

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.

Identifying information.

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Guo 1



Section 1. Identifying Inform	mation	
1. Given Name (First Name) Wei	2. Surname (Last Name) Guo	3. Date 22-December-2016
4. Are you the corresponding author?	☐ Yes ✓ No	Corresponding Author's Name Hecheng Li
5. Manuscript Title Robot-assisted surgery for posterior su	perior mediastinal mass	
6. Manuscript Identifying Number (if you k	(now it)	
Section 2. The Work Under C	Consideration for Public	cation
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Are there any relevant conflicts of inter	rest? Yes ✓ No	
Section 4. Intellectual Prope	rty Patents & Copyri	ghts
Do you have any patents, whether plan	nned, pending or issued, br	roadly relevant to the work? Yes V No

Guo 2



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Dr. Guo has nothing to disclose.

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patent

Yang 1



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1. Given Name (Fi Su	rst Name)	2. Surname (Last Name) Yang	3. Date 22-December-2016
4. Are you the cor	responding author?	Yes ✓ No	Corresponding Author's Name Hecheng Li
5. Manuscript Title Robot-assisted s		perior mediastinal mass	
6. Manuscript Ide	ntifying Number (if you kr	now it)	
Section 2.	The Work Under C	onsideration for Public	cation
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 Vo			
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Section 3.	Relevant financial	activities outside the s	ubmitted 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 Vo			
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Yang 2



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Jin 1



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Jin 2



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Zhang 1



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5. Manuscript Title Robot-assisted s		perior mediastinal mass		
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Section 4.	Intellectual Prope	rty Patents & Copyric	yhts
Do you have any	patents, whether plan	ned, pending or issued, br	oadly relevant to the work? Yes V No

Wu 2



Section 5.	
Deculon 5.	Relationships not covered above
	elationships or activities that readers could perceive to have influenced, or that give the appearance of encing, what you wrote in the submitted work?
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Du 1



Section 1.	Identifying Inform	nation		
1. Given Name (First Name) Hailei		2. Surname (Last Name) Du		3. Date 22-December-2016
4. Are you the corresponding author?		Yes ✓ No	Corresponding Author's Name Hecheng Li	
5. Manuscript Title Robot-assisted s		perior mediastinal mass		
6. Manuscript Ider	ntifying Number (if you kr	now it)		
Section 2.	The Work Under Co	onsideration for Public	cation	
any aspect of the s statistical analysis,	ubmitted work (including	but not limited to grants, da	a third party (government, cor ata monitoring board, study de	mmercial, private foundation, etc.) for sign, manuscript preparation,
Section 3.	Relevant financial	activities outside the s	submitted work.	
of compensation clicking the "Add) with entities as descri	ibed in the instructions. Us port relationships that wer	se one line for each entity; a	ationships (regardless of amount dd as many lines as you need by conths prior to publication.
Section 4.	Intellectual Prope	rty Patents & Copyric	ghts	
Do you have any	patents, whether plan	ned, pending or issued, br	roadly relevant to the work?	☐ Yes 🗸 No

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	Relationships not covered above		
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Han 1



Section 1. Identifying	J Information			
1. Given Name (First Name) Dingpei	2. Surname (Last Name) Han	3. Date 22-December-2016		
4. Are you the corresponding aut	hor? Yes 🗸 No	Corresponding Author's Name Hecheng Li		
5. Manuscript Title Robot-assisted surgery for pos	terior superior mediastinal mass			
6. Manuscript Identifying Numbe	r (if you know it)			
Section 2. The Work l	Inder Consideration for Public	cation		
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 fi	nancial activities outside the s	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 Vo				
Section 4. Intellectua	l Property Patents & Copyric	ghts		
Do you have any patents, whether planned, pending or issued, broadly relevant to the work? Yes Vo				

Han 2



Section 5.			
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Section 1.	Identifying Inform	nation		
1. Given Name (First Name) Kai		2. Surname (Last Name) Chen		3. Date 22-December-2016
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5. Manuscript Title Robot-assisted surgery for posterior superior i		perior mediastinal mass		
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Do you have any	patents, whether plan	ned, pending or issued, bi	roadly relevant to the work?	☐ Yes 🗸 No



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