

ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Inform	nation	
Given Name (First Name) Choong-Kyun	2. Surname (Last Name) Noh	3. Date 25-August-2021
4. Are you the corresponding author?	✓ Yes No	
5. Manuscript Title Long-term outcomes of endoscopic submucosal dissection and surgery for undifferentiated intramucosal gastric cancer regardless of size		
6. Manuscript Identifying Number (if you ki 70329	now it)	
C-4:3		
Section 2. The Work Under C	onsideration 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 Vo		
Section 3. Relevant financial	activities outside the submi	tted 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 Vo		
Section 4. Intellectual Prope	rty Patents & Copyrights	
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Do you have any patents, whether plan	nned, pending or issued, broadly	relevant to the work? Yes No



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Section 5.	Relationships not covered above	
	elationships or activities that readers could perceive to have influenced, or that give the appearance of incing, 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	
	anuscript acceptance, journals will ask authors to confirm and, if necessary, update their disclosure statements. rnals may ask authors to disclose further information about reported relationships.	
Section 6.	Disclosure Statement	
Based on the above disclosures, this form will automatically generate a disclosure statement, which will appear in the box below.		
Dr. Noh has noth	ning to disclose.	

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