

ICMJE DISCLOSURE FORM

Date: Jan.12, 2023

Your Name: Duohuo Shu

Manuscript Title: Structured training curricula for robotic colorectal surgery in China: Does laparoscopic experience affect training effects?

Manuscript number (if known): _____

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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ICMJE DISCLOSURE FORM

Date: Jan.12, 2023

Your Name: Zhenghao Cai

Manuscript Title: Structured training curricula for robotic colorectal surgery in China: Does laparoscopic experience affect training effects?

Manuscript number (if known): _____

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ICMJE DISCLOSURE FORM

Date: Jan.12, 2023
 Your Name: Xiang Yin
 Manuscript Title: Structured training curricula for robotic colorectal surgery in China: Does laparoscopic experience affect training effects?
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ICMJE DISCLOSURE FORM

Date: Jan.12, 2023
 Your Name: Minhua Zheng
 Manuscript Title: Structured training curricula for robotic colorectal surgery in China: Does laparoscopic experience affect training effects?
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Date: Jan.12, 2023

Your Name: Jianwen Li

Manuscript Title: Structured training curricula for robotic colorectal surgery in China: Does laparoscopic experience affect training effects?

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Date: Jan.12, 2023
 Your Name: Xiao Yang
 Manuscript Title: Structured training curricula for robotic colorectal surgery in China: Does laparoscopic experience affect training effects?
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Date: Jan.12, 2023

Your Name: Sen Zhang

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Date: Jan.12, 2023
 Your Name: Wei Qin
 Manuscript Title: Structured training curricula for robotic colorectal surgery in China: Does laparoscopic experience affect training effects?
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ICMJE DISCLOSURE FORM

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Your Name: Ximo Xu

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Date: Jan.12, 2023
 Your Name: Yugui Lian
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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: Jan.12, 2023

Your Name: Jianping Zhou

Manuscript Title: Structured training curricula for robotic colorectal surgery in China: Does laparoscopic experience affect training effects?

Manuscript number (if known): _____

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)
Time frame: Since the initial 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.	<u>__X__</u> None	
Time frame: past 36 months			
2	Grants or contracts from any entity (if not indicated in item #1 above).	<u>__X__</u> None	
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	
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13	Other financial or non-financial interests	<u> X </u> None	

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ICMJE DISCLOSURE FORM

Date: Jan.12, 2023

Your Name: Changqing Jing

Manuscript Title: Structured training curricula for robotic colorectal surgery in China: Does laparoscopic experience affect training effects?

Manuscript number (if known): _____

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ICMJE DISCLOSURE FORM

Date: Jan.12, 2023

Your Name: Bo Feng

Manuscript Title: Structured training curricula for robotic colorectal surgery in China: Does laparoscopic experience affect training effects?

Manuscript number (if known): _____

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