

Instructions

The purpose of this form is to provide readers of your manuscript with information about your other interests that could influence how they receive and understand your work. The form is designed to be completed electronically and stored electronically. It contains programming that allows appropriate data display. Each author should submit a separate form and is responsible for the accuracy and completeness of the submitted information. The form is in six parts.

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earning royalties or not

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patent

1 Lai



Section 1. Identifying Inform		
Identifying Inform	nation	
Given Name (First Name) Quirino	2. Surname (Last Name) Lai	3. Date 07-May-2020
4. Are you the corresponding author?	✓ Yes No	
5. Manuscript Title UNCOMMON INDICATIONS FOR ASSOC A SYSTEMATIC REVIEW	CIATING LIVER PARTITION AND PORT	AL VEIN LIGATION FOR STAGED HEPATECTOMY:
6. Manuscript Identifying Number (if you k HBSN-20-355	now it)	
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Do you have any patents, whether plan	nned, pending or issued, broadly relev	vant to the work? Yes V No

Lai 2



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Dr. Lai has nothing to disclose.			

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patent

Mennini 1



Section 1.		
Identifying Inform	nation	
1. Given Name (First Name) Gianluca	2. Surname (Last Name) Mennini	3. Date 07-May-2020
4. Are you the corresponding author?	☐ Yes ✓ No	Corresponding Author's Name Quirino Lai
5. Manuscript Title UNCOMMON INDICATIONS FOR ASSOC A SYSTEMATIC REVIEW	CIATING LIVER PARTITION A	AND PORTAL VEIN LIGATION FOR STAGED HEPATECTOMY:
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Mennini 2



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Larghi Laureiro 1



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Identifying Inform	nation	
1. Given Name (First Name) Zoe	2. Surname (Last Name) Larghi Laureiro	3. Date 07-May-2020
4. Are you the corresponding author?	☐ Yes ✓ No	Corresponding Author's Name Quirino Lai
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Larghi Laureiro 2



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Rossi 1



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