MANUSCRIPT ID NUMBER

Article title (first few words)

First Author: ........................................................................................................
E-mail: ..................................................................................................................

AUTHORSHIP
I, the undersigned author(s), certify that:
• I have seen and approved the final version of the manuscript, and all subsequent versions.
• I have made substantial contributions to conception and design, or acquisition of data, or analysis and interpretation of data;
• I have drafted the article or revised it critically for important intellectual content.
• I agree to be accountable for all aspects of the work in ensuring that questions related to the accuracy or integrity of any part of the work are appropriately investigated and resolved.

I accept public responsibility for it, and believe it represents valid work. As an author of this article, I certify that none of the material in the manuscript has been previously published, nor is included in any other manuscript. I certify that this manuscript is not under consideration for publication elsewhere, nor has it been submitted or accepted in another publication in any form. The rights or interest in the manuscript have not been assigned to any third party.

Moreover, should the editor of Journal of Robotic Surgery request the data upon which the manuscript is based, I shall produce it. I also certify that I have read and complied with the copyright information, as found on the journal home page website.

After submission of this agreement signed by all authors, changes of authorship or in the order of the authors listed will not be accepted by Springer.

A completed and signed copy of this form must be included with your submission. If authors are in multiple locations then more than one form can be used and submitted with the manuscript.

Page 1 of 2 (Signatures and dates are required on page 2)
FINANCIAL DISCLOSURE/CONFLICT OF INTEREST
I certify that any financial interests such as employment, stock ownership, honoraria, paid expert testimony, as well as any personal relationships, academic competition, and intellectual passion which may inappropriately influence my actions, have been included within my manuscript. If none exist, a statement specifying this has also been included. I have used the statement template as shown below, as appropriate.

Conflict of Interest:
Author X declares that he has no conflict of interest.
Author Y has received research grants from Drug Company A.
Author Z has received a speaker honorarium from Drug Company B and owns stock in Drug Company C.
If multiple authors declare no conflict, this can be done in one sentence:
Author X, Author Y, and Author Z declare that they have no conflict of interest.

All funding sources supporting the work and all institutional or corporate affiliations of mine are acknowledged in a footnote.

I have had full access to all the data in the study (if applicable) and thereby accept full responsibility for the integrity of the data and the accuracy of the data analysis.

By checking the box next to my signature I assert that there are no conflicts of interest (both personal and institutional) regarding specific financial interests that are relevant to the work conducted or reported in this manuscript.

Author’s signature
Printed name and date

Author’s signature
Printed name and date

Author’s signature
Printed name and date

Author’s signature
Printed name and date

Author’s signature
Printed name and date

A completed and signed copy of this form must be included with your submission. If authors are in multiple locations then more than one form can be used and submitted with the manuscript.

Page 2 of 2 (Signatures and dates are required on page 2)
Journal of Robotic Surgery
ISSN: 1863–2483 (print version)
ISSN: 1863–2491 (electronic version)
Journal no. 11701
Springer London