ICMJE Form for Disclosure of Potential Conflicts of Interest

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.

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)  
Ghulam

2. Surname (Last Name)  
Abbas

3. Date  
02-October-2020

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

5. Manuscript Title  
Segment specific lymph node dissection and evaluation during anatomical pulmonary segmentectomy

6. Manuscript Identifying Number (if you know it)  
VATS-2019-RCS-08-R1

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?  
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✔ Yes  ☐ No

Section 4. Intellectual Property -- Patents & Copyrights

Do you have any patents, whether planned, pending or issued, broadly relevant to the work?  
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Dr. Abbas has nothing to disclose.

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)  
Beebarg

2. Surname (Last Name)  
Raza

3. Date  
02-October-2020

4. Are you the corresponding author?  
☑ No  
Corresponding Author's Name  
Ghulam Abbas

5. Manuscript Title  
Segment specific lymph node dissection and evaluation during anatomical pulmonary segmentectomy

6. Manuscript Identifying Number (if you know it)  
VATS-2019-RCS-08-R1

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Section 4. Intellectual Property -- Patents & Copyrights

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☑ No
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Dr. Raza has nothing to disclose.

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Abbas
ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)  
Kamil

2. Surname (Last Name)  
Abbas

3. Date  
02-October-2020

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

Corresponding Author's Name  
Ghulam Abbas

5. Manuscript Title  
Segment specific lymph node dissection and evaluation during anatomical pulmonary segmentectomy

6. Manuscript Identifying Number (if you know it)  
VATS-2019-RCS-08-R1

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Are there any relevant conflicts of interest?  
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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?  
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Dr. Abbas has nothing to disclose.

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Lamb
ICMJE Form for Disclosure of Potential Conflicts of Interest

Identification Information

1. Given Name (First Name): Jason
2. Surname (Last Name): Lamb
3. Date: 02-October-2020
4. Are you the corresponding author? Yes
5. Manuscript Title: Segment specific lymph node dissection and evaluation during anatomical pulmonary segmentectomy
6. Manuscript Identifying Number (if you know it): VATS-2019-RCS-08-R1

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Intellectual Property -- Patents & Copyrights

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Dr. Lamb has nothing to disclose.

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)  
   Alper  

2. Surname (Last Name)  
   Toker  

3. Date  
   02-October-2020  

4. Are you the corresponding author?  
   ✔ Yes  
   No  

5. Manuscript Title  
   Segment specific lymph node dissection and evaluation during anatomical pulmonary segmentectomy  

6. Manuscript Identifying Number (if you know it)  
   VATS-2019-RCS-08-R1

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Are there any relevant conflicts of interest?  
   ✔ No

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Toker
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