

ICMJE Form for Disclosure of Potential Conflicts of Interest

Instructions

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4. Intellectual Property.

This section asks about patents and copyrights, whether pending, issued, licensed and/or receiving royalties.

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Section 1. Identifying Information

1. Given Name (First Name) Yihong	2. Surname (Last Name) Qiu	3. Date 23-September-2020
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Guolin Li
5. Manuscript Title Application of a surgical nursing cooperation program in laparoscopic pancreaticoduodenectomy		
6. Manuscript Identifying Number (if you know it) 2144		

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Dr. Qiu has nothing to disclose.

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Section 1. Identifying Information

1. Given Name (First Name) Xia	2. Surname (Last Name) Ouyang	3. Date 23-September-2020
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Guolin Li
5. Manuscript Title Application of a surgical nursing cooperation program in laparoscopic pancreaticoduodenectomy		
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Dr. Ouyang has nothing to disclose.

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1. Given Name (First Name) Min	2. Surname (Last Name) Luo	3. Date 23-September-2020
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Guolin Li
5. Manuscript Title Application of a surgical nursing cooperation program in laparoscopic pancreaticoduodenectomy		
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Section 1. Identifying Information

1. Given Name (First Name) Lijun	2. Surname (Last Name) Feng	3. Date 23-September-2020
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Guolin Li
5. Manuscript Title Application of a surgical nursing cooperation program in laparoscopic pancreaticoduodenectomy		
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Section 1. Identifying Information

1. Given Name (First Name) Chulian	2. Surname (Last Name) Zheng	3. Date 23-September-2020
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Guolin

2. Surname (Last Name)

Li

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23-September-2020

4. Are you the corresponding author?

Yes No

5. Manuscript Title

Application of a surgical nursing cooperation program in laparoscopic pancreaticoduodenectomy

6. Manuscript Identifying Number (if you know it)

2144

Section 2. The Work Under Consideration 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 No

Section 3. Relevant financial activities outside the submitted work.

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Are there any relevant conflicts of interest? Yes No

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Do you have any patents, whether planned, pending or issued, broadly relevant to the work? Yes No

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Section 5. Relationships not covered above

Are there other relationships or activities that readers could perceive to have influenced, or that give the appearance of potentially influencing, what you wrote in the submitted work?

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Dr. Li has nothing to disclose.

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