

ICMJE Form for Disclosure of Potential Conflicts of Interest

Instructions

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1. Identifying information.

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4. Intellectual Property.

This section asks about patents and copyrights, whether pending, issued, licensed and/or receiving royalties.

5. Relationships not covered above.

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Royalties: Funds are coming in to you or your institution due to your patent

ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name) Tsukasa	2. Surname (Last Name) Ishiwata	3. Date 22-January-2021
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Kazuhiro Yasufuku
5. Manuscript Title Pilot study using virtual 4-D tracking electromagnetic navigation bronchoscopy in the diagnosis of peripheral pulmonary nodules: A single center prospective study		
6. Manuscript Identifying Number (if you know it)		

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Dr. Ishiwata 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) Hideki	2. Surname (Last Name) Ujii	3. Date 22-January-2021
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Kazuhiro Yasufuku
5. Manuscript Title Pilot study using virtual 4-D tracking electromagnetic navigation bronchoscopy in the diagnosis of peripheral pulmonary nodules: A single center prospective study		
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Are there any relevant conflicts of interest? Yes No

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Dr. Ujiie has nothing to disclose.

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Section 1. Identifying Information

1. Given Name (First Name) Alexander	2. Surname (Last Name) Gregor	3. Date 21-January-2021
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Kazuhiro Yasufuku
5. Manuscript Title Pilot study using virtual 4-D tracking electromagnetic navigation bronchoscopy in the diagnosis of peripheral pulmonary nodules: A single center prospective study		
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Are there any relevant conflicts of interest? Yes No

If yes, please fill out the appropriate information below. If you have more than one entity press the "ADD" button to add a row. Excess rows can be removed by pressing the "X" button.

Name of Institution/Company	Grant?	Personal Fees?	Non-Financial Support?	Other?	Comments
the Canadian Institutes of Health Research	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Frederick Banting and Charles Best Doctoral Canada Graduate Scholarship (FRN 170883). [Retroactive effective May 2020]
the University of Toronto Temerty Faculty of Medicine/Hold'em for Life Charity Challenge	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Hold'em for Life Oncology Clinician Scientist Award [effective July 2020]

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Dr. Gregor reports grants from the Canadian Institutes of Health Research, grants from the University of Toronto Temerty Faculty of Medicine/Hold'em for Life Charity Challenge, during the conduct of the study; .

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Section 1. Identifying Information

1. Given Name (First Name) Terunaga	2. Surname (Last Name) Inage	3. Date 22-January-2021
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Kazuhiro Yasufuku
5. Manuscript Title Pilot study using virtual 4-D tracking electromagnetic navigation bronchoscopy in the diagnosis of peripheral pulmonary nodules: A single center prospective study		
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Dr. Inage has nothing to disclose.

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Section 1. Identifying Information

1. Given Name (First Name)

Yamato

2. Surname (Last Name)

Motooka

3. Date

22-January-2021

4. Are you the corresponding author?

Yes

No

Corresponding Author's Name

Kazuhiro Yasufuku

5. Manuscript Title

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Dr. Motooka has nothing to disclose.

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This section asks about patents and copyrights, whether pending, issued, licensed and/or receiving royalties.

5. Relationships not covered above.

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Royalties: Funds are coming in to you or your institution due to your patent

ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name) Tomonari	2. Surname (Last Name) Kinoshita	3. Date 22-January-2021
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Kazuhiro Yasufuku
5. Manuscript Title Pilot study using virtual 4-D tracking electromagnetic navigation bronchoscopy in the diagnosis of peripheral pulmonary nodules: A single center prospective study		
6. Manuscript Identifying Number (if you know it)		

Section 2. The Work Under Consideration for Publication

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Are there any relevant conflicts of interest? Yes No

Section 3. Relevant financial activities outside the submitted work.

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Are there any relevant conflicts of interest? Yes No

Section 4. Intellectual Property -- Patents & Copyrights

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

ICMJE Form for Disclosure of Potential Conflicts of Interest

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Section 6. Disclosure Statement

Based on the above disclosures, this form will automatically generate a disclosure statement, which will appear in the box below.

Dr. Kinoshita has nothing to disclose.

Evaluation and Feedback

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name) Masato	2. Surname (Last Name) Aragaki	3. Date 21-January-2021
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Kazuhiro Yasufuku
5. Manuscript Title Pilot study using virtual 4-D tracking electromagnetic navigation bronchoscopy in the diagnosis of peripheral pulmonary nodules: A single center prospective study		
6. Manuscript Identifying Number (if you know it)		

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Are there any relevant conflicts of interest? Yes No

If yes, please fill out the appropriate information below. If you have more than one entity press the "ADD" button to add a row. Excess rows can be removed by pressing the "X" button.

