

ICMJE Form for Disclosure of Potential Conflicts of Interest

Instructions

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4. Intellectual Property.

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

ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)
Kentaro

2. Surname (Last Name)
Tominaga

3. Date
08-March-2018

4. Are you the corresponding author?

☐ Yes

☒ No

Corresponding Author's Name

5. Manuscript Title

Diversion colitis and pouchitis: A mini-review

6. Manuscript Identifying Number (if you know it)

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☒ No

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Dr. Tominaga has nothing to disclose.

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Section 1. Identifying Information

1. Given Name (First Name)
Kenya

2. Surname (Last Name)
Kamimura

3. Date
08-March-2018

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

5. Manuscript Title
Diversion colitis and pouchitis: A mini-review

6. Manuscript Identifying Number (if you know it)

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Section 1. Identifying Information

1. Given Name (First Name)

Junji

2. Surname (Last Name)

Yokoyama

3. Date

08-March-2018

4. Are you the corresponding author?

☐ Yes

☒ No

Corresponding Author's Name

5. Manuscript Title

Diversion colitis and pouchitis: A mini-review

6. Manuscript Identifying Number (if you know it)

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Dr. Yokoyama has nothing to disclose.

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Section 1. Identifying Information

1. Given Name (First Name)
Satoshi

2. Surname (Last Name)
Yamagiwa

3. Date
08-March-2018

4. Are you the corresponding author?

☐ Yes ☒ No

Corresponding Author's Name

5. Manuscript Title

Diversion colitis and pouchitis: A mini-review

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1. Given Name (First Name)
Shuji

2. Surname (Last Name)
Terai

3. Date
08-March-2018

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☐ Yes☒ No

Corresponding Author's Name

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Dr. Terai has nothing to disclose.

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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

ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name) Kazuya	2. Surname (Last Name) Takahashi	3. Date 08-March-2018
4. Are you the corresponding author? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
Corresponding Author's Name _____		
5. Manuscript Title Diversion colitis and pouchitis: A mini-review		
6. Manuscript Identifying Number (if you know it) _____		

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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.)?

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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. Takahashi has nothing to disclose.

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