

ICMJE DISCLOSURE FORM

Date: 22nd Nov 22
 Your Name: Dr. Assok R. STHAK
 Manuscript Title: Active Surveillance - International Use
 Manuscript number (if known): 45-12-558 R1 Nov 9, 2022
MILAN PILLAI Hypertension - When is Active

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.

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	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)
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3	Royalties or licenses	<input checked="" type="checkbox"/> None
4	Consulting fees	<input checked="" type="checkbox"/> None

5	Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or educational events	<input checked="" type="checkbox"/> None	
6	Payment for expert testimony	<input checked="" type="checkbox"/> None	
7	Support for attending meetings and/or travel	<input checked="" type="checkbox"/> None	
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 checked="" type="checkbox"/> None	
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13	Other financial or non-financial interests	<input checked="" type="checkbox"/> None	

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

No Conflicts

Dr. Aswini SHARMA served as the Unpaid Editorial Board Member of Global Surgeon from August 2018 to July 2024

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.

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Date: April 11, 2023

Your Name: R Michael Tuttle

Manuscript Title: Micropapillary Thyroid Carcinoma—When Is Active Surveillance Recommended?

Manuscript number (if known): GS-22-558-R2(GS-2022-RRIES-04)

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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.	__X__ None	
Time frame: past 36 months			
2	Grants or contracts from any entity (if not indicated in item #1 above).	__X__ Elesta	Institutional support for thermal ablation of low risk papillary thyroid cancer
3	Royalties or licenses	__X__ None	
4	Consulting fees		

5	Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or educational events	<input checked="" type="checkbox"/> None	
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13	Other financial or non-financial interests	<input checked="" type="checkbox"/> None	

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Elesta provides institutional support for a 10-person pilot trial of ultrasound guided percutaneous thermal ablation of papillary thyroid microcarcinoma. I receive no personal support from Elesta.

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