

## ICMJE Form for Disclosure of Potential Conflicts of Interest

### Instructions

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#### 4. Intellectual Property.

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## ICMJE Form for Disclosure of Potential Conflicts of Interest

### Section 1. Identifying Information

1. Given Name (First Name)  
Benoit

2. Surname (Last Name)  
Herbert

3. Date  
26-December-2019

4. Are you the corresponding author?

Yes  No

Corresponding Author's Name  
Richard Lazzaro

5. Manuscript Title  
Robotic/thoracoscopic approach to esophageal gastro-intestinal stromal tumor

6. Manuscript Identifying Number (if you know it)  
SHC-2019-MIES-06

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

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Dr. Herbert has nothing to disclose.

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## ICMJE Form for Disclosure of Potential Conflicts of Interest

### Section 1. Identifying Information

1. Given Name (First Name) Joseph	2. Surname (Last Name) McGinn	3. Date 26-December-2019
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Richard Lazzaro
5. Manuscript Title Robotic/thoracoscopic approach to esophageal gastro-intestinal stromal tumor		
6. Manuscript Identifying Number (if you know it) SHC-2019-MIES-06		

### 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.)?

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Dr. McGinn has nothing to disclose.

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1. Given Name (First Name) Andrew	2. Surname (Last Name) Maloney	3. Date 26-December-2019
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Richard Lazzaro
5. Manuscript Title Robotic/thoracoscopic approach to esophageal gastro-intestinal stromal tumor		
6. Manuscript Identifying Number (if you know it) SHC-2019-MIES-06		

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

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Dr. Maloney has nothing to disclose.

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## ICMJE Form for Disclosure of Potential Conflicts of Interest

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1. Given Name (First Name) Byron	2. Surname (Last Name) Patton	3. Date 26-December-2019
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Richard Lazzaro
5. Manuscript Title Robotic/thoracoscopic approach to esophageal gastro-intestinal stromal tumor		
6. Manuscript Identifying Number (if you know it) SHC-2019-MIES-06		

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Richard

2. Surname (Last Name)  
Lazzaro

3. Date  
26-December-2019

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5. Manuscript Title  
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6. Manuscript Identifying Number (if you know it)  
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