

ICMJE DISCLOSURE FORM

Date: 6/5/2023

Your Name: Keisuke Kobayashi

Manuscript Title: Comparison of patient-reported outcomes and clinical outcomes between pleurectomy and pleural covering added to thoracoscopic bullectomy for primary spontaneous pneumothorax

Manuscript Number (if known): JTD-23-214-R1

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.

The author's relationships/activities/interests should be defined broadly. 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.

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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 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: 6/1/2023

Your Name: Hideo Ichimura

Manuscript Title: Comparison of patient-reported outcomes and clinical outcomes between pleurectomy and pleural covering added to thoracoscopic bullectomy for primary spontaneous pneumothorax

Manuscript Number (if known): JTD-23-214-R1

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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: 6/8/2023

Your Name: Shuntaro Kawabata

Manuscript Title: Comparison of patient-reported outcomes and clinical outcomes between pleurectomy and pleural covering added to thoracoscopic bullectomy for primary spontaneous pneumothorax

Manuscript Number (if known): JTD-23-214-R1

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ICMJE DISCLOSURE FORM

Date: 6/1/2023

Your Name: Hisashi Suzuki

Manuscript Title: Comparison of patient-reported outcomes and clinical outcomes between pleurectomy and pleural covering added to thoracoscopic bullectomy for primary spontaneous pneumothorax

Manuscript Number (if known): JTD-23-214-R1

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ICMJE DISCLOSURE FORM

Date: 6/8/2023

Your Name: Katsuyuki Endo

Manuscript Title: Comparison of patient-reported outcomes and clinical outcomes between pleurectomy and pleural covering added to thoracoscopic bullectomy for primary spontaneous pneumothorax

Manuscript Number (if known): JTD-23-214-R1

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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	

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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: 6/1/2023

Your Name: Naohiro Kobayashi

Manuscript Title: Comparison of patient-reported outcomes and clinical outcomes between pleurectomy and pleural covering added to thoracoscopic bullectomy for primary spontaneous pneumothorax

Manuscript Number (if known): JTD-23-214-R1

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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ICMJE DISCLOSURE FORM

Date: 6/1/2023

Your Name: Shinji Kikuchi

Manuscript Title: Comparison of patient-reported outcomes and clinical outcomes between pleurectomy and pleural covering added to thoracoscopic bullectomy for primary spontaneous pneumothorax

Manuscript Number (if known): JTD-23-214-R1

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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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	
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ICMJE DISCLOSURE FORM

Date: 6/1/2023

Your Name: Yukinobu Goto

Manuscript Title: Comparison of patient-reported outcomes and clinical outcomes between pleurectomy and pleural covering added to thoracoscopic bullectomy for primary spontaneous pneumothorax

Manuscript Number (if known): JTD-23-214-R1

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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6	Payment for expert testimony	<input checked="" type="checkbox"/> None	
7	Support for attending meetings and/or travel	<input checked="" type="checkbox"/> None	
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ICMJE DISCLOSURE FORM

Date: 6/1/2023

Your Name: Yukio Sato

Manuscript Title: Comparison of patient-reported outcomes and clinical outcomes between pleurectomy and pleural covering added to thoracoscopic bullectomy for primary spontaneous pneumothorax

Manuscript Number (if known): JTD-23-214-R1

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