

ICMJE Form for Disclosure of Potential Conflicts of Interest

Instructions

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Section 1. Identifying Information

1. Given Name (First Name)
Shinichi

2. Surname (Last Name)
Akahoshi

3. Date
22-March-2020

4. Are you the corresponding author?

Yes No

Corresponding Author's Name
Toru Beppu

5. Manuscript Title
Does laparoscopic liver resection for colorectal liver metastases provide a true survival benefit compared with open liver resection?

6. Manuscript Identifying Number (if you know it)
HBSN-19-924

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Section 1. Identifying Information

1. Given Name (First Name)
Toru

2. Surname (Last Name)
Beppu

3. Date
20-March-2020

4. Are you the corresponding author? Yes No

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Section 1. Identifying Information

1. Given Name (First Name)
Yasuhisa

2. Surname (Last Name)
Mori

3. Date
22-March-2020

4. Are you the corresponding author?

Yes No

Corresponding Author's Name
Toru Beppu

5. Manuscript Title
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1. Given Name (First Name) Koichi	2. Surname (Last Name) Kinoshita	3. Date 22-March-2020
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Ken

2. Surname (Last Name)

Kikuchi

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22-March-2020

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Corresponding Author's Name

Toru Beppu

5. Manuscript Title

Does laparoscopic liver resection for colorectal liver metastases provide a true survival benefit compared with open liver resection?

6. Manuscript Identifying Number (if you know it)

HBSN-19-924

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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.)?

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