Date:__June 4th, 2021 Your Name: Andres Obeso

Manuscript Title: VATS right lower lobe common basal segmentectomy (S7-S8-S9-S10)

Manuscript number (if known): JOVS-21-32

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 <u>current</u>

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)
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.	Time frame: Since the initiaNone	l planning of the work
	Grants or contracts from any entity (if not indicated in item #1 above).	Time frame: past 3	36 months
	Royalties or licenses	None	
	Consulting fees	None	

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5	Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or	Astrazeneca	Lecture about the role of surgery in oligometastatic lung cancer
	educational events		
6	Payment for expert testimony	Corza	Meeting about Tachosyl
7	Support for attending meetings and/or travel	None	
8	Patents planned, issued or	None	
	pending		
9	Participation on a Data	None	
	Safety Monitoring Board or Advisory Board		
10	Leadership or fiduciary role	GECT	Coordinator or the Emergent Group of Thoracic Surgery
	in other board, society, committee or advocacy group, paid or unpaid	SEPAR	Secreatry of the Thoracic Surgery Area of the Spanish Society of Pulmonology and Thoracic Surgery (SEPAR)
11	Stock or stock options	None	
12	Receipt of equipment, materials, drugs, medical writing, gifts or other services	None	
13	Other financial or non- financial interests	None	

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

Colaboration with Astrazeneca and Corza. Coordinator of GECT. Secretary of the Thoracic Surgery Area of SEPAR.

Please place an "X" next to the following statement to indicate your agreement:

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

Date: 9th June, 2021. Your Name: Carlos Galvez

Manuscript Title: VATS right lower lobe common basal segmentectomy (S7-S8-S9-S10)

Manuscript number (if known): JOVS-2021-VATSS-09 (JOVS-21-32)

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		Name all entities with whom you have this relationship or indicate none (add rows as needed) Time frame: Since the initial	Specifications/Comments (e.g., if payments were made to you or to your institution)
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.	None None	
2	Grants or contracts from any entity (if not indicated in item #1 above).	None None	36 months
	Royalties or licenses		
4	Consulting fees	None	

5	Payment or honoraria for	None	
	lectures, presentations,		
	speakers bureaus,		
	manuscript writing or		
	educational events		
_		None	
6	Payment for expert	None	
	testimony		
7	Support for attending	None	
	meetings and/or travel		
8	Patents planned, issued or	None	
	pending		
9	Participation on a Data Safety Monitoring Board or	None	
	Advisory Board		
10	Leadership or fiduciary role	None	
	in other board, society,		
	committee or advocacy		
	group, paid or unpaid		
11	Stock or stock options	None	
12	Receipt of equipment,	None	
	materials, drugs, medical		
	writing, gifts or other		
	services		
13	Other financial or non-	None	
	financial interests		
Ple	ease summarize the above o	conflict of interest in t	he following box:

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

J.lul/h

Date: 9th June, 2021. Your Name: Eduardo Rivo

Manuscript Title: VATS right lower lobe common basal segmentectomy (S7-S8-S9-S10)

Manuscript number (if known): JOVS-2021-VATSS-09 (JOVS-21-32)

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

5	Payment or honoraria for	None	
	lectures, presentations, speakers bureaus, manuscript writing or		
6	educational events Payment for expert	None	
	testimony	None	
7	Support for attending meetings and/or travel	None	
8	Patents planned, issued or pending	None	
9	Participation on a Data	None	
	Safety Monitoring Board or Advisory Board		
10	Leadership or fiduciary role in other board, society, committee or advocacy	None	
	group, paid or unpaid		
11	Stock or stock options	None	
12	Receipt of equipment,	None	
	materials, drugs, medical writing, gifts or other services		
13	Other financial or non- financial interests	None	

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



Date: 9th June, 2021.

Your Name: Jorge Quiroga

Manuscript Title: VATS right lower lobe common basal segmentectomy (S7-S8-S9-S10)

Manuscript number (if known): JOVS-2021-VATSS-09 (JOVS-21-32)

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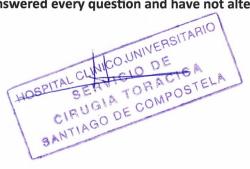
The following questions apply to the author's relationships/activities/interests as they relate to the <u>current manuscript only</u>.

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

5	Payment or honoraria for	None
	lectures, presentations,	
	speakers bureaus,	
	manuscript writing or	
	educational events	
6	Payment for expert	None
	testimony	
7	Support for attending	None
	meetings and/or travel	
	and a second	
•		
8	Patents planned, issued or	None
	pending	
_		
9	Participation on a Data	None
	Safety Monitoring Board or	
	Advisory Board	
10	Leadership or fiduciary role	None
	in other board, society,	
	committee or advocacy	
2011010	group, paid or unpaid	
11	Stock or stock options	None
12	Receipt of equipment,	None
	materials, drugs, medical	
	writing, gifts or other	
	services	
13	Other financial or non-	None
	financial interests	

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



Date: 9th June, 2021.

Your Name: Jose María García Prim

Manuscript Title: VATS right lower lobe common basal segmentectomy (S7-S8-S9-S10)

Manuscript number (if known): JOVS-2021-VATSS-09 (JOVS-21-32)

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		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.	None	
	。 1985年 - 1985年 -	Time frame: past	36 months
2	Grants or contracts from any entity (if not indicated in item #1 above).	None	
3	Royalties or licenses	None	
4	Consulting fees	None	

5	Payment or honoraria for	None
	lectures, presentations,	
	speakers bureaus,	
	manuscript writing or	
	educational events	
6	Payment for expert	None
	testimony	
7	Support for attending meetings and/or travel	None
	meetings and/or travel	
8	Patents planned, issued or	None
	pending	
9	Participation on a Data	None
	Safety Monitoring Board or	
	Advisory Board	
10	Leadership or fiduciary role	None
	in other board, society,	
	committee or advocacy	
11	group, paid or unpaid Stock or stock options	Mana
11	Stock or stock options	None
12	Receipt of equipment,	None
12	materials, drugs, medical	None
	writing, gifts or other	
	services	
13	Other financial or non-	None
13	financial interests	Notic
	manda meess	

Please summariz	e the above conflict of in	terest in the follo	owing box:	

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

