ICMJE Form for Disclosure of Potential Conflicts of Interest

Instructions

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<tr>
<td>Stevan</td>
<td>Pupovac</td>
<td>25-May-2020</td>
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</tbody>
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4. Are you the corresponding author? [ ] Yes [ ] No

5. Manuscript Title
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6. Manuscript Identifying Number (if you know it)
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Dr. Pupovac has nothing to disclose.

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## Section 1. Identifying Information

1. Given Name (First Name)  
   **JOSHUA**

2. Surname (Last Name)  
   **NEWMAN**

3. Date  
   **24-May-2020**

4. Are you the corresponding author?  
   - Yes  
   - No  
   **Yes**

Corresponding Author’s Name  
**DAVID ZELTSMAN**

5. Manuscript Title  
**INTERMEDIATE ONCOLOGIC OUTCOMES AFTER UNIPORTAL VIDEO-ASSISTED THORACOSCOPIC THYMECTOMY FOR EARLY-STAGE THYMOMA**

6. Manuscript Identifying Number (if you know it)  
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## 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.)?

Are there any relevant conflicts of interest?  
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- No  
**No**

## Section 3. Relevant Financial Activities Outside the Submitted Work

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- No  
**No**

## Section 4. Intellectual Property -- Patents & Copyrights

Do you have any patents, whether planned, pending or issued, broadly relevant to the work?  
- Yes  
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**No**

NEWMAN
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Dr. NEWMAN has nothing to disclose.

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Section 1. Identifying Information

1. Given Name (First Name) 
   Paul
2. Surname (Last Name) 
   Lee
3. Date 
   25-May-2020
4. Are you the corresponding author? 
   [ ] Yes   [ ] No
   Corresponding Author’s Name 
   Stevan S Pupovac
5. Manuscript Title 
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Dr. Lee has nothing to disclose.

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Section 1. Identifying Information

1. Given Name (First Name)  MIGUEL
2. Surname (Last Name)  ALEXIS
3. Date  25-May-2020
4. Are you the corresponding author?  No  ✔

Corresponding Author’s Name
PUPOVAC, STEVAN S

5. Manuscript Title
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1. Given Name (First Name)  
Julissa

2. Surname (Last Name)  
Jurado

3. Date  
25-May-2020

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\[ \square \text{Yes} \quad \sqrt{\text{No}} \]

Corresponding Author's Name  
Stevan S Pupovac

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Section 1. Identifying Information

<table>
<thead>
<tr>
<th>1. Given Name (First Name)</th>
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<tr>
<td>Kevin</td>
<td>Hyman</td>
<td>25-May-2020</td>
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4. Are you the corresponding author? [ ] Yes  ✔ No

5. Manuscript Title
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Dr. Hyman has nothing to disclose.

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1. Given Name (First Name)  
   David  

2. Surname (Last Name)  
   Zeltsman  

3. Date  
   25-May-2020  

4. Are you the corresponding author?  
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Corresponding Author's Name  
Stevan S Pupovac  

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