

ICMJE DISCLOSURE FORM

Date: 3rd July 2023

Your Name: RETNAGOWRI RAJANDRAM

Manuscript Title: A Narrative Review: Complete Mesocolic Excision in Right-sided Colonic Cancer Resections: Present Paradigm and Future Directions" to Annals of Laparoscopic and Endoscopic Surgery

Manuscript number (if known): ALES-23-4 R1

In the interest of transparency, we ask you to disclose all relationships/activities/interests listed below that are related to the content of your manuscript. "Related" means any relation with for-profit or not-for-profit third parties whose interests may be affected by the content of the manuscript. Disclosure represents a commitment to transparency and does not necessarily indicate a bias. If you are in doubt about whether to list a relationship/activity/interest, it is preferable that you do so.

The following questions apply to the author's relationships/activities/interests as they relate to the current manuscript only.

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In item #1 below, report all support for the work reported in this manuscript without time limit. For all other items, the time frame for disclosure is the past 36 months.

		Name all entities with whom you have this relationship or indicate none (add rows as needed)	Specifications/Comments (e.g., if payments were made to you or to your institution)
Time frame: Since the initial planning of the work			
1	All support for the present manuscript (e.g., funding, provision of study materials, medical writing, article processing charges, etc.) No time limit for this item.	<input checked="" type="checkbox"/> None	
Time frame: past 36 months			
2	Grants or contracts from any entity (if not indicated in item #1 above).	<input type="checkbox"/> None	
3	Royalties or licenses	<input type="checkbox"/> None	
4	Consulting fees	<input type="checkbox"/> None	

5	Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or educational events	<input type="checkbox"/> None	
6	Payment for expert testimony	<input checked="" type="checkbox"/> None	
7	Support for attending meetings and/or travel	<input type="checkbox"/> None	
8	Patents planned, issued or pending	<input type="checkbox"/> None	
9	Participation on a Data Safety Monitoring Board or Advisory Board	<input type="checkbox"/> None	
10	Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid	<input checked="" type="checkbox"/> None	
11	Stock or stock options	<input type="checkbox"/> None	
12	Receipt of equipment, materials, drugs, medical writing, gifts or other services	<input type="checkbox"/> None	
13	Other financial or non-financial interests	<input checked="" type="checkbox"/> None	

Please summarize the above conflict of interest in the following box:

None

Please place an "X" next to the following statement to indicate your agreement:

I certify that I have answered every question and have not altered the wording of any of the questions on this

form.

ICMJE DISCLOSURE FORM

Date: 7/3/2023

Your Name: Tak Loon KHONG

Manuscript Title: A Narrative Review: Complete Mesocolic Excision in Right-sided Colonic Cancer Resections: Present Paradigm and Future Directions" to Annals of Laparoscopic and Endoscopic Surgery

Manuscript Number (if known): ALES-23-4-R1

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4	Consulting fees	<input checked="" type="checkbox"/> None <table border="1" style="width: 100%; border-collapse: collapse;"> <tr><td style="width: 50%; height: 15px;"></td><td style="width: 50%;"></td></tr> <tr><td style="height: 15px;"></td><td></td></tr> <tr><td style="height: 15px;"></td><td></td></tr> <tr><td style="height: 15px;"></td><td></td></tr> </table>									
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9	Participation on a Data Safety Monitoring Board or Advisory Board	<input checked="" type="checkbox"/> None <table border="1" style="width: 100%; border-collapse: collapse;"> <tr><td style="width: 50%; height: 15px;"></td><td style="width: 50%;"></td></tr> <tr><td style="height: 15px;"></td><td></td></tr> <tr><td style="height: 15px;"></td><td></td></tr> </table>									
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ICMJE DISCLOSURE FORM

Date: 3rd July 2023

Your Name: NORA BINTI ABDUL AZIZ

Manuscript Title: A Narrative Review: Complete Mesocolic Excision in Right-sided Colonic Cancer Resections: Present Paradigm and Future Directions" to Annals of Laparoscopic and Endoscopic Surgery

Manuscript number (if known): ALES-23-4 R1

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3	Royalties or licenses	___ None	
4	Consulting fees	___ None	

5	Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or educational events	___ None	
6	Payment for expert testimony	___ None	
7	Support for attending meetings and/or travel	___ None	
8	Patents planned, issued or pending	___ None	
9	Participation on a Data Safety Monitoring Board or Advisory Board	___ None	
10	Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid	___ None	
11	Stock or stock options	___ None	
12	Receipt of equipment, materials, drugs, medical writing, gifts or other services	___ None	
13	Other financial or non-financial interests	___ None	

Please summarize the above conflict of interest in the following box:

None

Please place an "X" next to the following statement to indicate your agreement:

X I certify that I have answered every question and have not altered the wording of any of the questions on this form.



ICMJE DISCLOSURE FORM

Date: 03/07/2023
Your Name: Mohamed Rezal Abdul Aziz
Manuscript Title: A Narrative Review: Complete Mesocolic Excision in Right-sided Colonic Cancer Resections: Present Paradigm and Future Directions
Manuscript number (if known): ALES -23-4-R1

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ICMJE DISCLOSURE FORM

Date: 3 July 2023

Your Name: April Camilla Roslani

Manuscript Title: A Narrative Review: Complete Mesocolic Excision in Right-sided Colonic Cancer Resections: Present Paradigm and Future Directions

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3	Royalties or licenses	__x__ None	
4	Consulting fees	____ None	Johnson & Johnson (Malaysia) Medtronic (Malaysia)

			Servier
5	Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or educational events	<input type="checkbox"/> None	As above
6	Payment for expert testimony	<input type="checkbox"/> None	PS Ranjan & Co., Malaysia
7	Support for attending meetings and/or travel	<input type="checkbox"/> None	American College of Surgeons American Society of Colon & Rectal Surgeons Malaysian Society of Colorectal Surgeons
8	Patents planned, issued or pending	<input checked="" type="checkbox"/> None	
9	Participation on a Data Safety Monitoring Board or Advisory Board	<input checked="" type="checkbox"/> None	
10	Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid	<input type="checkbox"/> None	UMSC Board of Directors UMMC Board of Management Council member, Academy of Medicine of Malaysia
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Please summarize the above conflict of interest in the following box:

<p>The above payments/support were received by me as part of academic activities with the approval of my institution.</p>

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