ICMJE Form for Disclosure of Potential Conflicts of Interest

Instructions

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Section 1. Identifying Information

1. Given Name (First Name)  
   Hyung Jun

2. Surname (Last Name)  
   Park

3. Date  
   09-July-2020

4. Are you the corresponding author?  
   Yes  [ ]  No  [ ]

Corresponding Author's Name
   Chang-Min Choi

5. Manuscript Title  
The value of preoperative spirometry testing for predicting postoperative risk in upper abdominal and thoracic surgery assessed using big-data analysis

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

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**Section 1. Identifying Information**

1. Given Name (First Name)  
Sung min

2. Surname (Last Name)  
Kim

3. Date  
09-July-2020

4. Are you the corresponding author?  
☑ No

Corresponding Author’s Name  
Chang-Min Choi

5. Manuscript Title  
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1. Given Name (First Name) Hong Rae
2. Surname (Last Name) Kim
3. Date 09-July-2020

4. Are you the corresponding author? Yes ❑ No ❑
   Corresponding Author’s Name
   Chang-Min Choi

5. Manuscript Title
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Wonjun

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ji

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Chang-Min Choi

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Chang-Min

2. Surname (Last Name)  
Choi

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09-July-2020

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