a minority shareholder in Timpel	



Section 4. Intellectual Property -- Patents & Copyrights

Do you have any patents, whether planned, pending or issued, broadly relevant to the work? Yes V No

Section 5. Relationships not covered above

Are there other relationships or activities that readers could perceive to have influenced, or that give the appearance of potentially influencing, what you wrote in the submitted work?

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Dr. Amato reports grants from Nihon Koden - Orange Med Timpel S.A Medtronics, other from Timpel S.A., outside the submitted work; .

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3. Relevant financial activities outside the submitted work.

This section asks about your financial relationships with entities in the bio-medical arena that could be perceived to influence, or that give the appearance of potentially influencing, what you wrote in the submitted work. You should disclose interactions with ANY entity that could be considered broadly relevant to the work. For example, if your article is about testing an epidermal growth factor receptor (EGFR) antagonist in lung cancer, you should report all associations with entities pursuing diagnostic or therapeutic strategies in cancer in general, not just in the area of EGFR or lung cancer.

Report all sources of revenue paid (or promised to be paid) directly to you or your institution on your behalf over the 36 months prior to submission of the work. This should include all monies from sources with relevance to the submitted work, not just monies from the entity that sponsored the research. Please note that your interactions with the work's sponsor that are outside the submitted work should also be listed here. If there is any question, it is usually better to disclose a relationship than not to do so.

For grants you have received for work outside the submitted work, you should disclose support ONLY from entities that could be perceived to be affected financially by the published work, such as drug companies, or foundations supported by entities that could be perceived to have a financial stake in the outcome. Public funding sources, such as government agencies, charitable foundations or academic institutions, need not be disclosed. For example, if a government agency sponsored a study in which you have been involved and drugs were provided by a pharmaceutical company, you need only list the pharmaceutical company.

4. Intellectual Property.

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

5. Relationships not covered above.

Use this section to report other relationships or activities that readers could perceive to have influenced, or that give the appearance of potentially influencing, what you wrote in the submitted work.

Definitions.

Entity: government agency, foundation, commercial sponsor, academic institution, etc.

Grant: A grant from an entity, generally [but not always] paid to your organization

Personal Fees: Monies paid to you for services rendered, generally honoraria, royalties, or fees for consulting , lectures, speakers bureaus, expert testimony, employment, or other affiliations

Non-Financial Support: Examples include drugs/equipment supplied by the entity, travel paid by the entity, writing assistance, administrative support, etc.

Other: Anything not covered under the previous three boxes Pending: The patent has been filed but not issued Issued: The patent has been issued by the agency Licensed: The patent has been licensed to an entity, whether earning royalties or not Povalties: Funds are coming in to you or your institution due to you



Section 1.	Identifying Info	rmation	
1. Given Name (First Name) Robert		2. Surname (Last Name) Kacmarek	3. Date 26-May-2020
4. Are you the corresponding author?		Yes 🖌 No	Corresponding Author's Name Lorenzo Berra
5. Manuscript Title High Pleural Pres		ar Overdistension and Hem	nodynamic Collapse in ARDS with Obesity
6. Manuscript Ider Blue-201909-168	ntifying Number (if you 37OC.R2	know it)	

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.)?

🖌 No

Are there any relevant conflicts of interest? Yes

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**.

No

Are there any relevant conflicts of interest? \checkmark Yes

If yes, please fill out the appropriate information below.

Name of Entity	Grant?	Personal Fees ?	Non-Financial Support?	Other?	Comments	
Medtronics	\checkmark				mechanical Ventilation	
Orange Medical	\checkmark				mechanical ventilation	
Orange medical		\checkmark			Consultant	
Nihon Kodon		\checkmark			Webinar	
Medtronics		\checkmark			Consultant	



Section 4. Intellectual Property -- Patents & Copyrights

Do you have any patents, whether planned, pending or issued, broadly relevant to the work? Yes Ves

Section 5. Relationships not covered above

Are there other relationships or activities that readers could perceive to have influenced, or that give the appearance of potentially influencing, what you wrote in the submitted work?

Yes, the following relationships/conditions/circumstances are present (explain below):

✓ No other relationships/conditions/circumstances that present a potential conflict of interest

At the time of manuscript acceptance, journals will ask authors to confirm and, if necessary, update their disclosure statements. On occasion, journals may ask authors to disclose further information about reported relationships.

Section 6. Disclosure Statement

Based on the above disclosures, this form will automatically generate a disclosure statement, which will appear in the box below.

Dr. Kacmarek reports grants from Medtronics, grants from Orange Medical , personal fees from Orange medical , personal fees from Nihon Kodon , personal fees from Medtronics, outside the submitted work; .

Evaluation and Feedback



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.

1. Identifying information.

2. The work under consideration for publication.

This section asks for information about the work that you have submitted for publication. The time frame for this reporting is that of the work itself, from the initial conception and planning to the present. The requested information is about resources that you received, either directly or indirectly (via your institution), to enable you to complete the work. Checking "No" means that you did the work without receiving any financial support from any third party -- that is, the work was supported by funds from the same institution that pays your salary and that institution did not receive third-party funds with which to pay you. If you or your institution received funds from a third party to support the work, such as a government granting agency, charitable foundation or commercial sponsor, check "Yes".

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Section 1.	Identifying Inform	nation					
1. Given Name (First Name) Lorenzo		2. Surname (Last Name) Berra	3. Date 25-May-2020				
4. Are you the co	rresponding author?	✓ Yes No					
5. Manuscript Titl High Pleural Pre		r Overdistension and Hemody	ynamic Collapse in ARDS	s with Obesity			
6. Manuscript Ide Blue-201909-16	ntifying Number (if you k 87OC.R2	now it)					
Section 2.	The Work Under C	Consideration for Publicat	tion				
any aspect of the statistical analysis	submitted work (includin , etc.)?	g but not limited to grants, data		mmercial, private foundation, etc.) for esign, manuscript preparation,			
Are there any re	levant conflicts of inter	rest? Yes 🖌 No					
Section 3.							
Section 5.	Relevant financia	activities outside the sul	omitted work.				
Place a check in	the appropriate boxes	in the table to indicate wheth	ner you have financial rel	ationships (regardless of amount			

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	\checkmark	No
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Section 4. Intellectual Property -- Patents & Copyrights

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

Are there other relationships or activities that readers could perceive to have influenced, or that give the appearance of potentially influencing, what you wrote in the submitted work?

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Section 6. Disclosure Statement

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Dr. Berra has nothing to disclose.

Evaluation and Feedback