ICMJE DISCLOSURE FORM

Date: 25th of August 2021

Your Name:_Thomas Ruys

Manuscript Title: Ernstig zieke man met bessengelei-achtig sputum en pneumonie in rechter bovenkwab Manuscript number : D6210

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.

The following questions apply to the author's relationships/activities/interests as they relate to the <u>current</u> <u>manuscript only</u>.

The author's relationships/activities/interests should be <u>defined broadly</u>. For example, if your manuscript pertains to the epidemiology of hypertension, you should declare all relationships with manufacturers of antihypertensive medication, even if that medication is not mentioned in the manuscript.

In item #1 below, report all support for the work reported in this manuscript without time limit. For all other items, the time frame for disclosure is the past 36 months.

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5	Payment or honoraria for lectures, presentations,	None	
	speakers bureaus,		
	manuscript writing or educational events		
6	Payment for expert testimony	None	
7	Support for attending	None	
<i>'</i>	meetings and/or travel		
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8	Patents planned, issued or pending	None	
9	Participation on a Data	None	
9	Safety Monitoring Board or		
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10	Leadership or fiduciary role	None	
	in other board, society,		
	committee or advocacy		
	group, paid or unpaid		
11	Stock or stock options	None	
10	Descipt of any invest	Nene	
12	materials, drugs, medical	None	
	writing, gifts or other		
12	services Other financial or non-	Nene	
13	financial interests	None	

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