

#### **Instructions**

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Goßler 1



Section 1. Identifying Inform	nation	
Given Name (First Name) Christopher	2. Surname (Last Name) Goßler	3. Date 30-November-2020
4. Are you the corresponding author?	✓ Yes No	
5. Manuscript Title Epidemiology and therapy of symptom	atic lymphoceles after robot-assisted radical prostate	ovesiculectomy (RARP)
6. Manuscript Identifying Number (if you kr TAU-20-1315	now it)	
Section 2. The Work Under Co	onsideration for Publication	
	ive payment or services from a third party (government, cog but not limited to grants, data monitoring board, study doest?	
Section 3. Relevant financial	activities outside the submitted work.	
of compensation) with entities as descri	in the table to indicate whether you have financial relibed in the instructions. Use one line for each entity; port relationships that were <b>present during the 36 r</b> est?	add as many lines as you need by
Section 4. Intellectual Bronou	. Detects 0.5 cm in the	
intellectual Proper	rty Patents & Copyrights	
Do you have any patents, whether plan	ned, pending or issued, broadly relevant to the work	? ☐ Yes ✓ No

Goßler 2



Section 5. Polationships not sovered above
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Dr. Goßler has nothing to disclose.

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patent

Hillinger 1



Section 1. Identifying Inform	nation	
Given Name (First Name)  Johannes	2. Surname (Last Name) Hillinger	3. Date 08-October-2020
4. Are you the corresponding author?	☐ Yes ✓ No	Corresponding Author's Name Christopher Goßler
5. Manuscript Title Epidemiology and therapy of symptom	natic lymphoceles after rob	pot-assisted radical prostatovesiculectomy (RARP)
6. Manuscript Identifying Number (if you ki TAU-20-1315	now it)	_
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Section 3. Relevant financial	activities outside the s	submitted work.
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Hillinger 2



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Burger 1



Section 1. Identifying Inform	nation	
Given Name (First Name)     Maximilian	2. Surname (Last Name) Burger	3. Date 03-December-2020
4. Are you the corresponding author?	☐ Yes ✓ No	Corresponding Author's Name Christopher Goßler
5. Manuscript Title Epidemiology and therapy of symptom	natic lymphoceles after rob	ot-assisted radical prostatovesiculectomy (RARP)
6. Manuscript Identifying Number (if you kr TAU-20-1315	now it)	_
Section 2. The Work Under C	onsideration for Public	ation
any aspect of the submitted work (including statistical analysis, etc.)? Are there any relevant conflicts of inter	g 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.
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Do you have any patents, whether plan		

Burger 2



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Bründl 1



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Bründl 2



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Denzinger 1



Section 1.	Identifying Inform	nation			
1. Given Name (Fii Stefan	rst Name)	2. Surname Denzinger	e (Last Name)		3. Date 01-December-2020
4. Are you the cor	responding author?	Yes	<b>√</b> No	Corresponding Author's Nar Christopher Goßler	me
5. Manuscript Title Epidemiology ar		natic lympho	celes after rob	oot-assisted radical prostato	vesiculectomy (RARP)
6. Manuscript Ider	ntifying Number (if you kr	now it)		_	
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Section 2.	The Work Under C	onsideratio	on for Publi	cation	
any aspect of the s statistical analysis,	ubmitted work (including	g but not limite	ed to grants, da	a third party (government, cor ata monitoring board, study de:	mmercial, private foundation, etc.) for sign, manuscript preparation,
Section 3.	Relevant financial	activities o	outside the s	submitted work.	
of compensation clicking the "Add	n) with entities as descr	ibed in the ir port relations	nstructions. Us ships that we	se one line for each entity; a	ationships (regardless of amount dd as many lines as you need by nonths prior to publication.
Section 4.	Intellectual Prope	yty Daton	ts & Convei	white	
Do you have any				roadly relevant to the work?	Yes 🗸 No

Denzinger 2



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patent

Gierth 1



Section 1. Identifying Inform	nation	
Given Name (First Name)  Michael	2. Surname (Last Name) Gierth	3. Date 11-November-2020
4. Are you the corresponding author?	Yes ✓ No	Corresponding Author's Name Christopher Goßler
5. Manuscript Title Epidemiology and therapy of symptom	atic lymphoceles after rob	ot-assisted radical prostatovesiculectomy (RARP)
6. Manuscript Identifying Number (if you kr TAU-20-1315	now it)	_
Section 2. The World Under C		
The Work Under Co	onsideration for Public	ation
any aspect of the submitted work (including statistical analysis, etc.)? Are there any relevant conflicts of intere	g but not limited to grants, da	a third party (government, commercial, private foundation, etc.) for ta monitoring board, study design, manuscript preparation,
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 & Copyri <u>c</u>	yhts
Do you have any patents, whether plan	.,	

