

ICMJE Form for Disclosure of Potential Conflicts of Interest

Instructions

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This section asks about patents and copyrights, whether pending, issued, licensed and/or receiving royalties.

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)
Hideki

2. Surname (Last Name)
Kawamura

3. Date
11-November-2016

4. Are you the corresponding author? Yes No

5. Manuscript Title
Advanced technique of reduced-port laparoscopic total gastrectomy for gastric cancer

6. Manuscript Identifying Number (if you know it)

Section 2. The Work Under Consideration for Publication

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Section 4. Intellectual Property -- Patents & Copyrights

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Dr. Kawamura has nothing to disclose.

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Section 1. Identifying Information

1. Given Name (First Name) Tadashi	2. Surname (Last Name) Yoshida	3. Date 11-November-2016
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Hideki Kawamura
5. Manuscript Title Advanced technique of reduced-port laparoscopic total gastrectomy for gastric cancer		
6. Manuscript Identifying Number (if you know it) _____		

Section 2. The Work Under Consideration for Publication

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Are there any relevant conflicts of interest? Yes No

Section 4. Intellectual Property -- Patents & Copyrights

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Dr. Yoshida has nothing to disclose.

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Section 1. Identifying Information

1. Given Name (First Name) Yohsuke	2. Surname (Last Name) Ohno	3. Date 11-November-2016
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Hideki Kawamura
5. Manuscript Title Advanced technique of reduced-port laparoscopic total gastrectomy for gastric cancer		
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1. Given Name (First Name) Nobuki	2. Surname (Last Name) Ichikawa	3. Date 11-November-2016
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Hideki Kawamura
5. Manuscript Title Advanced technique of reduced-port laparoscopic total gastrectomy for gastric cancer		
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Section 1. Identifying Information

1. Given Name (First Name)
Shigenori

2. Surname (Last Name)
Homma

3. Date
11-November-2016

4. Are you the corresponding author?

Yes No

Corresponding Author's Name
Hideki Kawamura

5. Manuscript Title

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1. Given Name (First Name) Akinobu	2. Surname (Last Name) Taketomi	3. Date 11-November-2016
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Hideki Kawamura
5. Manuscript Title Advanced technique of reduced-port laparoscopic total gastrectomy for gastric cancer		
6. Manuscript Identifying Number (if you know it) _____		

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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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Dr. Taketomi has nothing to disclose.

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