

## ICMJE Form for Disclosure of Potential Conflicts of Interest

### Instructions

The purpose of this form is to provide readers of your manuscript with information about your other interests that could influence how they receive and understand your work. The form is designed to be completed electronically and stored electronically. It contains programming that allows appropriate data display. Each author should submit a separate form and is responsible for the accuracy and completeness of the submitted information. The form is in six parts.

#### 1. Identifying information.

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#### 4. Intellectual Property.

This section asks about patents and copyrights, whether pending, issued, licensed and/or receiving royalties.

#### 5. Relationships not covered above.

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## ICMJE Form for Disclosure of Potential Conflicts of Interest

### Section 1. Identifying Information

1. Given Name (First Name) Yo	2. Surname (Last Name) Kawaguchi	3. Date 18-December-2020
4. Are you the corresponding author? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
5. Manuscript Title Does Sarcopenia Affect Postoperative Short- and Long-Term Outcomes in Patients with Lung Cancer? A Systematic Review and Meta-Analysis		
6. Manuscript Identifying Number (if you know it) JTD-20-3072-R1		

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Are there any relevant conflicts of interest? ☐ Yes ☒ No

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Do you have any patents, whether planned, pending or issued, broadly relevant to the work? ☐ Yes ☒ No

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Dr. Kawaguchi has nothing to disclose.

### Evaluation and Feedback

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## ICMJE Form for Disclosure of Potential Conflicts of Interest

### Section 1.

#### Identifying Information

1. Given Name (First Name)

Jun

2. Surname (Last Name)

Hanaoka

3. Date

18-December-2020

4. Are you the corresponding author?

☐ Yes

☒ No

Corresponding Author's Name

Yo Kawaguchi

5. Manuscript Title

Does Sarcopenia Affect Postoperative Short- and Long-Term Outcomes in Patients with Lung Cancer? A Systematic Review and Meta-Analysis

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#### Identifying Information

1. Given Name (First Name)

Yasuhiko

2. Surname (Last Name)

Ohshio

3. Date

18-December-2020

4. Are you the corresponding author?

☐ Yes

☒ No

Corresponding Author's Name

Yo Kawaguchi

5. Manuscript Title

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1. Given Name (First Name) Keigo	2. Surname (Last Name) Okamoto	3. Date 18-December-2020
4. Are you the corresponding author? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Corresponding Author's Name Yo Kawaguchi
5. Manuscript Title Does Sarcopenia Affect Postoperative Short- and Long-Term Outcomes in Patients with Lung Cancer? A Systematic Review and Meta-Analysis		
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Ryosuke

2. Surname (Last Name)

Kaku

3. Date

18-December-2020

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☐ Yes

☒ No

Corresponding Author's Name

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#### 4. Intellectual Property.

This section asks about patents and copyrights, whether pending, issued, licensed and/or receiving royalties.

#### 5. Relationships not covered above.

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**Royalties:** Funds are coming in to you or your institution due to your patent



## ICMJE Form for Disclosure of Potential Conflicts of Interest

### Section 1. Identifying Information

1. Given Name (First Name) Kazuki	2. Surname (Last Name) Hayashi	3. Date 18-December-2020
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Yo Kawaguchi
5. Manuscript Title Does Sarcopenia Affect Postoperative Short- and Long-Term Outcomes in Patients with Lung Cancer? A Systematic Review and Meta-Analysis		
6. Manuscript Identifying Number (if you know it) JTD-20-3072-R1		

### Section 2. The Work Under Consideration for Publication

Did you or your institution **at any time** receive payment or services from a third party (government, commercial, private foundation, etc.) for any aspect of the submitted work (including but not limited to grants, data monitoring board, study design, manuscript preparation, statistical analysis, etc.)?

Are there any relevant conflicts of interest? ☐ Yes ☒ No

### Section 3. Relevant financial activities outside the submitted work.

Place a check in the appropriate boxes in the table to indicate whether you have financial relationships (regardless of amount of compensation) with entities as described in the instructions. Use one line for each entity; add as many lines as you need by clicking the "Add +" box. You should report relationships that were **present during the 36 months prior to publication**.

Are there any relevant conflicts of interest? ☐ Yes ☒ No

### Section 4. Intellectual Property -- Patents & Copyrights

Do you have any patents, whether planned, pending or issued, broadly relevant to the work? ☐ Yes ☒ No

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Dr. Hayashi has nothing to disclose.

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#### 1. Identifying information.

#### 2. The work under consideration for publication.

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## ICMJE Form for Disclosure of Potential Conflicts of Interest

### Section 1. Identifying Information

1. Given Name (First Name) Takuya	2. Surname (Last Name) Shiratori	3. Date 18-December-2020
4. Are you the corresponding author? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Corresponding Author's Name Yo Kawaguchi
5. Manuscript Title Does Sarcopenia Affect Postoperative Short- and Long-Term Outcomes in Patients with Lung Cancer? A Systematic Review and Meta-Analysis		
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Are there any relevant conflicts of interest? ☐ Yes ☒ No

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## ICMJE Form for Disclosure of Potential Conflicts of Interest

### Section 1. Identifying Information

1. Given Name (First Name) Akira	2. Surname (Last Name) Akazawa	3. Date 18-December-2020
4. Are you the corresponding author? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Corresponding Author's Name Yo Kawaguchi
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Dr. Akazawa has nothing to disclose.

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