ICMJE Form for Disclosure of Potential Conflicts of Interest

Instructions

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Royalties: Funds are coming in to you or your institution due to your patent
ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name) BALASUBRAMANIAN
2. Surname (Last Name) VENKITARAMAN
3. Date 28-April-2020
4. Are you the corresponding author? ☑ No

Corresponding Author’s Name JIANG LEI

5. Manuscript Title Video assisted Uniportal pulmonary segmentectomy: Description of SAFE technique and analysis of short term outcome


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? ☑ No

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Dr. VENKITARAMAN has nothing to disclose.

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Section 1. Identifying Information

1. Given Name (First Name)  
   Jianqiao

2. Surname (Last Name)  
   Cai

3. Date  
   28-April-2020

4. Are you the corresponding author?  
   Yes  ✔  No

Corresponding Author's Name  
   JIANG LEI

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Dr. Cai has nothing to disclose.

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1. Given Name (First Name)  
Xiaoyu

2. Surname (Last Name)  
Ma

3. Date

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

Corresponding Author's Name  
JIANG LEI

5. Manuscript Title  
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Dr. Ma has nothing to disclose.

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Section 1.

Identifying Information

1. Given Name (First Name)  
Zhigang

2. Surname (Last Name)  
Chen

3. Date  
28-April-2020

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

Corresponding Author's Name  
JIANG LEI

5. Manuscript Title  
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   Shi

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1. Given Name (First Name)  
   Jiang

2. Surname (Last Name)  
   Lei

3. Date  
   25-April-2020

4. Are you the corresponding author?  
   ✔ Yes  
   No

5. Manuscript Title  
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Dr. Lei has nothing to disclose.

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