

## ICMJE DISCLOSURE FORM

Date:     July 20<sup>th</sup>, 2022    

Your Name:     Shuai Li    

Manuscript Title: Robotic approach for pediatric pulmonary resection: preliminary experience and comparison results with thoracoscopic approach    

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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		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)
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1	All support for the present manuscript (e.g., funding, provision of study materials, medical writing, article processing charges, etc.) <b>No time limit for this item.</b>	__X__None	
<b>Time frame: past 36 months</b>			
2	Grants or contracts from any entity (if not indicated in item #1 above).	__X__None	
3	Royalties or licenses	__X__None	
4	Consulting fees	__X__None	

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

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: July. 20th, 2022

Your Name: Zhibin Luo

Manuscript Title: Robotic approach for pediatric pulmonary resection: preliminary experience and comparison results with thoracoscopic approach

Manuscript number (if known):

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Table with 4 columns: Item Number, Description, Name of entities/relationship, and Specifications/Comments. Rows include a header, a section for 'Since the initial planning of the work', and sections for 'past 36 months' covering grants, royalties, and consulting fees.

5	Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or educational events	<input checked="" type="checkbox"/> None	
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## ICMJE DISCLOSURE FORM

Date:      July, 20<sup>th</sup>, 2022     

Your Name:      Kang Li     

Manuscript Title: Robotic approach for pediatric pulmonary resection: preliminary experience and comparison results with thoracoscopic approach     

Manuscript number (if known):     

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## ICMJE DISCLOSURE FORM

Date:       July. 20<sup>th</sup>, 2022      

Your Name:       Yan Li      

Manuscript Title: Robotic approach for pediatric pulmonary resection: preliminary experience and comparison results with thoracoscopic approach      

Manuscript number (if known): \_\_\_\_\_

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Date:        July, 20<sup>th</sup>, 2022       

Your Name:        Dehua Yang       

Manuscript Title:        Robotic approach for pediatric pulmonary resection: preliminary experience and comparison results with thoracoscopic approach       

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## ICMJE DISCLOSURE FORM

Date:      July, 20<sup>th</sup>, 2022     

Your Name:      Guoqing Cao     

Manuscript Title: Robotic approach for pediatric pulmonary resection: preliminary experience and comparison results with thoracoscopic approach     

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## ICMJE DISCLOSURE FORM

Date:      July, 20<sup>th</sup>, 2022     

Your Name:      Xi Zhang     

Manuscript Title: Robotic approach for pediatric pulmonary resection: preliminary experience and comparison results with thoracoscopic approach     

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**ICMJE DISCLOSURE FORM**

Date:        July. 20<sup>th</sup>, 2022       

Your Name:        Ying Zhou       

Manuscript Title:        Robotic approach for pediatric pulmonary resection: preliminary experience and comparison results with thoracoscopic approach       

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# ICMJE DISCLOSURE FORM

Date:        July, 20<sup>th</sup>, 2022       

Your Name:        Shuiqing Chi       

Manuscript Title:        Robotic approach for pediatric pulmonary resection: preliminary experience and comparison results with thoracoscopic approach       

Manuscript number (if known):       

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Date:        July. 20<sup>th</sup>, 2022       

Your Name:        Shao-tao Tang       

Manuscript Title:        Robotic approach for pediatric pulmonary resection: preliminary experience and comparison results with thoracoscopic approach       

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