

## ICMJE Form for Disclosure of Potential Conflicts of Interest

### 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.

#### 1. Identifying information.

#### 2. The work under consideration for publication.

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#### 4. Intellectual Property.

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

#### 5. Relationships not covered above.

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**Other:** Anything not covered under the previous three boxes

**Pending:** The patent has been filed but not issued

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**Licensed:** The patent has been licensed to an entity, whether earning royalties or not

**Royalties:** Funds are coming in to you or your institution due to your patent

## ICMJE Form for Disclosure of Potential Conflicts of Interest

### Section 1. Identifying Information

1. Given Name (First Name) Hongjin	2. Surname (Last Name) Liu	3. Date 06-June-2020
4. Are you the corresponding author? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Corresponding Author's Name Jingming Ye
5. Manuscript Title Practice of Surgical Treatment of Breast Cancer in China During the Novel Coronavirus COVID-19 Outbreak		
6. Manuscript Identifying Number (if you know it) TBCR-20-18		

### 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

If yes, please fill out the appropriate information below. If you have more than one entity press the "ADD" button to add a row. Excess rows can be removed by pressing the "X" button.

Name of Institution/Company	Grant?	Personal Fees?	Non-Financial Support?	Other?	Comments
The BEIJING MEDICAL AWARD FOUNDATION	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

### Section 3. Relevant financial activities outside the submitted work.

Place a check in the appropriate boxes in the table to indicate whether you have financial relationships (regardless of amount of compensation) with entities as described in the instructions. Use one line for each entity; add as many lines as you need by clicking the "Add +" box. You should report relationships that were **present during the 36 months prior to publication**.

Are there any relevant conflicts of interest? ☐ Yes ☒ No

### Section 4. Intellectual Property -- Patents & Copyrights

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

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Dr. Liu has nothing to declare.

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### Section 6. Disclosure Statement

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Dr. Liu reports grants from The BEIJING MEDICAL AWARD FOUNDATION, during the conduct of the study.

### Evaluation and Feedback

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## ICMJE Form for Disclosure of Potential Conflicts of Interest

### Section 1.

#### Identifying Information

1. Given Name (First Name)

Ling

2. Surname (Last Name)

Xu

3. Date

06-June-2020

4. Are you the corresponding author?

☐ Yes

☒ No

Corresponding Author's Name

Jingming Ye

5. Manuscript Title

Practice of Surgical Treatment of Breast Cancer in China During the Novel Coronavirus COVID-19 Outbreak

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Are there any relevant conflicts of interest?

☐ Yes

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Do you have any patents, whether planned, pending or issued, broadly relevant to the work?

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☒ No

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Dr. Xu has nothing to disclose.

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1. Given Name (First Name)

Yinhua

2. Surname (Last Name)

Liu

3. Date

06-June-2020

4. Are you the corresponding author?

☒ Yes ☐ No

5. Manuscript Title

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Dr. Liu serves as an unpaid editorial board member of Translational Breast Cancer Research.

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## ICMJE Form for Disclosure of Potential Conflicts of Interest

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1. Given Name (First Name) Jingming	2. Surname (Last Name) Ye	3. Date 06-June-2020
4. Are you the corresponding author? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
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Name of Institution/Company	Grant?	Personal Fees?	Non-Financial Support?	Other?	Comments
The BEIJING MEDICAL AWARD FOUNDATION (Grant number YXJL-2016-0040-0065)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

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