

ICMJE DISCLOSURE FORM

Date: November 30, 2021
 Your Name: Toshiro Ogata (1 of 12)
 Manuscript Title: Colorectal cancer surgery in elderly patients 80 years and older:
 a comparison with younger age groups
 Manuscript number (if known): ID: JGO-21-627-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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Date: November 30, 2021
 Your Name: Naohiro Yoshida (2 of 12)
 Manuscript Title: Colorectal cancer surgery in elderly patients 80 years and older:
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Date: November 30, 2021
 Your Name: Yoshihiko Sadakari (3 of 12)
 Manuscript Title: Colorectal cancer surgery in elderly patients 80 years and older:
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Date: November 30, 2021
 Your Name: Ayako Iwanaga (4 of 12)
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 Your Name: Hiroyuki Nakane (5 of 12)
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 Your Name: Kazuma Okawara (6 of 12)
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7	Support for attending meetings and/or travel	<u> X </u> None	
8	Patents planned, issued or pending	<u> X </u> None	
9	Participation on a Data Safety Monitoring Board or Advisory Board	<u> X </u> None	
10	Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid	<u> X </u> None	
11	Stock or stock options	<u> X </u> None	
12	Receipt of equipment, materials, drugs, medical writing, gifts or other services	<u> X </u> None	
13	Other financial or non-financial interests	<u> X </u> None	

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

None.

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.

ICMJE DISCLOSURE FORM

Date: November 30, 2021
 Your Name: Masahiko Taniguchi (12 of 12)
 Manuscript Title: Colorectal cancer surgery in elderly patients 80 years and older:
 a comparison with younger age groups
 Manuscript number (if known): ID: JGO-21-627-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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Time frame: Since the initial planning of the work			
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3	Royalties or licenses	<u> X </u> None	
4	Consulting fees	<u> X </u> None	

5	Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or educational events	<u> X </u> None	
6	Payment for expert testimony	<u> X </u> None	
7	Support for attending meetings and/or travel	<u> X </u> None	
8	Patents planned, issued or pending	<u> X </u> None	
9	Participation on a Data Safety Monitoring Board or Advisory Board	<u> X </u> None	
10	Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid	<u> X </u> None	
11	Stock or stock options	<u> X </u> None	
12	Receipt of equipment, materials, drugs, medical writing, gifts or other services	<u> X </u> None	
13	Other financial or non-financial interests	<u> X </u> None	

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

None.

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