

ICMJE DISCLOSURE FORM

Date: 7/27/2021

Your Name: Da In Lee

Manuscript Title: **Huge intrasphenoidal Rathke’s cleft cyst: A Case description and analysis of the Literature**

Manuscript Number (if known): QIMS-23-780-R1

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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Your Name: Kyung Mi Lee

Manuscript Title: **Huge intrasphenoidal Rathke’s cleft cyst: A Case description and analysis of the Literature**

Manuscript Number (if known): QIMS-23-780-R1

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