

## ICMJE DISCLOSURE FORM

Date: 9<sup>th</sup> May, 2021

Your Name: Tae Kyun Kim

Manuscript Title: Comparison of the effect of electromyogram activity during emergence on anesthetic depth monitoring between phase lag entropy and bispectral index: A prospective observational study

Manuscript number (if known): APM-21-847

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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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)
<b>Time frame: Since the initial planning of the work</b>			
1	All support for the present manuscript (e.g., funding, provision of study materials, medical writing, article processing charges, etc.) <b>No time limit for this item.</b>	Inbody Co., Ltd, Seoul, Korea	
<b>Time frame: past 36 months</b>			
2	Grants or contracts from any entity (if not indicated in item #1 above).	<input checked="" type="checkbox"/> None	
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11	Stock or stock options	<input checked="" type="checkbox"/> None	
12	Receipt of equipment, materials, drugs, medical writing, gifts or other services	<input checked="" type="checkbox"/> None	
13	Other financial or non-financial interests	<input checked="" type="checkbox"/> None	

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

The author reports funding from Inbody Co., Ltd, Seoul, Korea.

**Please place an “X” next to the following statement to indicate your agreement:**

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

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Date: 9<sup>th</sup> May, 2021

Your Name: Sang-Wook Shin

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Date: 9<sup>th</sup> May, 2021

Your Name: Hye-Jin Kim

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## ICMJE DISCLOSURE FORM

Date: 9<sup>th</sup> May, 2021

Your Name: Eun-Ji Choi

Manuscript Title: Comparison of the effect of electromyogram activity during emergence on anesthetic depth monitoring between phase lag entropy and bispectral index: A prospective observational study

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Date: 9<sup>th</sup> May, 2021

Your Name: Seyeon Park

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Date: 9<sup>th</sup> May, 2021

Your Name: So Hyun Kim

Manuscript Title: Comparison of the effect of electromyogram activity during emergence on anesthetic depth monitoring between phase lag entropy and bispectral index: A prospective observational study

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Date: 9<sup>th</sup> May, 2021

Your Name: Yeong Min Yoo

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