

ICMJE DISCLOSURE FORM

Date: 10/1/2021

Your Name: Severin Schmid

Manuscript Title: Implication of a novel postoperative recovery protocol to increase day one discharge rate after anatomic lung resection

Manuscript Number (if known): JTD-21-965-CL

In the interest of transparency, we ask you to disclose all relationships/activities/interests listed below that are related to the content of your manuscript. "Related" means any relation with for-profit or not-for-profit third parties whose interests may be affected by the content of the manuscript. Disclosure represents a commitment to transparency and does not necessarily indicate a bias. If you are in doubt about whether to list a relationship/activity/interest, it is preferable that you do so.

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The author's relationships/activities/interests should be defined broadly. For example, if your manuscript pertains to the epidemiology of hypertension, you should declare all relationships with manufacturers of antihypertensive medication, even if that medication is not mentioned in the manuscript.

In item #1 below, report all support for the work reported in this manuscript without time limit. For all other items, the time frame for disclosure is the past 36 months.

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12	Receipt of equipment, materials, drugs, medical writing, gifts or other services	<input checked="" type="checkbox"/> None	
13	Other financial or non-financial interests	<input checked="" type="checkbox"/> None	

Please place an "X" next to the following statement to indicate your agreement:

I certify that I have answered every question and have not altered the wording of any of the questions on this form.

ICMJE DISCLOSURE FORM

Date: 10/11/2021

Your Name: Mohamad Ali Kaafarani

Manuscript Title: Implication of a novel postoperative recovery protocol to increase day one discharge rate after anatomic lung resection

Manuscript Number (if known): JTD-21-965-CL

In the interest of transparency, we ask you to disclose all relationships/activities/interests listed below that are related to the content of your manuscript. "Related" means any relation with for-profit or not-for-profit third parties whose interests may be affected by the content of the manuscript. Disclosure represents a commitment to transparency and does not necessarily indicate a bias. If you are in doubt about whether to list a relationship/activity/interest, it is preferable that you do so.

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I certify that I have answered every question and have not altered the wording of any of the questions on this form.

ICMJE DISCLOSURE FORM

Date: 10/12/2021

Your Name: Gabriele Baldini

Manuscript Title: Implication of a novel postoperative recovery protocol to increase day one discharge rate after anatomic lung resection

Manuscript Number (if known): JTD-21-965-CL

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ICMJE DISCLOSURE FORM

Date: 9/27/2021

Your Name: Alexander Amir

Manuscript Title: Implication of a novel postoperative recovery protocol to increase day one discharge rate after anatomic lung resection

Manuscript Number (if known): JTD-21-965-CL

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ICMJE DISCLOSURE FORM

Date: 9/21/2021

Your Name: Florin COSTESCU

Manuscript Title: Implication of a novel postoperative recovery protocol to increase day one discharge rate after anatomic lung resection

Manuscript Number (if known): JTD-21-965-CL

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9	Participation on a Data Safety Monitoring Board or Advisory Board	<input checked="" type="checkbox"/> None <table border="1" style="width: 100%; border-collapse: collapse;"> <tr><td style="width: 50%; height: 20px;"></td><td style="width: 50%;"></td></tr> <tr><td style="height: 20px;"></td><td></td></tr> <tr><td style="height: 20px;"></td><td></td></tr> </table>									
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12	Receipt of equipment, materials, drugs, medical writing, gifts or other services	<input checked="" type="checkbox"/> None	
13	Other financial or non-financial interests	<input checked="" type="checkbox"/> None	

Please place an "X" next to the following statement to indicate your agreement:

I certify that I have answered every question and have not altered the wording of any of the questions on this form.

