

## 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) Ye Xin	2. Surname (Last Name) Koh	3. Date 12-February-2017
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Ser Yee Lee
5. Manuscript Title Laparoscopic caudate lobe resection: navigating the technical challenge		
6. Manuscript Identifying Number (if you know it)		

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Dr. Koh 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)  
Ser Yee

2. Surname (Last Name)  
Lee

3. Date  
12-February-2017

4. Are you the corresponding author?  Yes  No

5. Manuscript Title  
Laparoscopic caudate lobe resection: navigating the technical challenge

6. Manuscript Identifying Number (if you know it)

### Section 2. The Work Under Consideration for Publication

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1. Given Name (First Name) Adrian	2. Surname (Last Name) Chiuw	3. Date 12-February-2017
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Ser Yee Lee
5. Manuscript Title Laparoscopic caudate lobe resection: navigating the technical challenge		
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Dr. Chiow has nothing to disclose.

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### Section 1. Identifying Information

1. Given Name (First Name) Juinn Huar	2. Surname (Last Name) Kam	3. Date 12-February-2017
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Ser Yee Lee
5. Manuscript Title Laparoscopic caudate lobe resection: navigating the technical challenge		
6. Manuscript Identifying Number (if you know it)		

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1. Given Name (First Name) Brian	2. Surname (Last Name) Goh	3. Date 12-February-2017
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Ser Yee Lee
5. Manuscript Title Laparoscopic caudate lobe resection: navigating the technical challenge		
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**Personal Fees:** Monies paid to you for services rendered, generally honoraria, royalties, or fees for consulting, lectures, speakers bureaus, expert testimony, employment, or other affiliations

**Non-Financial Support:** Examples include drugs/equipment supplied by the entity, travel paid by the entity, writing assistance, administrative support, etc.

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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) Chung Yip	2. Surname (Last Name) Chan	3. Date 12-February-2017
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Ser Yee Lee
5. Manuscript Title Laparoscopic caudate lobe resection: navigating the technical challenge		
6. Manuscript Identifying Number (if you know it)		

### 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?  Yes  No

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Based on the above disclosures, this form will automatically generate a disclosure statement, which will appear in the box below.

Dr. Chan has nothing to disclose.

### Evaluation and Feedback

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