ICMJE Form for Disclosure of Potential Conflicts of Interest

Instructions

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**Section 1. Identifying Information**

1. Given Name (First Name)  
   Monika  
2. Surname (Last Name)  
   Fekete  
3. Date  
   15-June-2020  
4. Are you the corresponding author?  
   ☑ No  
Corresponding Author's Name  
   med. habil. Janos T. Varga MD, PhD  
5. Manuscript Title  
   Prevalence of Influenza and Pneumococcal Vaccination in Chronic Obstructive Pulmonary Disease Patients in Association with the Occurrence of Acute Exacerbations  
6. Manuscript Identifying Number (if you know it)  
   JTD-20-814-R1  

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Dr. Fekete has nothing to disclose.

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<tr>
<td>Judit</td>
<td>Pako</td>
<td>16-June-2020</td>
</tr>
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</table>

4. Are you the corresponding author?  
   ✔ Yes  
   No

Corresponding Author’s Name: Janos Varga

5. Manuscript Title:  
   Prevalence of Influenza and Pneumococcal Vaccination in Chronic Obstructive Pulmonary Disease Patients in Association with the Occurrence of Acute Exacerbations

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Dr. Pako has nothing to disclose.

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<table>
<thead>
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<th>1. Given Name (First Name)</th>
<th>Anna N</th>
</tr>
</thead>
<tbody>
<tr>
<td>2. Surname (Last Name)</td>
<td>Nemeth</td>
</tr>
<tr>
<td>3. Date</td>
<td>16-June-2020</td>
</tr>
<tr>
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**Corresponding Author’s Name**

Janos Tamas Dr. Varga

**Manuscript Title**

Prevalence of Influenza and Pneumococcal Vaccination in Chronic Obstructive Pulmonary Disease Patients in Association with the Occurrence of Acute Exacerbations

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| Yes | No | ✔ |

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Dr. Nemeth has nothing to disclose.

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<tbody>
<tr>
<td>Stefano</td>
<td>Tarantini</td>
<td>15-June-2020</td>
</tr>
</tbody>
</table>

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

Corresponding Author’s Name  
Janos Tamas Varga

5. Manuscript Title  
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1. Given Name (First Name)  
Janos T,

2. Surname (Last Name)  
Varga

3. Date  
03-June-2020

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

5. Manuscript Title  
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