ICMJE DISCLOSURE FORM

Date: 9/20/2021

Your Name: Danielle Shafiepour

Manuscript Title: Implication of a novel postoperative recovery protocol to increase day one discharge rate after anatomic lung resection

Manuscript Number (if known): JTD-21-965-CL

In the interest of transparency, we ask you to disclose all relationships/activities/interests listed below that are related to the content of your manuscript. "Related" means any relation with for-profit or not-for-profit third parties whose interests may be affected by the content of the manuscript. Disclosure represents a commitment to transparency and does not necessarily indicate a bias. If you are in doubt about whether to list a relationship/activity/interest, it is preferable that you do so.

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The author's relationships/activities/interests should be defined broadly. For example, if your manuscript pertains to the epidemiology of hypertension, you should declare all relationships with manufacturers of antihypertensive medication, even if that medication is not mentioned in the manuscript.

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12	Receipt of equipment, materials, drugs, medical writing, gifts or other services	<input checked="" type="checkbox"/> None	
13	Other financial or non-financial interests	<input checked="" type="checkbox"/> None	

Please place an "X" next to the following statement to indicate your agreement:

I certify that I have answered every question and have not altered the wording of any of the questions on this form.

ICMJE DISCLOSURE FORM

Date: Oct 11, 2021

Your Name: Jonathan Cools-Lartigue

Manuscript Title: Implication of a novel postoperative recovery protocol to increase day one discharge rate after anatomic lung resection

Manuscript Number (if known): JTD-21-965-CL

In the interest of transparency, we ask you to disclose all relationships/activities/interests listed below that are related to the content of your manuscript. “Related” means any relation with for-profit or not-for-profit third parties whose interests may be affected by the content of the manuscript. Disclosure represents a commitment to transparency and does not necessarily indicate a bias. If you are in doubt about whether to list a relationship/activity/interest, it is preferable that you do so.

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Time frame: past 36 months		
2	Grants or contracts from any entity (if not indicated in item #1 above).	<input checked="" type="checkbox"/> None

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3	Royalties or licenses	<input checked="" type="checkbox"/> X None	
4	Consulting fees	<input checked="" type="checkbox"/> X None	
5	Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or educational events	<input checked="" type="checkbox"/> X None	
6	Payment for expert testimony	<input checked="" type="checkbox"/> X None	
7	Support for attending meetings and/or travel	<input checked="" type="checkbox"/> X None	
8	Patents planned, issued or pending	<input checked="" type="checkbox"/> X None	
9	Participation on a Data Safety Monitoring Board or Advisory Board	<input checked="" type="checkbox"/> X None	

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12	Receipt of equipment, materials, drugs, medical writing, gifts or other services	<input checked="" type="checkbox"/> X None	
13	Other financial or non-financial interests	<input checked="" type="checkbox"/> X None	

Please place an "X" next to the following statement to indicate your agreement:

- I certify that I have answered every question and have not altered the wording of any of the questions on this form.
- X

ICMJE DISCLOSURE FORM

Date: 10/1/2021

Your Name: Sara Najmeh

Manuscript Title: Implication of a novel postoperative recovery protocol to increase day one discharge rate after anatomic lung resection

Manuscript Number (if known): JTD-21-965-CL

In the interest of transparency, we ask you to disclose all relationships/activities/interests listed below that are related to the content of your manuscript. "Related" means any relation with for-profit or not-for-profit third parties whose interests may be affected by the content of the manuscript. Disclosure represents a commitment to transparency and does not necessarily indicate a bias. If you are in doubt about whether to list a relationship/activity/interest, it is preferable that you do so.

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Please place an "X" next to the following statement to indicate your agreement:

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Date: Click or tap to enter a date. 2021/09/26
Your Name: Click or tap here to enter text: CHRISTIAN SIROIS
Christian Sirois M.D.
Lic 1-97328

Manuscript Title: Implication of a novel postoperative recovery protocol to increase day one discharge rate after anatomic lung resection

Manuscript Number (if known): JTD-21-965-CL

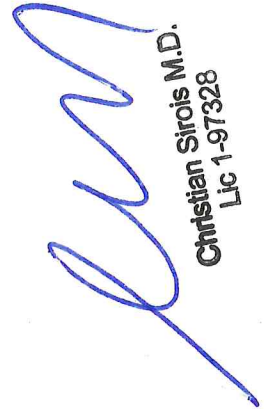
In the interest of transparency, we ask you to disclose all relationships/activities/interests listed below that are related to the content of your manuscript. "Related" means any relation with for-profit or not-for-profit third parties whose interests may be affected by the content of the manuscript. Disclosure represents a commitment to transparency and does not necessarily indicate a bias. If you are in doubt about whether to list a relationship/activity/interest, it is preferable that you do so.

