

ICMJE DISCLOSURE FORM

Date: 7/15/2021

Your Name: Biplab K Saha

Manuscript Title: Pleural abnormalities in COVID-19: a narrative review

Manuscript number (if known): JTD-21-542

In the interest of transparency, we ask you to disclose all relationships/activities/interests listed below that are related to the content of your manuscript. "Related" means any relation with for-profit or not-for-profit third parties whose interests may be affected by the content of the manuscript. Disclosure represents a commitment to transparency and does not necessarily indicate a bias. If you are in doubt about whether to list a relationship/activity/interest, it is preferable that you do so.

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Date: 7/15/2021

Your Name: Woon H Chong

Manuscript Title: Pleural abnormalities in COVID-19: a narrative review

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Your Name: Adam Austin

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Date: 7/15/2021

Your Name: Ritu Kathuria

Manuscript Title: Pleural abnormalities in COVID-19: a narrative review

Manuscript number (if known): JTD-21-542

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Your Name: Praveen Datar

Manuscript Title: Pleural abnormalities in COVID-19: a narrative review

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Your Name: Scott Beegle

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Your Name: Amit Chopra

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