

ICMJE Form for Disclosure of Potential Conflicts of Interest

Instructions

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)

Zirui

2. Surname (Last Name)

He

3. Date

02-April-2017

4. Are you the corresponding author?

Yes No

Corresponding Author's Name

Jianwen Li

5. Manuscript Title

Laparoscopic inguinal hernia repair in elderly patients: single center experience in 12 years

6. Manuscript Identifying Number (if you know it)

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Dr. He has nothing to disclose.

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Section 1. Identifying Information

1. Given Name (First Name) Xiaohui	2. Surname (Last Name) Hao	3. Date 02-April-2017
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Jianwen Li
5. Manuscript Title Laparoscopic inguinal hernia repair in elderly patients: single center experience in 12 years		
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Section 1. Identifying Information

1. Given Name (First Name)

Jianwen

2. Surname (Last Name)

Li

3. Date

02-April-2017

4. Are you the corresponding author?

Yes No

5. Manuscript Title

Laparoscopic inguinal hernia repair in elderly patients: single center experience in 12 years

6. Manuscript Identifying Number (if you know it)

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Fei

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Yes No

Corresponding Author's Name
Jianwen Li

5. Manuscript Title
Laparoscopic inguinal hernia repair in elderly patients: single center experience in 12 years

6. Manuscript Identifying Number (if you know it)

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5. Manuscript Title Laparoscopic inguinal hernia repair in elderly patients: single center experience in 12 years		
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