ICMJE Form for Disclosure of Potential Conflicts of Interest

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.

1. **Identifying information.**
2. **The work under consideration for publication.**
   
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   This section asks about your financial relationships with entities in the biomedical 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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# ICMJE Form for Disclosure of Potential Conflicts of Interest

## Section 1. Identifying Information

| 1. Given Name (First Name) | 2. Surname (Last Name) | 3. Date |
|----------------------------|------------------------|---------|
| Masahiro                   | Yamazaki               | 19-March-2020 |

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

Corresponding Author’s Name
Tatsuya Takayama

5. Manuscript Title
Robot-assisted partial nephrectomy of initial cases using 3D square-block type kidney model

6. Manuscript Identifying Number (if you know it)
TAU-19-514

## Section 2. The Work Under Consideration for Publication

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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
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Dr. Yamazaki has nothing to disclose.

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**Section 1. Identifying Information**

1. Given Name (First Name)  
   Tatsuya

2. Surname (Last Name)  
   Takayama

3. Date  
   19-March-2020

4. Are you the corresponding author?  
   ✔ Yes  
   No

5. Manuscript Title  
   Robot-assisted partial nephrectomy of initial cases using 3D square-block type kidney model

6. Manuscript Identifying Number (if you know it)  
   TAU-19-514

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No

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### Section 1. Identifying Information

| 1. Given Name (First Name) | 2. Surname (Last Name) | 3. Date |
|---------------------------|------------------------|---------|
| Akira                     | Fujisaki               | 19-March-2020 |

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

5. Manuscript Title  
Robot-assisted partial nephrectomy of initial cases using 3D square-block type kidney model

6. Manuscript Identifying Number (if you know it)  
TAU-19-514

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Kamimura
ICMJE Form for Disclosure of Potential Conflicts of Interest

**Section 1. Identifying Information**

| 1. Given Name (First Name) | 2. Surname (Last Name) | 3. Date |
|-----------------------------|------------------------|---------|
| Tomoki                      | Kamimura               | 19-March-2020 |

4. Are you the corresponding author? □ Yes ☑ No

Corresponding Author’s Name

| Tatsuya Takayama |

5. Manuscript Title

Robot-assisted partial nephrectomy of initial cases using 3D square-block type kidney model

6. Manuscript Identifying Number (if you know it)

TAU-19-514

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**Section 1. Identifying Information**

| 1. Given Name (First Name) | Toshihiro |
|----------------------------|-----------|
| 2. Surname (Last Name)     | Mashiko  |
| 3. Date                    | 19-March-2020 |
| 4. Are you the corresponding author? | ☑ No |
| Corresponding Author's Name | Tatsuya Takayama |
| 5. Manuscript Title         | Robot-assisted partial nephrectomy of initial cases using 3D square-block type kidney model |
| 6. Manuscript Identifying Number (if you know it) | TAU-19-514 |

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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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**Definitions.**

- **Entity:** government agency, foundation, commercial sponsor, academic institution, etc.
- **Grant:** A grant from an entity, generally (but not always) paid to your organization
- **Personal Fees:** Monies paid to you for services rendered, generally honoraria, royalties, or fees for consulting, lectures, speakers bureaus, expert testimony, employment, or other affiliations
- **Non-Financial Support:** Examples include drugs/equipment supplied by the entity, travel paid by the entity, writing assistance, administrative support, etc.
- **Other:** Anything not covered under the previous three boxes
- **Pending:** The patent has been filed but not issued
- **Issued:** The patent has been issued by the agency
- **Licensed:** The patent has been licensed to an entity, whether earning royalties or not
- **Royalties:** Funds are coming in to you or your institution due to your patent
### Section 1. Identifying Information

| 1. Given Name (First Name) | 2. Surname (Last Name) | 3. Date |
|---------------------------|------------------------|--------|
| Tetsuya                   | Fujimura               | 19-March-2020 |

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

Corresponding Author's Name: Tatsuya Takayama

5. Manuscript Title  
Robot-assisted partial nephrectomy of initial cases using 3D square-block type kidney model

6. Manuscript Identifying Number (if you know it)  
TAU-19-514

### 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.)?  
- [ ] Yes  
- [✓] No

Are there any relevant conflicts of interest?  
- [ ] Yes  
- [✓] No

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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.  

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- [ ] Yes  
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Do you have any patents, whether planned, pending or issued, broadly relevant to the work?  
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Based on the above disclosures, this form will automatically generate a disclosure statement, which will appear in the box below.

Dr. Fujimura has nothing to disclose.

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