

ICMJE Form for Disclosure of Potential Conflicts of Interest

Instructions

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4. Intellectual Property.

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

5. Relationships not covered above.

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)
Stephanie

2. Surname (Last Name)
Yong

3. Date
03-April-2019

4. Are you the corresponding author? Yes No

5. Manuscript Title
Post-operative bleeding complications in laparoscopic sleeve gastrectomy: sources, solutions and lessons learnt from a single cohort of patients

6. Manuscript Identifying Number (if you know it)

Section 2. The Work Under Consideration for Publication

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Dr. Yong has nothing to disclose.

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Section 1. Identifying Information

1. Given Name (First Name)
Benjamin

2. Surname (Last Name)
Poh

3. Date
03-April-2019

4. Are you the corresponding author? Yes No

Corresponding Author's Name
Stephanie Yong

5. Manuscript Title
Post-operative bleeding complications in laparoscopic sleeve gastrectomy: sources, solutions and lessons learnt from a single cohort of patients

6. Manuscript Identifying Number (if you know it)

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Section 1. Identifying Information

1. Given Name (First Name)
Alvin

2. Surname (Last Name)
Eng

3. Date
03-April-2019

4. Are you the corresponding author?

Yes No

Corresponding Author's Name
Stephanie Yong

5. Manuscript Title
Post-operative bleeding complications in laparoscopic sleeve gastrectomy: sources, solutions and lessons learnt from a single cohort of patients

6. Manuscript Identifying Number (if you know it)

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Dr. Eng has nothing to disclose.

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Section 1. Identifying Information

1. Given Name (First Name) Shanker	2. Surname (Last Name) Pasupathy	3. Date 03-April-2019
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Stephanie Yong
5. Manuscript Title Post-operative bleeding complications in laparoscopic sleeve gastrectomy: sources, solutions and lessons learnt from a single cohort of patients		
6. Manuscript Identifying Number (if you know it)		

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Section 1. Identifying Information

1. Given Name (First Name)
Weng Hoong

2. Surname (Last Name)
Chan

3. Date
03-April-2019

4. Are you the corresponding author?

Yes No

Corresponding Author's Name
Stephanie Yong

5. Manuscript Title
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3. Date
03-April-2019

4. Are you the corresponding author?

Yes No

Corresponding Author's Name
Stephanie Yong

5. Manuscript Title
Post-operative bleeding complications in laparoscopic sleeve gastrectomy: sources, solutions and lessons learnt from a single cohort of patients

6. Manuscript Identifying Number (if you know it)

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Are there any relevant conflicts of interest? Yes No

Section 4. Intellectual Property -- Patents & Copyrights

Do you have any patents, whether planned, pending or issued, broadly relevant to the work? Yes No

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Dr. Lee has nothing to disclose.

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Section 1. Identifying Information

1. Given Name (First Name)
Chow Wei

2. Surname (Last Name)
Too

3. Date
03-April-2019

4. Are you the corresponding author?

Yes No

Corresponding Author's Name
Stephanie Yong

5. Manuscript Title
Post-operative bleeding complications in laparoscopic sleeve gastrectomy: sources, solutions and lessons learnt from a single cohort of patients

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Section 1. Identifying Information

1. Given Name (First Name)
Thijs

2. Surname (Last Name)
Urlings

3. Date
03-April-2019

4. Are you the corresponding author?

Yes No

Corresponding Author's Name
Stephanie Yong

5. Manuscript Title
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Section 1. Identifying Information

1. Given Name (First Name) Kwang Wei	2. Surname (Last Name) Tham	3. Date 03-April-2019
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Stephanie Yong
5. Manuscript Title Post-operative bleeding complications in laparoscopic sleeve gastrectomy: sources, solutions and lessons learnt from a single cohort of patients		
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Eugene Kee Wee

2. Surname (Last Name)
Lim

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