ICMJE Form for Disclosure of Potential Conflicts of Interest

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Section 1. Identifying Information

1. Given Name (First Name)  Natsumi
2. Surname (Last Name)  Matsuura
3. Date  10-February-2021
4. Are you the corresponding author?  Yes  No

5. Manuscript Title
Safety and feasibility of uniportal video-assisted thoracoscopic uncommon segmentectomy

6. Manuscript Identifying Number (if you know it)

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Dr. Matsuura has nothing to disclose.

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Section 1. Identifying Information

1. Given Name (First Name) 
Hitoshi
2. Surname (Last Name) 
Igai
3. Date 
10-February-2021
4. Are you the corresponding author? 
☐ Yes ☑ No 
Corresponding Author's Name 
Natsumi Matsuura
5. Manuscript Title 
Safety and feasibility of uniportal video-assisted thoracoscopic uncommon segmentectomy
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Dr. Igai has nothing to disclose.

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**Section 1. Identifying Information**

1. Given Name (First Name)  
   Fumi

2. Surname (Last Name)  
   Ohsawa

3. Date  
   10-February-2021

4. Are you the corresponding author?  
   ☑ No

   Corresponding Author’s Name  
   Natsumi Matsuura

5. Manuscript Title  
   Safety and feasibility of uniportal video-assisted thoracoscopic uncommon segmentectomy

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Dr. Ohsawa has nothing to disclose.

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Section 1. Identifying Information

1. Given Name (First Name)  
Tomohiro

2. Surname (Last Name)  
Yazawa

3. Date  
10-February-2021

4. Are you the corresponding author?  
☑ No

Corresponding Author’s Name  
Natsumi Matsuura

5. Manuscript Title  
Safety and feasibility of uniportal video-assisted thoracoscopic uncommon segmentectomy

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### Identifying Information

1. Given Name (First Name)  
Mitsuhiro  

2. Surname (Last Name)  
Kamiyoshihara  

3. Date  
10-February-2021

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

Corresponding Author's Name  
Natsumi Matsuura

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Dr. Kamiyoshihara has nothing to disclose.

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