

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.

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name) Yukie	2. Surname (Last Name) Hayashi	3. Date 24-February-2021
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Naoki Hosoe
5. Manuscript Title A narrative review of recent progress and current perspectives on video capsule endoscopy		
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 3. Relevant financial activities outside the submitted work.

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Are there any relevant conflicts of interest? Yes No

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Section 1. Identifying Information

1. Given Name (First Name)
Naoki

2. Surname (Last Name)
Hosoe

3. Date
24-February-2021

4. Are you the corresponding author? Yes No

5. Manuscript Title
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Are there any relevant conflicts of interest? Yes No

If yes, please fill out the appropriate information below. If you have more than one entity press the "ADD" button to add a row. Excess rows can be removed by pressing the "X" button.

Name of Institution/Company	Grant?	Personal Fees?	Non-Financial Support?	Other?	Comments
Olympus	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Covidien	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

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Dr. Hosoe reports grants from Olympus, grants from Covidien, during the conduct of the study; grants from Olympus, grants from Covidien, outside the submitted work; .

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Section 1. Identifying Information

1. Given Name (First Name) Kenji JL	2. Surname (Last Name) Limpas Kamiya	3. Date 08-March-2021
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Naoki Hosoe
5. Manuscript Title A narrative review of recent progress and current perspectives on video capsule endoscopy		
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1. Given Name (First Name)
Kaoru

2. Surname (Last Name)
Takabayashi

3. Date
08-March-2021

4. Are you the corresponding author?

Yes No

Corresponding Author's Name
Naoki Hosoe

5. Manuscript Title

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Haruhiko

2. Surname (Last Name)

Ogata

3. Date

08-March-2021

4. Are you the corresponding author?

 Yes No

Corresponding Author's Name

Naoki Hosoe

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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.

Other: Anything not covered under the previous three boxes

Pending: The patent has been filed but not issued

Issued: The patent has been issued by the agency

Licensed: The patent has been licensed to an entity, whether earning royalties or not

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) Takanori	2. Surname (Last Name) Kanai	3. Date 08-March-2021
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Naoki Hosoe
5. Manuscript Title A narrative review of recent progress and current perspectives on video capsule endoscopy		
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

Section 3. Relevant financial activities outside the submitted 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**.

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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?

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