

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.

Identifying information.

2. The work under consideration for publication.

This section asks for information about the work that you have submitted for publication. The time frame for this reporting is that of the work itself, from the initial conception and planning to the present. The requested information is about resources that you received, either directly or indirectly (via your institution), to enable you to complete the work. Checking "No" means that you did the work without receiving any financial support from any third party -- that is, the work was supported by funds from the same institution that pays your salary and that institution did not receive third-party funds with which to pay you. If you or your institution received funds from a third party to support the work, such as a government granting agency, charitable foundation or commercial sponsor, check "Yes".

3. Relevant financial activities outside the submitted work.

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4. Intellectual Property.

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

Relationships not covered above.

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Royalties: Funds are coming in to you or your institution due to your

Nota 1



| Section 1. Identifying Info | rmation | |
|--|---|--|
| 1. Given Name (First Name) Carolijn | 2. Surname (Last Name) Nota | 3. Date 03-March-2018 |
| 4. Are you the corresponding author? | Yes ✓ No | Corresponding Author's Name Jeroen Hagendoorn |
| 5. Manuscript Title Minimally invasive liver surgery—wh | ither else but straight ahead | ? |
| 6. Manuscript Identifying Number (if you | know it) | |
| | | |
| Section 2. The Work Under | Consideration for Public | cation |
| | ng but not limited to grants, da | a third party (government, commercial, private foundation, etc.) for ta monitoring board, study design, manuscript preparation, |
| | | |
| Section 3. Relevant financia | al activities outside the s | submitted work. |
| of compensation) with entities as des | cribed in the instructions. Us report relationships that wer | ether you have financial relationships (regardless of amount se one line for each entity; add as many lines as you need by se present during the 36 months prior to publication. |
| | | |
| Section 4. Intellectual Prop | erty Patents & Copyri <u>c</u> | yhts |
| Do you have any patents, whether pla | anned, pending or issued, br | oadly relevant to the work? Yes V No |

Nota 2



| Section 5. | |
|------------------|---|
| | Relationships not covered above |
| | elationships or activities that readers could perceive to have influenced, or that give the appearance of encing, what you wrote in the submitted work? |
| Yes, the follow | wing relationships/conditions/circumstances are present (explain below): |
| ✓ No other rela | tionships/conditions/circumstances that present a potential conflict of interest |
| | anuscript acceptance, journals will ask authors to confirm and, if necessary, update their disclosure statements rnals may ask authors to disclose further information about reported relationships. |
| Section 6. | Disclosure Statement |
| Based on the abo | ove disclosures, this form will automatically generate a disclosure statement, which will appear in the box |
| Dr. Nota has not | hing to disclose. |

Evaluation and Feedback

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Nota 3



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Borel Rinkes 1



| Section 1. | Identifying Inform | nation | |
|---|----------------------------|--|---|
| 1. Given Name (Fi Inne | rst Name) | 2. Surname (Last Name) Borel Rinkes | 3. Date 03-March-2018 |
| 4. Are you the cor | responding author? | Yes ✓ No | Corresponding Author's Name Jeroen Hagendoorn |
| 5. Manuscript Title Minimally invasi | | ner else but straight ahead | |
| 6. Manuscript Ide | ntifying Number (if you kr | now it) | |
| | | | - |
| Section 2. | The Week Heder C | and developed for Dublic | |
| 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 | | | |
| | | | |
| Section 3. | Relevant financial | activities outside the s | ubmitted work. |
| Place a check in the appropriate boxes in the table to indicate whether you have financial relationships (regardless of amount of compensation) with entities as described in the instructions. Use one line for each entity; add as many lines as you need by clicking the "Add +" box. You should report relationships that were present during the 36 months prior to publication . Are there any relevant conflicts of interest? Yes Vo | | | |
| | | | |
| Section 4. | Intellectual Prope | rty Patents & Copyrig | hts |
| Do you have any | patents, whether plan | ned, pending or issued, br | oadly relevant to the work? Yes V No |

Borel Rinkes 2



| Section 5. Relationships not sovered above |
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| Relationships not covered above |
| Are there other relationships or activities that readers could perceive to have influenced, or that give the appearance of potentially influencing, what you wrote in the submitted work? |
| Yes, the following relationships/conditions/circumstances are present (explain below): |
| ✓ No other relationships/conditions/circumstances that present a potential conflict of interest |
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| Section 6. Disclosure Statement |
| |
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| Dr. Borel Rinkes has nothing to disclose. |

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Borel Rinkes 3



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patent

Hagendoorn 1



| Section 1. | Identifying Inform | ation | | |
|--|--|-----------------------------|---|------------------------------------|
| 1. Given Name (Fii Jeroen | | | e (Last Name) orn | 3. Date 03-March-2018 |
| 4. Are you the corresponding author? | | ✓ Yes | No | |
| 5. Manuscript Title Minimally invasiv | e ve liver surgery—whith | er else but s | straight ahead? | |
| 6. Manuscript Ider | ntifying Number (if you kn | ow it) | | |
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| Section 2. | The Work Under Co | onsiderati | ion for Publication | |
| any aspect of the s statistical analysis, | stitution at any time recei ubmitted work (including | ve payment of but not limit | or services from a third party (government, of ted to grants, data monitoring board, study of the services of No | |
| Section 3. | Relevant financial | activities (| outside the submitted work. | |
| of compensation clicking the "Add |) with entities as descri | bed in the incort relation | to indicate whether you have financial rinstructions. Use one line for each entitynships that were present during the 36 es No | ; add as many lines as you need by |
| Section 4. | Intellectual Branco | tu. Beter | ate 9. Comunicipte | |
| | Intellectual Proper | ty Pater | nts & Copyrights | |
| Do you have any | patents, whether plans | ned, pendin | ng or issued, broadly relevant to the wor | k? ☐ Yes 🗸 No |

Hagendoorn 2



| Section 5. | |
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| occuron or | Relationships not covered above |
| | relationships or activities that readers could perceive to have influenced, or that give the appearance of encing, what you wrote in the submitted work? |
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