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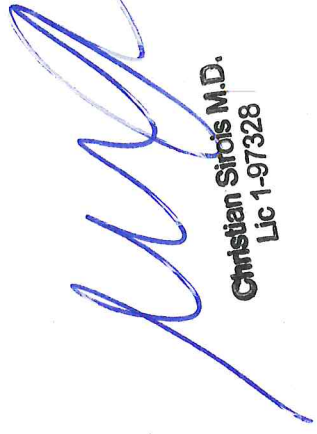
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Christian Sirois M.D.
Lic 1-97328

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I certify that I have answered every question and have not altered the wording of any of the questions on this form.


Christian Siros M.D.
Lic 1-97328

ICMJE DISCLOSURE FORM

Date: 9/19/2021

Your Name: Lorenzo Ferri

Manuscript Title: Implication of a novel postoperative recovery protocol to increase day one discharge rate after anatomic lung resection

Manuscript Number (if known): JTD-21-965-CL

In the interest of transparency, we ask you to disclose all relationships/activities/interests listed below that are related to the content of your manuscript. "Related" means any relation with for-profit or not-for-profit third parties whose interests may be affected by the content of the manuscript. Disclosure represents a commitment to transparency and does not necessarily indicate a bias. If you are in doubt about whether to list a relationship/activity/interest, it is preferable that you do so.

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11	Stock or stock options	<input checked="" type="checkbox"/> None	
12	Receipt of equipment, materials, drugs, medical writing, gifts or other services	<input checked="" type="checkbox"/> None	
13	Other financial or non-financial interests	<input checked="" type="checkbox"/> None	

Please place an "X" next to the following statement to indicate your agreement:

I certify that I have answered every question and have not altered the wording of any of the questions on this form.

ICMJE DISCLOSURE FORM

Date: 9/30/2021

Your Name: David S Mulder

Manuscript Title: Implication of a novel postoperative recovery protocol to increase day one discharge rate after anatomic lung resection

Manuscript Number (if known): JTD-21-965-CL

In the interest of transparency, we ask you to disclose all relationships/activities/interests listed below that are related to the content of your manuscript. "Related" means any relation with for-profit or not-for-profit third parties whose interests may be affected by the content of the manuscript. Disclosure represents a commitment to transparency and does not necessarily indicate a bias. If you are in doubt about whether to list a relationship/activity/interest, it is preferable that you do so.

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The author's relationships/activities/interests should be defined broadly. For example, if your manuscript pertains to the epidemiology of hypertension, you should declare all relationships with manufacturers of antihypertensive medication, even if that medication is not mentioned in the manuscript.

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Please place an "X" next to the following statement to indicate your agreement:

I certify that I have answered every question and have not altered the wording of any of the questions on this form.

ICMJE DISCLOSURE FORM

Date: 10/1/2021

Your Name: Jonathan D. Spicer

Manuscript Title: Implication of a novel postoperative recovery protocol to increase day one discharge rate after anatomic lung resection

Manuscript Number (if known): JTD-21-965-CL

In the interest of transparency, we ask you to disclose all relationships/activities/interests listed below that are related to the content of your manuscript. "Related" means any relation with for-profit or not-for-profit third parties whose interests may be affected by the content of the manuscript. Disclosure represents a commitment to transparency and does not necessarily indicate a bias. If you are in doubt about whether to list a relationship/activity/interest, it is preferable that you do so.

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