

ICMJE DISCLOSURE FORM

Date: 2022/7/30

Your Name: Peiyuan Wang

Manuscript Title: Purse-indigation mechanical anastomosis versus traditional mechanical anastomosis undergoing McKeown esophagectomy: a retrospective comparative cohort study

Manuscript number (if known): _____

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			
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3	Royalties or licenses	__X__ None	
4	Consulting fees	__X__ None	

5	Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or educational events	<input checked="" type="checkbox"/> None	
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I certify that I have answered every question and have not altered the wording of any of the questions on this form.

ICMJE DISCLOSURE FORM

Date: 2022/7/30

Your Name: Derong Zhang

Manuscript Title: Purse-indigitation mechanical anastomosis versus traditional mechanical anastomosis undergoing McKeown esophagectomy: a retrospective comparative cohort study

Manuscript number (if known): _____

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ICMJE DISCLOSURE FORM

Date: 2022/7/30

Your Name: Xiaozhou Lin

Manuscript Title: Purse-indigation mechanical anastomosis versus traditional mechanical anastomosis undergoing McKeown esophagectomy: a retrospective comparative cohort study

Manuscript number (if known): _____

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ICMJE DISCLOSURE FORM

Date: 2022/7/30

Your Name: Yujie Chen

Manuscript Title: Purse-indigation mechanical anastomosis versus traditional mechanical anastomosis undergoing McKeown esophagectomy: a retrospective comparative cohort study

Manuscript number (if known): _____

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ICMJE DISCLOSURE FORM

Date: 2022/7/30

Your Name: Hao He

Manuscript Title: Purse-indigation mechanical anastomosis versus traditional mechanical anastomosis undergoing McKeown esophagectomy: a retrospective comparative cohort study

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ICMJE DISCLOSURE FORM

Date: 2022/7/30

Your Name: Peng Chen

Manuscript Title: Purse-indigation mechanical anastomosis versus traditional mechanical anastomosis undergoing McKeown esophagectomy: a retrospective comparative cohort study

Manuscript number (if known): _____

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ICMJE DISCLOSURE FORM

Date: 2022/7/30

Your Name: Weijie Chen

Manuscript Title: Purse-indigation mechanical anastomosis versus traditional mechanical anastomosis undergoing McKeown esophagectomy: a retrospective comparative cohort study

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Date: 2022/7/30

Your Name: Hang Zhou

Manuscript Title: Purse-indigation mechanical anastomosis versus traditional mechanical anastomosis undergoing McKeown esophagectomy: a retrospective comparative cohort study

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Date: 2022/7/30

Your Name: Suyu Chen

Manuscript Title: Purse-indigation mechanical anastomosis versus traditional mechanical anastomosis undergoing McKeown esophagectomy: a retrospective comparative cohort study

Manuscript number (if known): _____

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Date: 2022/7/30

Your Name: Zhen Chen

Manuscript Title: Purse-indigation mechanical anastomosis versus traditional mechanical anastomosis undergoing McKeown esophagectomy: a retrospective comparative cohort study

Manuscript number (if known): _____

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ICMJE DISCLOSURE FORM

Date: 07/27/2022

Your Name: Raja Flores

Manuscript Title: **Purse-indigitation mechanical anastomosis versus traditional mechanical anastomosis undergoing McKeown esophagectomy: a retrospective comparative cohort study**

Manuscript number (if known): _____

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12	Receipt of equipment, materials, drugs, medical writing, gifts or other services	<input checked="" type="checkbox"/> None	
13	Other financial or non-financial interests	<input checked="" type="checkbox"/> None	

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

I have no conflicts of interest to disclose.

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.

ICMJE DISCLOSURE FORM

Date: 2022/7/29

Your Name: Connor J. Wakefield

Manuscript Title: Purse-indigitation mechanical anastomosis versus traditional mechanical anastomosis undergoing McKeown esophagectomy: a retrospective comparative cohort study

Manuscript number (if known): _____

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.

The following questions apply to the author's relationships/activities/interests as they relate to the current manuscript only.

The author's relationships/activities/interests should be defined broadly. For example, if your manuscript pertains to the epidemiology of hypertension, you should declare all relationships with manufacturers of antihypertensive medication, even if that medication is not mentioned in the manuscript.

In item #1 below, report all support for the work reported in this manuscript without time limit. For all other items, the time frame for disclosure is the past 36 months.

		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)
Time frame: Since the initial planning of the work			
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__None	
3	Royalties or licenses	__X__None	
4	Consulting fees	__X__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	
11	Stock or stock options	<input checked="" type="checkbox"/> None	
12	Receipt of equipment, materials, drugs, medical writing, gifts or other services	<input checked="" type="checkbox"/> None	
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.

ICMJE DISCLOSURE FORM

Date: 2022/7/29
 Your Name: Inderpal S. Sarkaria
 Manuscript Title: Purse-indigitation mechanical anastomosis versus traditional mechanical anastomosis undergoing McKeown esophagectomy: a retrospective comparative cohort study
 Manuscript number (if known): _____

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).	<u> X </u> None	
3	Royalties or licenses	<u> X </u> None	
4	Consulting fees	<u> X </u> None	

5	Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or educational events	Intuitive Surgical, CMR, Stryker, and AMSI.	
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	
11	Stock or stock options	<input checked="" type="checkbox"/> None	
12	Receipt of equipment, materials, drugs, medical writing, gifts or other services	<input checked="" type="checkbox"/> None	
13	Other financial or non-financial interests	<input checked="" type="checkbox"/> None	

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

Dr. ISS has received honoraria for education/speaking and/or consulting from Intuitive Surgical, CMR, Stryker, and AMSI.

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.

ICMJE DISCLOSURE FORM

Date: 2022/7/30

Your Name: Shuoyan Liu

Manuscript Title: Purse-indigation mechanical anastomosis versus traditional mechanical anastomosis undergoing McKeown esophagectomy: a retrospective comparative cohort study

Manuscript number (if known): _____

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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3	Royalties or licenses	__X__ None	
4	Consulting fees	__X__ None	

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	

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

None

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I certify that I have answered every question and have not altered the wording of any of the questions on this form.

ICMJE DISCLOSURE FORM

Date: 2022/7/30

Your Name: Feng Wang

Manuscript Title: Purse-indigation mechanical anastomosis versus traditional mechanical anastomosis undergoing McKeown esophagectomy: a retrospective comparative cohort study

Manuscript number (if known): _____

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3	Royalties or licenses	__X__ None	
4	Consulting fees	__X__ None	

5	Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or educational events	<input checked="" type="checkbox"/> None	
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8	Patents planned, issued or pending	<input checked="" type="checkbox"/> None	
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None

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