

ICMJE Form for Disclosure of Potential Conflicts of Interest

Instructions

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)
Jong-hyuk

2. Surname (Last Name)
Ahn

3. Date
19-March-2020

4. Are you the corresponding author?

Yes No

Corresponding Author's Name
Jin Wook Yi

5. Manuscript Title
Comparison between the 4K Ultra-high Definition (UHD) and High Definition (HD) Endoscopic Systems for Transoral Endoscopic Thyroidectomy

6. Manuscript Identifying Number (if you know it)
GS-19-337-JGX

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Are there any relevant conflicts of interest? Yes No

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Dr. Ahn has nothing to disclose.

Evaluation and Feedback

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Section 1. Identifying Information

1. Given Name (First Name)

Jae Hwan

2. Surname (Last Name)

Kim

3. Date

19-March-2020

4. Are you the corresponding author?

Yes No

Corresponding Author's Name

Jin Wook Yi

5. Manuscript Title

Comparison between the 4K Ultra-high Definition (UHD) and High Definition (HD) Endoscopic Systems for Transoral Endoscopic Thyroidectomy

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Dr. Kim has nothing to disclose.

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1. Given Name (First Name)

Jin Wook

2. Surname (Last Name)

Yi

3. Date

19-March-2020

4. Are you the corresponding author?

Yes No

5. Manuscript Title

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Min Hee

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Hur

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Jin Wook Yi

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