

CONFLICT OF INTEREST DISCLOSURE FORM

Based on ICMJE Form

Date: 10/10/2023

Your Name: Giang Quach

Manuscript Title: Surgical Management of Small Bowel Obstruction - What You Need to Know

Manuscript Number (if known): Click or tap here to enter text.

In the interest of transparency, we ask you to disclose all relationships/activities/interests listed below that are related or unrelated to the content of your 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.

Participants of an accredited activity must disclose all personal **financial** and **non-financial relationships**, over the previous 36 months with an **ineligible company** (formerly defined as a commercial interest). **Financial relationships** are those relationships in which the individual benefits by receiving a salary, royalty, consulting fee, honoraria, ownership interest (e.g., stocks, stock options or other ownership interest), or other financial benefits, and may affect activity content relevant to products or services of an **ineligible company**, defined as an entity whose primary business is producing, marketing, selling, re-selling, or distributing healthcare products used by or on patients.

Research grants from **ineligible companies** are financial relationships that should be disclosed, even if the funds go to the researcher's institution and not to the individual researcher.

The author's relationships/activities/interests should be defined broadly and not only related to the manuscript in question. For example, if your manuscript pertains to the epidemiology of shock, you should declare all relationships with manufacturers of treatments used in shock, even if that form of treatment is not mentioned in the manuscript.

According to federal regulations approved by the US Senate, any amount equal to above \$10 USD must be disclosed. Although disclosure of the total amount is not required on this form. Authors are encouraged to search the CMS Open Payments Database found at <https://openpaymentsdata.cms.gov> and report on the JTACS Conflict of Interest Disclosure form ALL COI, and any other conflicts related or unrelated to the manuscript being submitted to the Journal for the last 36 months/3 years.

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.

If the article is accepted, all author JTACS COI forms will be published as supplemental material with the article.

	Name all entities with whom you have this relationship or indicate none (add rows as needed)	Specifications/Comments (e.g., if payments were made to you or to your institution)
Time frame: Since the initial planning of the work		
1	All support for the present manuscript (e.g., funding, provision of study materials, <input checked="" type="checkbox"/> None	
		Click the tab key to add additional rows.

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2	Grants or contracts from any entity (if not indicated in item #1 above).	<input checked="" type="checkbox"/> None <table border="1"> <tr><td></td><td></td></tr> <tr><td></td><td></td></tr> <tr><td></td><td></td></tr> </table>									
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Date: 10/10/2023

Your Name: Martin Zielinski

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