Date	<u>:</u>	4/30/2022				
		e:Min P Kim		Manuscript		
Title	Title: Video-Based Curriculum Improves Resident Participation During Robot-Assisted Surgery					
Man	Manuscript number (if known):					
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	follow uscrip		o the author's relationship	s/activities/interests as they relate to the <u>current</u>		
to the med	The author's relationships/activities/interests should be <u>defined broadly</u> . For example, if your manuscript pertains to the epidemiology of hypertension, you should declare all relationships with manufacturers of antihypertensive medication, even if that medication is not mentioned in the manuscript.  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	Specifications/Comments		
			whom you have this relationship or indicate none (add rows as needed)	(e.g., if payments were made to you or to your institution)		
			Time frame: Since the initial	planning of the work		
1	manus provis medic proces	oport for the present script (e.g., funding, ion of study materials, al writing, article ssing charges, etc.) ne limit for this item.	X None			
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2	any er	s or contracts from atity (if not indicated at #1 above).	Time frame: pastX None	36 months		
3	Royalt	ies or licenses	_X None			

4	Consulting fees	None Olympus, Medtronic, AstraZeneca, Intuitive Surgical	
5	Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or educational events	X None	
6	Payment for expert testimony	X None	
7	Support for attending meetings and/or travel	X_ None	
8	Patents planned, issued or pending	X None	
9	Participation on a Data Safety Monitoring Board or Advisory Board	X None	
10	Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid	X None	
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	

Date:\_\_\_\_4/30/2022\_

You	r Name:Haydee Del Ca	alvo			
Mar	nuscript Title: Video-Base	d Curriculum Improves Res	ident Participation During Robot-Assisted Surgery		
Mar	Vanuscript number (if known):				
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	following questions apply to nuscript only.	o the author's relationship	s/activities/interests as they relate to the <u>current</u>		
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	em #1 below, report all sup time frame for disclosure is		in this manuscript without time limit. For all other items,		
		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 initia	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.	X None			
		Time frame: past	36 months		
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,	X None	
	speakers bureaus,		
	manuscript writing or educational events		
6	Payment for expert testimony	X None	
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7	Support for attending meetings and/or travel	X_ None	
8	Patents planned, issued or pending	X None	
9	Doutisination on a Data	V None	
9	Participation on a Data Safety Monitoring Board or	X None	
	Advisory Board		
10	Leadership or fiduciary role in other board, society,	X None	
	committee or advocacy		
	group, paid or unpaid		
11	Stock or stock options	X None	
12	Receipt of equipment, materials, drugs, medical	_X None	
	writing, gifts or other		
	services		
13	Other financial or non- financial interests	X None	

Date:\_\_\_\_4/30/2022\_

You	r Name:	Ray Chihara_			
Maı	nuscript Title:_	Video-Base	d Curriculum Improves Res	sident Participation During Robot-Assisted Surgery	
Maı	Manuscript number (if known):				
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			whom you have this relationship or indicate none (add rows as needed)	(e.g., if payments were made to you or to your institution)	
			Time frame: Since the initia	l planning of the work	
1	All support for manuscript (e provision of st medical writin processing cha No time limit	.g., funding, cudy materials, ng, article arges, etc.)	X None		
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3	Royalties or lic	censes	_X None		

4	Consulting fees	X None	
5	Payment or honoraria for lectures, presentations,	X None	
	speakers bureaus,		
	manuscript writing or educational events		
6	Payment for expert testimony	X None	
-	Command for a thought	V. Name	
7	Support for attending meetings and/or travel	X_ None	
8	Patents planned, issued or pending	X None	
9	Participation on a Data	X None	
9	Safety Monitoring Board or	X None	
	Advisory Board		
10	Leadership or fiduciary role in other board, society,	X None	
	committee or advocacy		
	group, paid or unpaid		
11	Stock or stock options	X None	
12	Receipt of equipment, materials, drugs, medical	_X None	
	writing, gifts or other		
	services		
13	Other financial or non- financial interests	X None	

Date	e:4/30/2022					
You	r Name:Edward (	Chan				
Mar	Manuscript Title: Video-Based Curriculum Improves Resident Participation During Robot-Assisted Surgery					
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		relationship or indicate	institution)			
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	medical writing, article					
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5	Consulting fees  Payment or honoraria for	None Olympus and Intuitive SurgicalX None	
	lectures, presentations, speakers bureaus, manuscript writing or educational events		
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