Date: May 17 th , 2021	_
Your Name: Sirilak Suksompong	
Manuscript Title: Low Dose Intraoperative Ketamine Infusion with Multilevel Paravertebral Block for Pain	after Video
assisted Thoracic Surgery: A Randomized-Controlled Study	
Manuscript number (if known): APM-21-766-CL	

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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		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 initia	l 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.	XNone	
		Time frame: past	36 months
2	Grants or contracts from any entity (if not indicated in item #1 above).	XNone	
3	Royalties or licenses	X_None	
4	Consulting fees	XNone	

5	Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or educational events Payment for expert testimony	XNoneXNone
7	Support for attending meetings and/or travel	XNone
8	Patents planned, issued or pending	XNone
9	Participation on a Data Safety Monitoring Board or Advisory Board	XNone
10	Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid	XNone
11	Stock or stock options	XNone
12	Receipt of equipment, materials, drugs, medical writing, gifts or other services	X_None
13	Other financial or non- financial interests	XNone

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: _	May	<i>1</i> 9,	2021		
Your N	ame: _		Nophanan Chaikittisilpa		
Manus	cript Ti	tle:	Low Dose Intraoperative Ketamine Infusion with Multilevel Paravertebral Block for Pain	<u>after</u>	Video
<u>assiste</u>	d Thora	cic	Surgery: A Randomized-Controlled Study		_
Manus	cript nu	ımb	er (if known): APM-21-766-CL		

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

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Nof hanan Chaikithisi pa

Date: May 17	^h , 2021
Your Name:	Suthatip Wanchiang
Manuscript Title:	Low Dose Intraoperative Ketamine Infusion with Multilevel Paravertebral Block for Pain after Video-
assisted Thoracic	Surgery: A Randomized-Controlled Study
Manuscript numb	er (if known): APM-21-766-CL

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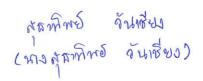
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1980 CV	Advisory Board		
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Your N	lame:	Suppachai	Poolsuppasit							
Manus	script Tit	le: Low Dose	<u>Intraoperative</u>	Ketamine Infusion	with Mult	ilevel Paravert	ebral Block f	or Pain	after \	Video
assiste	d Thora	cic Surgery: A	Randomized-C	ontrolled Study				_		
Manus	script nu	ımber (if knov	vn):						_	

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11	Stock or stock options	XNone	
12	Receipt of equipment,	X_None	
	materials, drugs, medical		
	writing, gifts or other		
	services		
13	Other financial or non-	X None	
	financial interests		

None.			

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Suppachai Poolsuppasit

Date: May 1	7 th , 2021
Your Name:	Punnarerk Thongcharoen
Manuscript Title	: Low Dose Intraoperative Ketamine Infusion with Multilevel Paravertebral Block for Pain after Video-
assisted Thoraci	: Surgery: A Randomized-Controlled Study
Manuscript num	ber (if known): APM-21-766-CL

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	,		
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P. mych

Date: _	May 1	7 th , 2021	
Your Na	ame:	Panop Limratana	
Manus	cript Title	e: Low Dose Intraoperative Ketamine Infusion with Multilevel Paravertebral Block for Pain af	ter Video-
assiste	d Thorac	ic Surgery: A Randomized-Controlled Study	
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