

ICMJE DISCLOSURE FORM

Date: Jul. 5th, 2024
 Your Name: Okjoo Lee
 Manuscript Title: Safety and efficacy of hepaticoduodenostomy for biliary reconstruction after bile duct cancer surgery
 Manuscript number (if known): GS-24-155-CL

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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Time frame: past 36 months			
2	Grants or contracts from any entity (if not indicated in item #1 above).	__X__ None	
3	Royalties or licenses	__X__ None	
4	Consulting fees	__X__ 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:

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.

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Date: Jul. 5th, 2024
 Your Name: Cheolgu Lee
 Manuscript Title: Safety and efficacy of hepaticoduodenostomy for biliary reconstruction after bile duct cancer surgery
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Date: Jul. 5th, 2024
 Your Name: So Kyung Yoon
 Manuscript Title: Safety and efficacy of hepaticoduodenostomy for biliary reconstruction after bile duct cancer surgery
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Date: Jul. 5th, 2024
 Your Name: Jaehong Jeong
 Manuscript Title: Safety and efficacy of hepaticoduodenostomy for biliary reconstruction after bile duct cancer surgery
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