ICMJE INTERNATIONAL COMMITTEE of MEDICAL JOURNAL EDITORS

ICMJE Form for Disclosure of Potential Conflicts of Interest

Instructions

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Section 1. Identifying Information

1. Given Name (First Name)
Soichiro

2. Surname (Last Name)
Funaki

3. Date
10-June-2020

4. Are you the corresponding author? ☑ Yes ☐ No

5. Manuscript Title
Surgical treatment strategies for invasive thymoma

6. Manuscript Identifying Number (if you know it)
JTD-2019-THYM-03(JTD-19-3045)

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Dr. Funaki has nothing to disclose.

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1. Given Name (First Name)
Yasushi

2. Surname (Last Name)
Shintani

3. Date
10-June-2020

4. Are you the corresponding author? ☐ Yes ☑ No

Corresponding Author's Name
Soichiro Funaki

5. Manuscript Title
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1. Given Name (First Name)
ERIKO

2. Surname (Last Name)
FUKUI

3. Date
10-June-2020

4. Are you the corresponding author? ☐ Yes ☑ No

Corresponding Author's Name
SOICHIRO FUNAKI

5. Manuscript Title
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Ryu

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Kanzaki

3. Date
11-June-2020

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Corresponding Author's Name
Soichiro Funaki

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takashi

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kanou

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10-June-2020

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Corresponding Author's Name
Soichiro Funaki

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2. Surname (Last Name)
Ose

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10-June-2020

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Corresponding Author's Name
Soichiro Funaki

5. Manuscript Title
Surgical treatment strategies for invasive thymoma

6. Manuscript Identifying Number (if you know it)
JTD-2019-THYM-03(JTD-19-3045)

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Soichiro Funaki, MD, PhD

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Okumura

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11-June-2020

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Soichiro Funaki

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