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Section 5. Polationships not solvered phase
Relationships not covered above
Are there other relationships or activities that readers could perceive to have influenced, or that give the appearance of potentially influencing, what you wrote in the submitted work?
Yes, the following relationships/conditions/circumstances are present (explain below):
✓ No other relationships/conditions/circumstances that present a potential conflict of interest
At the time of manuscript acceptance, journals will ask authors to confirm and, if necessary, update their disclosure statements On occasion, journals may ask authors to disclose further information about reported relationships.
Section 6. Disclosure Statement
Based on the above disclosures, this form will automatically generate a disclosure statement, which will appear in the box below.
Dr. Gierth has nothing to disclose.

### **Evaluation and Feedback**

Please visit <a href="http://www.icmje.org/cgi-bin/feedback">http://www.icmje.org/cgi-bin/feedback</a> to provide feedback on your experience with completing this form.

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#### **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.

### 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

### Relevant financial activities outside the submitted work.

This section asks about your financial relationships with entities in the bio-medical arena that could be perceived to influence, or that give the appearance of potentially influencing, what you wrote in the submitted work. You should disclose interactions with ANY entity that could be considered broadly relevant to the work. For example, if your article is about testing an epidermal growth factor receptor (EGFR) antagonist in lung cancer, you should report all associations with entities pursuing diagnostic or therapeutic strategies in cancer in general, not just in the area of EGFR or lung cancer.

Report all sources of revenue paid (or promised to be paid) directly to you or your institution on your behalf over the 36 months prior to submission of the work. This should include all monies from sources with relevance to the submitted work, not just monies from the entity that sponsored the research. Please note that your interactions with the work's sponsor that are outside the submitted work should also be listed here. If there is any question, it is usually better to disclose a relationship than not to do so.

For grants you have received for work outside the submitted work, you should disclose support ONLY from entities that could be perceived to be affected financially by the published work, such as drug companies, or foundations supported by entities that could be perceived to have a financial stake in the outcome. Public funding sources, such as government agencies, charitable foundations or academic institutions, need not be disclosed. For example, if a government agency sponsored a study in which you have been involved and drugs were provided by a pharmaceutical company, you need only list the pharmaceutical company.

## **Intellectual Property.**

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

## Relationships not covered above.

Use this section to report other relationships or activities that readers could perceive to have influenced, or that give the appearance of potentially influencing, what you wrote in the submitted work.

#### Definitions.

**Entity:** government agency, foundation, commercial sponsor, academic institution, etc.

Grant: A grant from an entity, generally [but not always] paid to your organization

**Personal Fees:** Monies paid to you for services rendered, generally honoraria, royalties, or fees for consulting, lectures, speakers bureaus, expert testimony, employment, or other affiliations

Non-Financial Support: Examples include drugs/equipment supplied by the entity, travel paid by the entity, writing assistance, administrative support, etc.

Other: Anything not covered under the previous three boxes

Pending: The patent has been filed but not issued **Issued:** The patent has been issued by the agency

Licensed: The patent has been licensed to an entity, whether

earning royalties or not

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

patent

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Section 1.	Identifying Inform	dentifying Information			
Given Name (First Name)  Johannes		2. Surname (Last Name) Breyer		3. Date 01-December-2020	
4. Are you the corresponding author?		Yes	<b>✓</b> No	Corresponding Author's Name Christopher Goßler	
5. Manuscript Title Epidemiology and therapy of symptomatic lymphoceles after robot-assisted radical prostatovesiculectomy (RARP)					
6. Manuscript Identifying Number (if you know it) TAU-20-1315					
Section 2. The Work Under Consideration for Publication					
Did you or your institution <b>at any time</b> 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  You					
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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 <b>present during the 36 months prior to publication</b> .  Are there any relevant conflicts of interest? Yes Vo					
Section 4.	Intellectual Proper	rty Pa <u>te</u>	nts & Copyric	hts	
Do you have any patents, whether planned, pending or issued, broadly relevant to the work? Yes Vo					

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Section 5. Polationships not solvered phase				
Relationships not covered above				
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Dr. Breyer has nothing to disclose.				

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