

Instructions

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.

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.

Relationships not covered above.

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

patent

Yang 1



Section 1.	Identifying Inform	ation					
1. Given Name (First Name) Desong		2. Surname (Last Yang	Name)	3. Date 30-December-2020			
4. Are you the corresponding author?		Yes ✓ N	•	Corresponding Author's Name Wenxiang Wang			
5. Manuscript Title Total thoracosco	e pic sleeve lobectomy o	f the middle and	lower lobes of the rig	ght lung			
6. Manuscript Ider CCTS-2019-FILSC	ntifying Number (if you kn C-01-M05	ow it)					
Section 2.							
Section 2.	The Work Under Co	onsideration fo	r Publication				
any aspect of the s statistical analysis,	ubmitted work (including etc.)?	but not limited to			ercial, private foundation, etc.) for n, manuscript preparation,		
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Name of Institut	ion/Company	Grant? Perso	2	Other? Comm	ents		
	dation for the Youth of nina (No. 2018JJ3314)	V					
Scientific research pro Commission (B20190	oject of Hunan Health 94)	✓					
Section 3.	Relevant financial	activities outsi	de the submitted	work.			
of compensation clicking the "Add) with entities as descri +" box. You should rep	bed in the instructions relationships	tions. Use one line fo	or each entity; add	onships (regardless of amount as many lines as you need by ths prior to publication.		
Are there any rel	evant conflicts of intere	st? Yes	√ No				
	ı						
Section 4.	Intellectual Proper	ty Patents &	Copyrights				
Do you have any	patents, whether planr	ned, pending or i	ssued, broadly releva	ant to the work?	Yes 🗸 No		

Yang 2



Continu F	
Section 5.	Relationships not covered above
	elationships or activities that readers could perceive to have influenced, or that give the appearance of ncing, what you wrote in the submitted work?
Yes, the follow	wing relationships/conditions/circumstances are present (explain below):
✓ No other rela	tionships/conditions/circumstances that present a potential conflict of interest
	nuscript acceptance, journals will ask authors to confirm and, if necessary, update their disclosure statements nals may ask authors to disclose further information about reported relationships.
Section 6.	Disclosure Statement
Based on the abo	ve disclosures, this form will automatically generate a disclosure statement, which will appear in the box
	grants from Natural Science Foundation for the Youth of Hunan province of China (No. 2018JJ3314), grants search project of Hunan Health Commission (B2019094), during the conduct of the study;.

Evaluation and Feedback

Please visit http://www.icmje.org/cgi-bin/feedback to provide feedback on your experience with completing this form.

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Zhou 1



Section 1. Identifying Inform	mation		
1. Given Name (First Name) Yong	2. Surname (Last Name) Zhou	3. Date 30-December-2020	
4. Are you the corresponding author?	Yes ✓ No	Corresponding Author's Name Wenxiang Wang	
5. Manuscript Title Total thoracoscopic sleeve lobectomy	of the middle and lower lo	bes of the right lung	
6. Manuscript Identifying Number (if you k CCTS-2019-FILSC-01-M05	now it)	_	
Section 2. The Week Under C			
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any aspect of the submitted work (includin statistical analysis, etc.)? Are there any relevant conflicts of inter	g but not limited to grants, da	a a third party (government, commercial, private foundation, etc.) for ata monitoring board, study design, manuscript preparation,	
Section 3. Relevant financial	activities outside the	submitted work.	
of compensation) with entities as descri	ribed in the instructions. Use port relationships that we	nether you have financial relationships (regardless of amount se one line for each entity; add as many lines as you need by re present during the 36 months prior to publication .	
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Do you have any patents, whether plan	nned, pending or issued, br	roadly relevant to the work? Yes No	

Zhou 2



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Dr. Zhou has nothing to disclose.			

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•	5. Manuscript Title Total thoracoscopic sleeve lobectomy of the middle and lower lobes of the right lung					
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