

Instructions

The purpose of this form is to provide readers of your manuscript with information about your other interests that could influence how they receive and understand your work. The form is designed to be completed electronically and stored electronically. It contains programming that allows appropriate data display. Each author should submit a separate form and is responsible for the accuracy and completeness of the submitted information. The form is in six parts.

Identifying information.

2. The work under consideration for publication.

This section asks for information about the work that you have submitted for publication. The time frame for this reporting is that of the work itself, from the initial conception and planning to the present. The requested information is about resources that you received, either directly or indirectly (via your institution), to enable you to complete the work. Checking "No" means that you did the work without receiving any financial support from any third party -- that is, the work was supported by funds from the same institution that pays your salary and that institution did not receive third-party funds with which to pay you. If you or your institution received funds from a third party to support the work, such as a government granting agency, charitable foundation or commercial sponsor, check "Yes".

3. Relevant financial activities outside the submitted work.

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4. Intellectual Property.

This section asks about patents and copyrights, whether pending, issued, licensed and/or receiving royalties.

Relationships not covered above.

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Royalties: Funds are coming in to you or your institution due to your patent

Juvet 1



Section 1. Identifying Inform	nation	
1. Given Name (First Name) Tristan	2. Surname (Last Name) Juvet	3. Date 01-June-2020
4. Are you the corresponding author?	Yes V No	Corresponding Author's Name Aaron Potretzke
5. Manuscript Title Robot-assisted partial nephrectomy is s surgeons	afe and effective for comp	olex renal masses when performed by experienced
6. Manuscript Identifying Number (if you kr TAU-20-865(E2020030454-30898407)	now it)	_
Section 2. The Work Under Co		
Did you or your institution at any time rece any aspect of the submitted work (including statistical analysis, etc.)? Are there any relevant conflicts of intere	but not limited to grants, da	a third party (government, commercial, private foundation, etc.) for ta monitoring board, study design, manuscript preparation,
Section 3. Relevant financial	activities outside the s	ubmitted work.
of compensation) with entities as descri	ibed in the instructions. Us port relationships that wer	ether you have financial relationships (regardless of amount se one line for each entity; add as many lines as you need by re present during the 36 months prior to publication.
Section 4. Intellectual Proper	rty Patents & Copyric	uhts
Intellectual F10pel	rty Tatents & copyrig	<u></u>
Do you have any patents, whether plan	ned, pending or issued, br	oadly relevant to the work? Yes V No

Juvet 2



Section 5.				
Section 5.	Relationships not covered above			
	elationships or activities that readers could perceive to have influenced, or that give the appearance of ncing, what you wrote in the submitted work?			
Yes, the following relationships/conditions/circumstances are present (explain below):				
✓ No other relat	tionships/conditions/circumstances that present a potential conflict of interest			
	nuscript acceptance, journals will ask authors to confirm and, if necessary, update their disclosure statements nals may ask authors to disclose further information about reported relationships.			
Section 6.	Disclosure Statement			
Based on the abo below.	ve disclosures, this form will automatically generate a disclosure statement, which will appear in the box			
Dr. Juvet has not	hing to disclose.			

Evaluation and Feedback

Please visit http://www.icmje.org/cgi-bin/feedback to provide feedback on your experience with completing this form.

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Thompson 1



Section 1.	Identifying Inform	nation		
1. Given Name (Fi	rst Name)	2. Surname (Last Name) Thompson	3. Date 03-June-2020	
4. Are you the cor	responding author?	☐ Yes ✓ No	Corresponding Author's Name Aaron Potretzke	
5. Manuscript Title Robot-assisted p surgeons		safe and effective for comp	elex renal masses when performed by experienced	
	ntifying Number (if you kr 20030454-30898407)	now it)		
Section 2				
Section 2.	The Work Under C	onsideration for Public	ation	
Did you or your institution at any time receive payment or services from a third party (government, commercial, private foundation, etc.) for any aspect of the submitted work (including but not limited to grants, data monitoring board, study design, manuscript preparation, statistical analysis, etc.)? Are there any relevant conflicts of interest? Yes No				
	ı			
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Place a check in the appropriate boxes in the table to indicate whether you have financial relationships (regardless of amount of compensation) with entities as described in the instructions. Use one line for each entity; add as many lines as you need by clicking the "Add +" box. You should report relationships that were present during the 36 months prior to publication . Are there any relevant conflicts of interest? Yes V				
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	intellectual Propel	rty ratents & copyrig	1115	
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Potretzke 1



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1. Given Name (First Name) Aaron	2. Surname (Last Name) Potretzke	3. Date 02-June-2020		
4. Are you the corresponding author?	✓ Yes No			
5. Manuscript Title Robot-assisted partial nephrectomy is safe and effective for complex renal masses when performed by experienced surgeons				
6. Manuscript Identifying Number (if you know it) TAU-20-865(E2020030454-30898407)				
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