

ICMJE Form for Disclosure of Potential Conflicts of Interest

Instructions

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Section 1. Identifying Information

1. Given Name (First Name) Tak Kyu	2. Surname (Last Name) Oh	3. Date 29-June-2020
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Jung-Won Hwang
5. Manuscript Title Perioperative fluid balance and 30-day unplanned readmission after lung cancer surgery: A retrospective study		
6. Manuscript Identifying Number (if you know it) JTD-20-1474-R1		

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Section 1. Identifying Information

1. Given Name (First Name)
Kwanmien

2. Surname (Last Name)
Kim

3. Date
29-June-2020

4. Are you the corresponding author?

Yes No

Corresponding Author's Name
Jung-Won Hwang

5. Manuscript Title

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JTD-20-1474-R1

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Dr. Kim has nothing to disclose.

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1. Given Name (First Name) Jin-Hee	2. Surname (Last Name) Kim	3. Date 29-June-2020
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Sung-Hee

2. Surname (Last Name)
Han

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Hwang

3. Date
29-June-2020

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