ICMJE DISCLOSURE FORM

Date:__8th/1/2022_____
Your Name:__Taku Matsumoto_____
Manuscript Title:_Laparoscopic cholecystectomy in a patient with situs inversus totalis: Report of a case with surgical tips___
Manuscript number (if known):__ ASJ-21-106_____

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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4	Consulting fees	_X_None	

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11	Stock or stock options	_X_None	
12	Receipt of equipment, materials, drugs, medical writing, gifts or other services	_X_None	
13	Other financial or non-financial interests	_X_None	

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

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Date:__8th/1/2022_____
Your Name:__Taisuke Okawa_____
Manuscript Title:_Laparoscopic cholecystectomy in a patient with situs inversus totalis: Report of a case with surgical tips___
Manuscript number (if known):__ ASJ-21-106_____

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Date:__8th/1/2022_____
Your Name:__Yu Asakura_____
Manuscript Title:_Laparoscopic cholecystectomy in a patient with situs inversus totalis: Report of a case with surgical tips___
Manuscript number (if known):__ ASJ-21-106_____

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Date:__8th/1/2022_____
Your Name:__Hiroki Sakamoto_____
Manuscript Title:_Laparoscopic cholecystectomy in a patient with situs inversus totalis: Report of a case with surgical tips___
Manuscript number (if known):__ ASJ-21-106_____

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Date:__8th/1/2022_____
Your Name:__Akira Arimoto_____
Manuscript Title:_Laparoscopic cholecystectomy in a patient with situs inversus totalis: Report of a case with surgical tips___
Manuscript number (if known):__ ASJ-21-106_____

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Date:__8th/1/2022_____
Your Name:__Kunio Yokoyama_____
Manuscript Title:_Laparoscopic cholecystectomy in a patient with situs inversus totalis: Report of a case with surgical tips___
Manuscript number (if known):__ ASJ-21-106_____

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Date:__8th/1/2022_____
Your Name:__Nozomi Ueno_____
Manuscript Title:_Laparoscopic cholecystectomy in a patient with situs inversus totalis: Report of a case with surgical tips___
Manuscript number (if known):__ ASJ-21-106_____

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Date:__8th/1/2022_____
Your Name:__Takuro Yoshikawa_____
Manuscript Title:_Laparoscopic cholecystectomy in a patient with situs inversus totalis: Report of a case with surgical tips___
Manuscript number (if known):__ ASJ-21-106_____

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