Name of Institution/Company	Grant?	Personal Fees?	Non-Financial Support?	Other?	Comments
Japan Society for the Promotion of Science	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Grants-in-Aid for Scientific Research-KAKENHI: Fund for the Promotion of Joint International Research

Section 3. Relevant financial activities outside the 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 No

Section 4. Intellectual Property -- Patents & Copyrights

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

ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 5. Relationships not covered above

Are there other relationships or activities that readers could perceive to have influenced, or that give the appearance of potentially influencing, what you wrote in the submitted work?

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Section 6. Disclosure Statement

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Dr. Aragaki reports grants from Japan Society for the Promotion of Science, during the conduct of the study; .

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Royalties: Funds are coming in to you or your institution due to your patent

ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name) Zhenchian	2. Surname (Last Name) Chen	3. Date 22-January-2021
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Kazuhiro Yasufuku
5. Manuscript Title Pilot study using virtual 4-D tracking electromagnetic navigation bronchoscopy in the diagnosis of peripheral pulmonary nodules: A single center prospective study		
6. Manuscript Identifying Number (if you know it)		

Section 2. The Work Under Consideration for Publication

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Are there any relevant conflicts of interest? Yes No

Section 3. Relevant financial activities outside the submitted work.

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Are there any relevant conflicts of interest? Yes No

Section 4. Intellectual Property -- Patents & Copyrights

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

ICMJE Form for Disclosure of Potential Conflicts of Interest

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Section 6. Disclosure Statement

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Dr. Chen has nothing to disclose.

Evaluation and Feedback

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Royalties: Funds are coming in to you or your institution due to your patent

ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name) Andrew	2. Surname (Last Name) Effat	3. Date 22-January-2021
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Kazuhiro Yasufuku
5. Manuscript Title Pilot study using virtual 4-D tracking electromagnetic navigation bronchoscopy in the diagnosis of peripheral pulmonary nodules: A single center prospective study		
6. Manuscript Identifying Number (if you know it) _____		

Section 2. The Work Under Consideration for Publication

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Are there any relevant conflicts of interest? Yes No

Section 3. Relevant financial activities outside the submitted work.

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Are there any relevant conflicts of interest? Yes No

Section 4. Intellectual Property -- Patents & Copyrights

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

ICMJE Form for Disclosure of Potential Conflicts of Interest

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Section 6. Disclosure Statement

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Dr. Effat has nothing to disclose.

Evaluation and Feedback

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)

Nicholas

2. Surname (Last Name)

Bernards

3. Date

22-January-2021

4. Are you the corresponding author?

Yes No

Corresponding Author's Name

Kazuhiro Yasufuku

5. Manuscript Title

Pilot study using virtual 4-D tracking electromagnetic navigation bronchoscopy in the diagnosis of peripheral pulmonary nodules: A single center prospective study

6. Manuscript Identifying Number (if you know it)

Section 2. The Work Under Consideration for Publication

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Dr. Bernards 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) Kazuhiro

2. Surname (Last Name) Yasufuku

3. Date 22-January-2021

4. Are you the corresponding author? Yes No

5. Manuscript Title
Pilot study using virtual 4-D tracking electromagnetic navigation bronchoscopy in the diagnosis of peripheral pulmonary nodules: A single center prospective study

6. Manuscript Identifying Number (if you know it)

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Are there any relevant conflicts of interest? Yes No

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Name of Institution/Company	Grant?	Personal Fees?	Non-Financial Support?	Other?	Comments
William Coco Chair in Surgical Innovation for Lung Cancer	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Chair
Veran Medical Technologies	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Instruments and monetary support were provided.

Section 3. Relevant financial activities outside the 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 No

Section 4. Intellectual Property -- Patents & Copyrights

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

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Section 5. Relationships not covered above

Are there other relationships or activities that readers could perceive to have influenced, or that give the appearance of potentially influencing, what you wrote in the submitted work?

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At the time of manuscript acceptance, journals will ask authors to confirm and, if necessary, update their disclosure statements. On occasion, journals may ask authors to disclose further information about reported relationships.

Section 6. Disclosure Statement

Based on the above disclosures, this form will automatically generate a disclosure statement, which will appear in the box below.

Dr. Yasufuku reports other from William Coco Chair in Surgical Innovation for Lung Cancer, other from Veran Medical Technologies, during the conduct of the study; .

Evaluation and Feedback

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