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4. **Intellectual Property.**
   
   This section asks about patents and copyrights, whether pending, issued, licensed and/or receiving royalties.
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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)  
   Jaegeum

2. Surname (Last Name)  
   Shim

3. Date  
   27-January-2020

4. Are you the corresponding author?  
   ✔ Yes  ☐ No

5. Manuscript Title  
   Evaluation of ultrasound-guided erector spinae plane block for postoperative management of video-assisted thoracoscopic surgery: A prospective, randomized, controlled clinical trial

6. Manuscript Identifying Number (if you know it)

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Are there any relevant conflicts of interest?  
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Section 6. Disclosure Statement

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Dr. Shim 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)  
   Kyoung-Ho  

2. Surname (Last Name)  
   Ryu  

3. Date  
   27-January-2020  

4. Are you the corresponding author?  
   ✔ Yes  
   ☐ No  

5. Manuscript Title
   Evaluation of ultrasound-guided erector spinae plane block for postoperative management of video-assisted thoracoscopic surgery: A prospective, randomized, controlled clinical trial  

6. Manuscript Identifying Number (if you know it)

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   ✔ No  

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

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

Ryu
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Dr. Ryu 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)  
   Pyoung On  
2. Surname (Last Name)  
   Kim  
3. Date  
   27-January-2020  
4. Are you the corresponding author?  
   ✔ Yes  
   No

5. Manuscript Title  
   Evaluation of ultrasound-guided erector spinae plane block for postoperative management of video-assisted thoracoscopic surgery: A prospective, randomized, controlled clinical trial  
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Dr. Kim 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)  
   Eun-Ah

2. Surname (Last Name)  
   Cho

3. Date  
   27-January-2020

4. Are you the corresponding author?  
   ✔ Yes  
   No

5. Manuscript Title  
   Evaluation of ultrasound-guided erector spinae plane block for postoperative management of video-assisted thoracoscopic surgery: A prospective, randomized, controlled clinical trial

6. Manuscript Identifying Number (if you know it)

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   No

Section 4. Intellectual Property -- Patents & Copyrights

Do you have any patents, whether planned, pending or issued, broadly relevant to the work?  
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Dr. Cho has nothing to disclose.

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Ahn
ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)  Jin-Hee
2. Surname (Last Name)  Ahn
3. Date  27-January-2020
4. Are you the corresponding author?  Yes  No

5. Manuscript Title
Evaluation of ultrasound-guided erector spinae plane block for postoperative management of video-assisted thoracoscopic surgery: A prospective, randomized, controlled clinical trial

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Are there any relevant conflicts of interest?  Yes  No

Section 4. Intellectual Property -- Patents & Copyrights

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Dr. Ahn has nothing to disclose.

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**Other**: Anything not covered under the previous three boxes

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

Yeon
ICMJE Form for Disclosure of Potential Conflicts of Interest

**Section 1. Identifying Information**

1. Given Name (First Name)  
   Ji-Eun

2. Surname (Last Name)  
   Yeon

3. Date  
   27-January-2020

4. Are you the corresponding author?  
   Yes ✔
   No

5. Manuscript Title  
   Evaluation of ultrasound-guided erector spinae plane block for postoperative management of video-assisted thoracoscopic surgery: A prospective, randomized, controlled clinical trial

6. Manuscript Identifying Number (if you know it)

---

**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?  
   Yes ☐
   No ✔

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**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 ✔
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?

☐ Yes, the following relationships/conditions/circumstances are present (explain below):
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Dr. Yeon has nothing to disclose.

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1. **Identifying information.**

2. **The work under consideration for publication.**

   This section asks for information about the work that you have submitted for publication. The time frame for this reporting is that of the work itself, from the initial conception and planning to the present. The requested information is about resources that you received, either directly or indirectly (via your institution), to enable you to complete the work. Checking “No” means that you did the work without receiving any financial support from any third party -- that is, the work was supported by funds from the same institution that pays your salary and that institution did not receive third-party funds with which to pay you. If you or your institution received funds from a third party to support the work, such as a government granting agency, charitable foundation or commercial sponsor, check “Yes”.

3. **Relevant financial activities outside the submitted work.**

   This section asks about your financial relationships with entities in the bio-medical arena that could be perceived to influence, or that give the appearance of potentially influencing, what you wrote in the submitted work. You should disclose interactions with ANY entity that could be considered broadly relevant to the work. For example, if your article is about testing an epidermal growth factor receptor (EGFR) antagonist in lung cancer, you should report all associations with entities pursuing diagnostic or therapeutic strategies in cancer in general, not just in the area of EGFR or lung cancer.

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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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ICMJE Form for Disclosure of Potential Conflicts of Interest

**Section 1. Identifying Information**

1. Given Name (First Name)  
Sung Hyun

2. Surname (Last Name)  
Lee

3. Date  
27-January-2020

4. Are you the corresponding author?  
✓ Yes  
No

5. Manuscript Title  
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Do you have any patents, whether planned, pending or issued, broadly relevant to the work?  
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Dr. Lee 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)  
   Du-Young

2. Surname (Last Name)  
   Kang

3. Date  
   27-January-2020

4. Are you the corresponding author?  
   Yes ✔ No

5. Manuscript Title  
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